

# Comparison of Dietary Habits and Diseases Among Girls and Women's Private Hostels in Hyderabad

Mylaram Akshaya, Lakkakula Supriya

Ms.c Nutrition and dietetics, Osmania University, Jahanavi Degree &Pg College, Hyderabad, India

---

**Abstract:** The relationship between dietary habits and disease prevalence among Girls & women residing in hostel environments. Hostel settings, characterised by communal living arrangements, often influence individuals' dietary choices and subsequently impact their health outcomes. More specifically, the characteristics of hostel food with emphasis placed upon Food Hygiene, Food Habits, Chronic Diseases, GI disorders.

**Objective:** To assess the dietary habits & diseases in girls and women's hostels & interplay between dietary behaviours & health outcomes in hostels.

**Methods:** A Convenient, selective sampling, 24-hour Dietary recall, food frequency questionnaire was adopted to collect the data. The sample consisted of a total of 104 subjects in 3 3-month period.

**Result:** Hostellers are more vulnerable to diseases due to poor eating habits, irregular time management, poor hygiene, taste etc are some of the reasons and due to these they are diverting themselves to street foods, which is directly effect their health and leads to complications.

**Conclusion:** The study emphasises the detrimental impact of hostel life on the nutritional status of young women. The high prevalence of overweight and obesity, coupled with inadequate nutrient intake, irregular sleep patterns, pcods among women at a young age.

**Key Words:** Food Hygiene, Food Habits, Chronic Diseases, GI Disorders.

---

Date of Submission: 11-06-2025

Date of Acceptance: 24-06-2025

---

## I. Introduction:

Dietary habits and diseases among Girls, particularly in women's hostels, is crucial for promoting overall health and well-being. In such environments, where individuals often lead busy lives and have limited access to home-cooked meals, dietary habits can significantly impact their health outcomes. Firstly, understanding the dietary habits prevalent among adults in women's hostels is essential. Often, due to time constraints and convenience, individuals may rely heavily on processed foods, fast food, and snacks high in sugar and fat. This reliance on unhealthy options can lead to deficiencies in essential nutrients and contribute to unhealthy.

### Diseases faced by girls & women in private hostels:

Adults, especially women living in hostels, are susceptible to various diseases due to a combination of factors such as lifestyle habits, stress, and limited access to healthcare. Some common diseases faced by adults, particularly women, in hostels include:

#### 1.1 Nutritional Diseases:

Inadequate dietary habits and restricted access to nutritious foods can lead to deficiencies in vital nutrients such as iron, vitamin D, calcium, and B vitamins. These deficiencies may contribute to the development of nutritional disorders such as iron-deficiency anemia, osteoporosis, and weakened immune function.

#### 1.2 Obesity and Metabolic Disorders:

Unhealthy eating habits—such as frequent consumption of processed foods, high sugar intake, and irregular meal patterns—combined with a sedentary lifestyle and high levels of stress, significantly contribute to the development of obesity and related metabolic disorders. Obesity is not merely a cosmetic concern but a serious health condition that is closely linked to insulin resistance, which can progress to type 2 diabetes over time. Additionally, excess body weight and disrupted metabolism increase the risk of developing a range of non-communicable diseases, including cardiovascular diseases, hypertension (high blood pressure), and dyslipidemia (abnormal cholesterol and lipid levels). These conditions collectively place individuals at a higher risk of heart attacks, strokes, and other serious health complications. Early intervention through balanced

nutrition, regular physical activity, stress management, and routine health screenings is essential to prevent and manage these disorders effectively.

### **1.3. Mental Health Disorders:**

The hostel environment, while offering independence and new experiences, can also pose significant mental health challenges, especially for girls and women. Factors such as academic pressure, performance anxiety, homesickness, social isolation, and limited emotional support can create a stressful atmosphere. The absence of close family contact and the need to adapt to a new social setting may intensify feelings of loneliness and insecurity. These stressors can lead to a range of mental health issues, including depression, generalized anxiety disorders, panic attacks, and eating disorders such as anorexia nervosa or binge eating. Constant exposure to high-stress environments without adequate coping mechanisms can also result in chronic stress and burnout. In some cases, these conditions may go unrecognized due to the stigma associated with mental health, lack of awareness, or limited access to professional psychological support. Moreover, female hostel residents may be more vulnerable due to hormonal fluctuations, gender-based expectations, and safety concerns, further exacerbating their mental health struggles. Promoting mental health awareness, establishing peer support groups, providing access to counseling services, and creating a supportive hostel culture are essential steps in addressing these challenges.

### **1.4 Reproductive Health Issues:**

Women living in hostels often encounter various reproductive health challenges that can significantly affect their overall well-being. Among the most common issues are irregular menstrual cycles, polycystic ovary syndrome (PCOS), and other menstrual disorders such as dysmenorrhea (painful periods), menorrhagia (heavy bleeding), and amenorrhea (absence of menstruation). These conditions can arise or be aggravated by a combination of factors commonly observed in hostel settings, including high stress levels, poor dietary habits, lack of physical activity, erratic sleep patterns, and inadequate access to timely and appropriate healthcare services. Stress, especially from academic pressure or personal adjustment issues, can disrupt the hormonal balance necessary for a regular menstrual cycle. Similarly, nutritional deficiencies—particularly in iron, zinc, and essential fatty acids—can lead to menstrual irregularities and exacerbate conditions like PCOS, which affects a significant proportion of young women and is linked to hormonal imbalances, insulin resistance, and metabolic disturbances. Furthermore, limited awareness about reproductive health, embarrassment in discussing sensitive issues, and the absence of regular gynecological check-ups in hostel environments can delay diagnosis and treatment. This may lead to long-term health consequences, including infertility, chronic pelvic pain, and psychological distress.

Promoting reproductive health education, improving access to menstrual hygiene products, encouraging healthy lifestyle habits, and ensuring periodic medical screening are vital steps toward addressing these issues and empowering women to take control of their reproductive health.

### **1.5 Infectious Diseases:**

Hostel environments, characterized by shared living spaces, communal bathrooms, and close physical proximity among residents, can significantly elevate the risk of infectious disease transmission. In such settings, common infections such as colds, influenza (flu), and respiratory tract infections can spread rapidly through airborne droplets, contaminated surfaces, or direct contact.

Additionally, urinary tract infections (UTIs) are particularly prevalent among women in hostels due to factors such as poor hydration, inadequate menstrual hygiene management, and delayed access to clean restroom facilities. The use of shared toilets and lack of proper sanitation can further increase the risk. In more severe cases, sexually transmitted infections (STIs) may also pose a threat, especially in environments where sexual health education is lacking and there is limited access to preventive resources such as condoms or sexual health counseling. Poor personal hygiene practices—such as infrequent handwashing, improper sanitation, and the sharing of personal items like towels or razors—can amplify the spread of infectious agents. Furthermore, limited access to on-site medical care, delayed diagnosis, and lack of awareness about early symptoms can hinder timely treatment, leading to prolonged illness and increased transmission rates. To mitigate these risks, it is essential to promote hygiene awareness, implement infection control measures, ensure regular cleaning of shared facilities, and facilitate access to basic healthcare services and preventive education. Conducting periodic health camps, offering vaccinations, and establishing protocols for the management of communicable diseases can greatly improve the overall health and safety of hostel residents.

### **1.6 Digestive Disorders:**

Adults living in hostels often experience digestive disorders due to a combination of irregular eating habits, frequent consumption of processed and low-fiber foods, and high levels of stress. Skipping meals,

overeating, or relying on unhealthy hostel or fast food can disrupt normal digestive function, leading to issues such as indigestion, gastritis, constipation, and irritable bowel syndrome (IBS). Stress further aggravates these conditions by affecting gut motility and altering the balance of gut microbiota. Limited access to fresh, home-cooked meals and a lack of awareness about proper dietary practices can contribute to the persistence of these gastrointestinal problems, ultimately impacting overall health, concentration, and quality of life.

### **1.7 Sleep Disorders:**

Hostel residents often face disrupted sleep patterns caused by environmental factors such as noise, overcrowded rooms, poor bedding, and inadequate ventilation, along with psychological stress from academic pressure and lifestyle-related issues like irregular daily routines. These disruptions can lead to various sleep disorders, including insomnia (difficulty falling or staying asleep), sleep apnea (interrupted breathing during sleep), and restless leg syndrome (an uncontrollable urge to move the legs, especially at night). Over time, poor sleep quality can impair cognitive performance, weaken the immune system, and negatively affect mental and emotional well-being. Addressing these issues requires creating a conducive sleep environment, encouraging healthy sleep hygiene practices, and raising awareness about the importance of restorative sleep.

### **1.8 Chronic Diseases:**

A disrupted and unbalanced diet, often common among hostel residents, can have long-term health consequences, increasing the risk of developing chronic diseases. Consistently poor nutritional intake—high in sugars, unhealthy fats, and processed foods, and low in essential nutrients—can lead to conditions such as obesity, type 2 diabetes, hypertension, cardiovascular diseases, and even kidney damage or kidney failure. The lack of dietary regulation, combined with sedentary habits and minimal health monitoring, allows these conditions to develop silently over time. Once established, chronic diseases often require lifelong management and can significantly reduce quality of life. Preventive measures, including regular health check-ups, balanced diets, and awareness programs, are crucial to reducing the risk of such long-term complications.

## **II. Literature Review**

A growing body of research highlights the significant health challenges faced by young women residing in hostels, largely due to poor dietary habits, limited nutritional awareness, and inadequate food quality. The World Health Organisation [1] and the National Institute of Nutrition [2] emphasize the importance of a balanced diet for preventing nutritional deficiencies and chronic illnesses. However, studies show that hostel environments often fail to support these standards. Kaur and Kaur [3] found that many college-going girls exhibit irregular eating patterns, which contribute to health issues such as anemia and fatigue. Sharma and Rani [4] identified a direct link between the poor quality of hostel food and increased incidence of metabolic and gastrointestinal problems. Patel and Shah [5] further noted that lifestyle disorders such as obesity and diabetes are more prevalent among hostel students due to unhealthy food choices and sedentary behavior. Chauhan and Gupta [6], along with data from the National Health Portal of India [7], highlighted the rising prevalence of PCOS and hormonal imbalances among adolescent girls, often aggravated by stress and poor nutrition. Additionally, Tripathi and Yadav [8] reported a high occurrence of digestive disorders like IBS among hostelers, while Singh and Sharma [9] documented sleep disturbances and mental stress linked to academic pressures. Importantly, Goyal and Singh [10] demonstrated that health awareness programs can significantly improve dietary behavior and health outcomes among hostel residents. Together, these studies underscore the urgent need for targeted health interventions, awareness campaigns, and improved nutritional services in women's hostel settings.

## **III. Strategies to Raise Awareness Among Female Hostel Residents:**

### **Addressing Health and Well-Being Challenges in Women's Hostels: A Multifaceted Approach**

Effectively tackling the health, nutritional, and psychological challenges faced by women in hostel settings requires a holistic and multifaceted strategy. At the core of this approach lies education and awareness, which empower residents to make informed decisions regarding their health and lifestyle. Educational programs tailored to women's needs can help raise awareness about nutrition, reproductive health, mental well-being, and safety. These efforts should be complemented by structural and community-based interventions that create a supportive and resourceful living environment.

#### **Key Strategies Include:**

- **Workshops and Seminars:**

Organize regular sessions focusing on critical topics such as women's health, personal safety, career development, nutrition, mental wellness, and empowerment. These sessions can be led by healthcare professionals, counselors, legal experts, and motivational speakers who bring credibility and actionable

guidance.

- **Information Boards:**

Place visually engaging notice boards throughout the hostel premises with posters, infographics, and leaflets that address important topics like menstrual hygiene, self-defense techniques, stress management, legal rights, and helpline numbers. These boards serve as passive yet effective educational tools accessible to all residents.

- **Awareness Campaigns:**

Launch targeted awareness drives using both online and offline platforms to address sensitive issues such as gender equality, sexual consent, reproductive health, and body positivity. Activities may include interactive sessions, poster-making competitions, awareness walks, or social media challenges to ensure greater participation and impact.

- **Peer Education Programs:**

Identify and train enthusiastic hostel residents to act as peer educators or health ambassadors. These leaders can conduct peer group discussions, share accurate information, and offer a relatable support system, thereby fostering a stronger sense of community and shared responsibility.

- **Collaboration with NGOs and Health Organizations:**

Partnering with local non-governmental organizations, women's rights groups, and public health departments can bring additional resources and expertise into the hostel. These collaborations can facilitate access to free counseling services, legal aid, hygiene kits, and skill-building workshops.

- **Access to Nutritious Meals:**

Improve the quality of meals served in hostel cafeterias by introducing nutritionally balanced menus, limiting processed foods, and encouraging the inclusion of fruits, vegetables, whole grains, and lean proteins. Where possible, provide communal kitchens where residents can prepare their own healthy meals, encouraging better dietary habits and food literacy.

- **Anonymous Feedback Channels:**

Establish suggestion boxes, anonymous digital forms, or QR-code-based feedback systems to allow residents to share concerns, complaints, or ideas without fear of judgment or reprisal. This promotes transparency and encourages hostel management to address issues proactively.

- **Regular Updates and Communication:**

Keep residents informed about all ongoing initiatives, workshops, and available resources through weekly or monthly newsletters, WhatsApp groups, email updates, or community meetings. Effective communication ensures greater awareness and participation among residents.

By integrating these strategies, hostel environments can evolve into safe, supportive, and health-conscious spaces that contribute positively to the physical, mental, and social well-being of women. Empowering hostel residents through education, community engagement, and access to essential resources not only improves their present quality of life but also equips them with lifelong tools for self-care and resilience.

#### **IV.Methods:**

This cross-sectional study was conducted over a period of three months in selected private women's hostels located in Hyderabad. A convenience sampling technique was used to recruit participants, resulting in a sample size of 104 female students residing in these hostels. The age range of participants was 13 to 40 years, and individuals below 13 years of age were excluded from the study to ensure appropriateness of the questionnaire content and ethical considerations. Data were collected using a structured online questionnaire designed via Google Forms (refer to Annexure). The questionnaire consisted of multiple-choice items and dichotomous (yes/no) questions, all tailored to align with the specific objectives of the study. The tool was developed and pre-validated to ensure reliability and relevance of the data collected. To assess dietary behaviour, two established methods were used: the Food Frequency Questionnaire (FFQ) and the 24-hour dietary recall. The FFQ provided insights into the frequency and types of foods consumed over a longer duration, while the 24-hour recall offered detailed information on the respondents' recent food intake, meal timings, and dietary preferences. These dietary assessment tools were instrumental in identifying nutritional patterns and evaluating risk factors potentially contributing to health issues among hostel residents. All participants provided written informed consent, which included their signatures, prior to participation. Confidentiality and privacy were strictly maintained, and participants' identities remained anonymous throughout the research process. They were clearly informed that the study posed no physical or psychological risk. Following data collection, responses were tabulated and analyzed using both descriptive and inferential statistical methods. Quantitative variables such as age were evaluated using means, standard deviations, and standard errors, while frequencies and percentages were used to interpret and present qualitative data.

V. Results:

TASTE AND HYGIENE FOOD IN HOSTEL

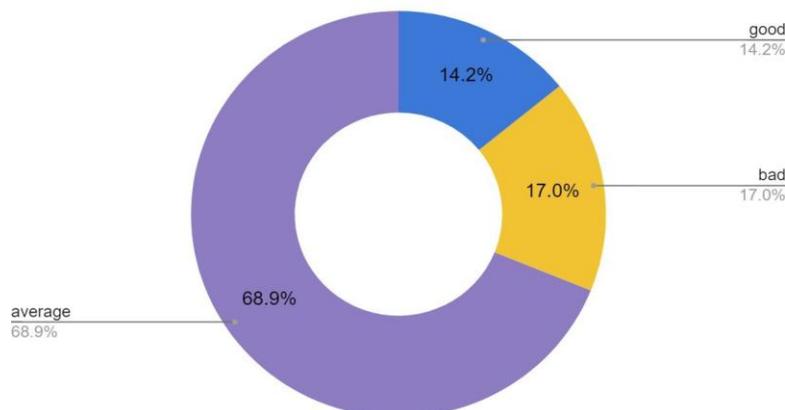


Figure 1: Distribution of subjects as per Taste and hygiene of hostel food:

Figure 1 illustrates the perceptions of hostel residents regarding the quality of food served in terms of taste and hygiene. The data is divided into three categories:

1. **Average – 68.9%**

A significant majority of respondents (nearly **7 out of 10**) rated the food as *average*. This indicates that while the food may be acceptable, it likely lacks consistency in quality, flavour, or hygiene, and may not fully meet residents' expectations.

2. **Bad – 17.0%**

About **17%** of participants found the food to be *bad*, suggesting concerns with either poor taste, inadequate hygiene, or both. This segment highlights a notable dissatisfaction among a portion of residents and points to the need for improvement.

3. **Good – 14.2%**

Only **14.2%** of respondents rated the food as *good*. This relatively small percentage indicates that few residents are satisfied with the current food standards in their hostels.

**Summary:**

The chart suggests that there is **considerable room for improvement** in the taste and hygiene of hostel food. With over **85% of respondents** rating the food as either average or bad, this data calls for a review of cooking practices, ingredient quality, and hygiene protocols in hostel kitchens. Conducting feedback sessions, involving nutrition experts, and monitoring food preparation could help enhance both taste and health standards.

PREFERENCE OF HOSTEL FOOD OR STREET FOOD

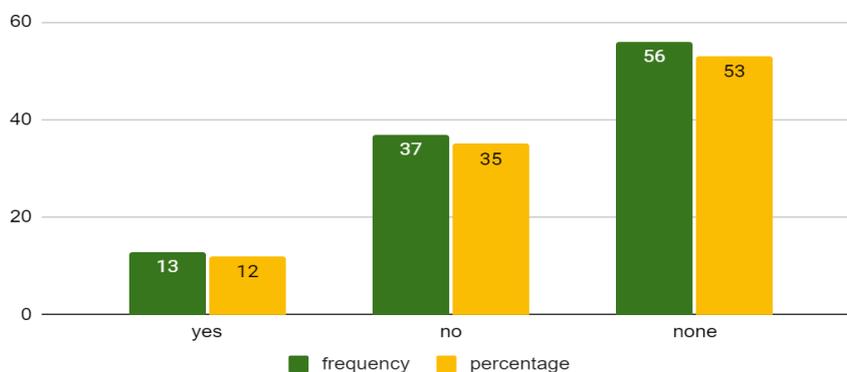


Figure 2 Distribution of subject as per preference of hostel food or Street food:

Figure 2 presents the frequency and percentage of different health problems reportedly experienced by hostel residents due to dietary conditions in the hostel.

**Key Observations:**

1. **Obesity**

- **Frequency:** 6 respondents

- **Percentage:** 5%
- Interpretation: A small number of residents reported experiencing obesity as a health issue, potentially linked to unhealthy, high-calorie food options and a sedentary hostel lifestyle.
- 2. **PCOD (Polycystic Ovarian Disease)**
  - **Frequency:** 14 respondents
  - **Percentage:** 13%
  - Interpretation: A more notable proportion of participants indicated PCOD as a concern. Poor nutrition, irregular meal timings, and stress are possible contributing factors among young women in hostels.
- 3. **Others**
  - **Frequency:** 86 respondents
  - **Percentage:** 82%
  - Interpretation: The majority of participants reported experiencing **other health issues**, which likely include digestive problems (constipation, acidity), nutritional deficiencies (anemia, fatigue), infections (UTIs, food poisoning), or mental health

## VI. Conclusion:

The chart highlights a critical health concern: **over 80%** of hostel residents experience some form of health issue potentially related to food quality. While a few struggle with obesity and PCOD, the broader impact lies in varied and possibly more serious health conditions grouped under "others." This emphasizes the need for improved food standards, nutritional planning, and regular health monitoring in hostel environments.

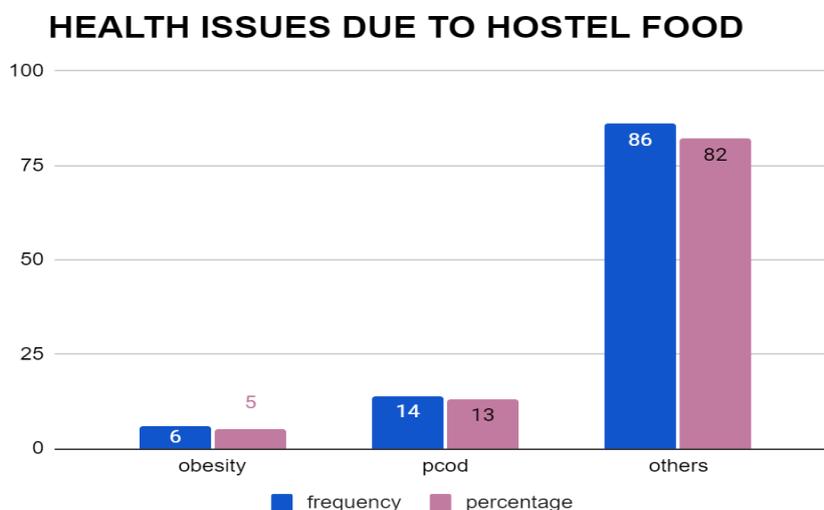


Figure 3 Distribution of subject as per health issues due to hostel food

Figure 3 compares the **frequency** (blue bars) and **percentage** (pink bars) of various health issues experienced by hostel residents as a result of the food provided.

### Breakdown of the Chart:

1. **Obesity**
  - **Frequency:** 6 participants
  - **Percentage:** 5%
  - Interpretation: A small portion of respondents reported obesity, likely due to high-carb, oily diets combined with limited physical activity in the hostel environment.
2. **PCOD (Polycystic Ovarian Disease)**
  - **Frequency:** 14 participants
  - **Percentage:** 13%
  - Interpretation: PCOD is a significant concern among female residents, possibly exacerbated by irregular eating habits, poor-quality nutrition, and stress—factors commonly associated with hostel living.
3. **Others**
  - **Frequency:** 86 participants
  - **Percentage:** 82%
  - Interpretation: The vast majority of respondents reported **other health issues**. This likely includes problems such as:

**Summary:**

Gastrointestinal issues (e.g., acidity, constipation, IBS)

- Nutritional deficiencies (e.g., anemia, vitamin deficiency)
- Infectious diseases (e.g., food poisoning, UTIs)
- Mental health effects (e.g., fatigue, low immunity due to poor diet)

The data reveals a concerning prevalence of health issues associated with hostel food. While obesity and PCOD are significant, the overwhelming majority fall into the "others" category, indicating a wide range of underlying conditions. This underscores the urgent need for improvements in hostel food quality, nutritional balance, hygiene, and regular health screenings to safeguard the health of residents.

### SKIP A MEAL IN A DAY

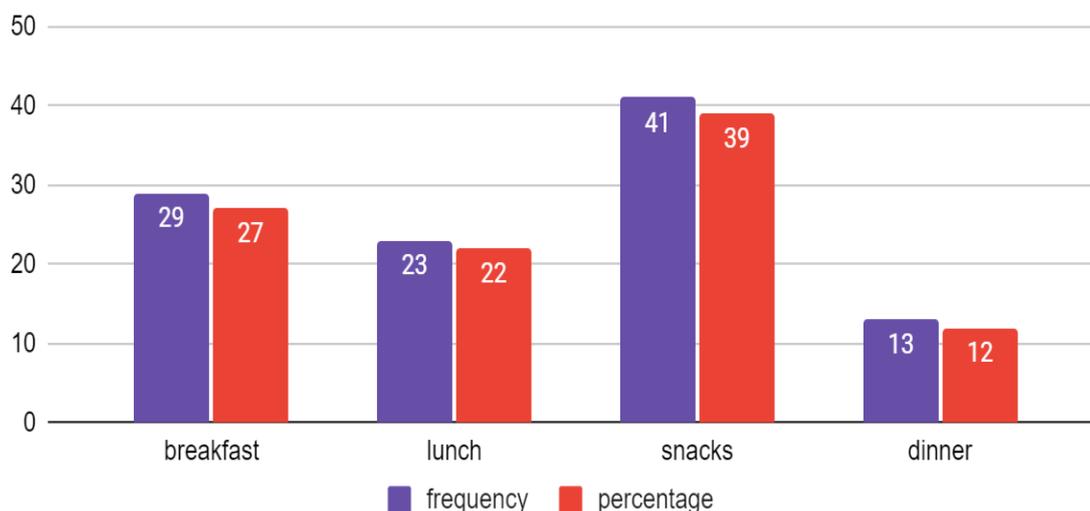


Figure 4: Distribution of subjects as per skipping a meal in a day:

Figure 4 Analyse the whole day meals like breakfast,lunch,snacks,dinner shows frequency and percentage of Hostellers.

- 1. Breakfast**
  - Frequency:29
  - Percentage:27
  - Interpretation: As we consider in a whole day of meals breakfast is major meal.As study shows that consuming breakfast with out any skip is healthy,and their will be long break between dinner and breakfast so having a healthy breakfast requarly impact our whole day activities.
- 2. Lunch**
  - Frequency:23
  - Percentage:22
  - Interpretation:lunch commonly combination of proteins,fats,major carbohydrates.Lunch should be heavy with protein sources and limited carbohydrates to enhance our immunity or to boost up our physical activities.protein source like eggs, dal,panner etc carbohydrates like rice, Roti etc
- 3. Snacks**
  - Frequency:41
  - Percentage:39
  - Interpretation: Snacks a simple refresh meal in a day as we include bread toast, sprouts, tea ,coffee,fruits etc but most of Hostellers skip it due to their busy schedule perhaps lazyness so having a snack in q day is good to health and stress free from day schedules.
- 4. Dinner**
  - Frequency :13
  - Percentage :12
  - Interpretation :Dinner final meal of a day so having a less portion size is enough during dinner time because their is no physical activity and our body is on rest position.

Summary:

The chart highlights that Hostelers are likely to avoiding snacks , breakfast,lunch,dinner respectively.It shows hosterls are skipping snacks due to their buzy schedules and getting tierd off with their works.And second mostly their are skipping breakfast due to late nights,night shift works etc which leads impact on their overall mental and physicial health.These furthermore leads to the chronic diseases in future so to overcome these problems they must have their meals time to time with out any drawback by adjusting their schedules.

### VII. Discussion:

The primary aim of this study was to analyze and understand the dietary habits of female hostel residents in private hostels and to assess the associated health outcomes.

Based on the survey responses regarding food taste and hygiene, it was observed that:

- 69% of participants rated the food as average,
- 17% rated it as bad, and
- Only 14% rated it as good.

This suggests that the majority of hostel residents perceive the food quality to be subpar in terms of hygiene and taste. Such poor food quality can contribute to various nutritional deficiencies and long-term health problems.

In terms of meal-skipping behavior, the study found that:

- 39% regularly skip snacks,
- 27% skip breakfast,
- 22% skip lunch, and
- Only 12% skip dinner.

These statistics indicate that a significant number of students do not follow a balanced and timely diet, particularly skipping breakfast and lunch, which are crucial meals for maintaining metabolic health and energy levels. This irregular eating pattern is a major concern and can lead to a range of health issues including fatigue, lowered immunity, and digestive disorders.

The survey also explored the prevalence of health issues linked to dietary habits. It revealed:

- 6% of participants reported obesity,
- 13% reported PCOD (Polycystic Ovarian Disease),
- The majority (82%) reported other health issues, such as underweight conditions, cardiovascular diseases (CVDs), insomnia, diabetes, and infections.

These findings underline the serious impact of poor diet and hostel food quality on physical health, particularly among young women who are already vulnerable to hormonal and metabolic disorders.

Additionally, food preferences were analyzed. The study shows that:

- 53% of the participants are not allowed to eat street food by hostel rules,
- 35% stated they were not comfortable with the food served in the hostel, and
- 12% expressed a preference for street food over hostel meals.

This data highlights a dissatisfaction with hostel food, leading to poor appetite and inconsistent eating habits, further exacerbating the risk of nutritional imbalances and disease.

### VIII. Conclusion:

This study highlights a concerning trend in the dietary habits and health conditions of women residing in private hostels. Compared to the general population, hostel residents appear to be at a higher risk for various health issues, including obesity, type 2 diabetes, cardiovascular diseases (CVDs), polycystic ovarian disease (PCOD), sleep disorders, and infections. These health problems are largely attributed to poor food hygiene and quality, irregular meal patterns, frequent skipping of meals, preference for unhealthy street food, and a lack of physical activity. The cumulative impact of these factors may predispose hostel residents to chronic and lifestyle-related diseases if left unaddressed. Therefore, there is an urgent need for interventions aimed at improving food quality in hostels, promoting nutrition education, encouraging regular physical activity, and implementing health monitoring programs to safeguard the well-being of this vulnerable population.

### References

- [1]. World Health Organization. (2021). *Healthy diet*. <https://www.who.int/news-room/fact-sheets/detail/healthy-diet>
- [2]. National Institute of Nutrition (India). (2020). *Dietary guidelines for Indians: A manual*. Indian Council of Medical Research.
- [3]. Kaur, N., & Kaur, R. (2022). Dietary habits and health issues among college going girls: A cross-sectional study. *Journal of Clinical and Diagnostic Research*, 16(1), LC05–LC09. <https://doi.org/10.7860/JCDR/2022/52365.15748>
- [4]. Sharma, R., & Rani, S. (2021). Impact of hostel food quality on students' health: A nutritional survey. *Indian Journal of Community Health*, 33(3), 450–455.

- [5]. Chauhan, A., & Gupta, P. (2020). Association of lifestyle factors with PCOS and obesity among adolescent girls. *Journal of Reproductive Health, 17*(4), 232–239.
- [6]. National Health Portal of India. (2021). *Polycystic ovarian syndrome (PCOS)*. <https://www.nhp.gov.in/>
- [7]. Patel, A. K., & Shah, S. M. (2019). Nutritional risk factors and prevalence of lifestyle disorders among young adults living in hostels. *International Journal of Nutrition, 5*(1), 12–18.
- [8]. Tripathi, N., & Yadav, A. (2020). Food consumption patterns and gastrointestinal disorders among hostel students. *Asian Journal of Home Science, 15*(2), 95–98.
- [9]. Singh, D., & Sharma, M. (2023). Sleep patterns and academic stress among university students in India. *Journal of Mental Health and Human Behaviour, 28*(1), 56–60.
- [10]. Goyal, A., & Singh, P. (2022). Awareness of healthy eating habits among hostellers: An educational intervention. *Health Promotion International, 37*(4), daac089. <https://doi.org/10.1093/heapro/daac089>