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Impact of Eating Habits on Self Esteem and Mental Health Among College Students

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ABSTRACT

This study explains the impact of eating habits on self-esteem, and mental health among college students. Sampling Stratified random sampling was used to involve 300 participants in this research at Anugraha Institute of Social Sciences college at Dindigul. Each part of the sample, which was made up of 300 respondents or participants (150 males and 150 females), was divided into two groups: undergraduate (n=75 each) and postgraduate (n=75 each). Assessment predominated by standardized measures was conducted to determine eating behaviour, self-worth, and psychological health. The results show that self-esteem and psychological well-being of students are majorly affected when their eating behaviour is involved. It is noteworthy that the results were more positive among the postgraduate students than undergraduate students, because the latter were usually less knowledgeable and less experienced to engage in making informed lifestyle decisions. In general, those students with a balanced diet have a better self-image and fewer mental issues. The findings show importance of giving college students nutritional information and advice, counseling and support.

Key words: Eating behavior, self-esteem, mental health, college students, gender, academic qualification etc.

INTRODUCTION

College is a life-changing period for students aged 17–22 who are pursuing undergraduate or graduate degrees. There is a huge change in their social interaction, mental capabilities, and physical health during this period. It is at this time when late adolescence transforms into young adulthood that rates of growth and development accelerate. Students are attempting to be independent, often in the medium of food, the timing of meals and individual preferences. This age bracket covers the ages of identity vs. role confusion (adolescence) and intimacy vs. isolation (young adulthood) according to the Erikson psychosocial theory (Erikson, 1968). During the first stage, people are preoccupied with stabilising their self-perception, body image, self-esteem and individual beliefs, whereas building substantial intimate relationships becomes the priority in the young adulthood stage.

The eating patterns may exert profound impacts on the levels of physical health and self-perception and self-esteem and may definitively affect the capacity to indulge in intimate relations (Ahmad, Sharif, & Khan, 2023; Mallaram et al., 2023). The method of eating of people changes during college years because of unconventional hours, the stresses of studies, peer influence and more freedom of decision. Lack of regular meals in the students is a possibility since they may find it difficult to maintain emotional balance or experience fast food or unbalanced eating habits (Choi, 2020; El Ansari & Berg-Beckhoff, 2015; Greaney et al., 2009; Lacaille et al., 2011). Diet influences both physical and psychological health; that is, a diet with low nutritional value, high proportions of processed foods, and low proportions of fruits and vegetables has been implicated in the development of stress, anxiety, and depression (Farhangi, Dehghan, & Jahangiry, 2018; Hilger-Kolb et al., 2018; Li, Chen, & Zhang, 2024).

This is the point at which people are the most susceptible to low self-esteem or the development of a negative self-image in terms of their bodies and their diets (Rosenberg, 1965; Tam, Yiu, & Lai, 2018). Ineffective eating

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can impair the physical and even mental growth. Since the problem of mental health issues is so widespread among college students, in the context of the research, it is important to investigate the impact on self-esteem and emotional well-being of eating behaviours (Wilson et al., 2015; Vadeboncoeur, Townsend, & Foster, 2015; Winpenny et al., 2018). Based on Erikson's psychosocial theory, Social Cognitive Theory (Bandura, 2001; Anderson, Winett, & Wojcik, 2007), and Self-Esteem Theory, the proposed study is aimed at investigating the correlations between these elements at the psychological level.

REVIEW OF LITERATURE

In a similar setting, Papadimitriou and Karakasidou (2025) administered an online survey to 135 adults (30-70 years) and observed that in adulthood disordered eating behaviours were significantly influenced by low self-esteem and by childhood depression, anxiety and stress levels. The negative self-perceptions and bad mental health during childhood have long-term impacts on patterns of eating later in life, as the findings have indicated. Papadimitriou, A., Kernakasidou, E. How Disordered Eating Behaviours Reveal Themselves in Adulthood Through Self-Esteem and Mental Health During Childhood. Future, 3(3), 16.

Gao et al. (2023) also carried out a cross-sectional study with 946 Chinese university students (aged 18-24) and found that the concern about body shape was positively correlated with eating disorder behaviours and that the level of self-esteem increased the risk. The study also found out that females had a higher exposure to the body shape and self-esteem, which caused the eating disorder behaviours to occur earlier, especially in China.

Gao, Z., Zhao, J., Peng, S., and Yuan, H. (2024, May). The association and influence of self-esteem and body shape on eating behaviour: a cross-sectional study of undergraduate students at Chinese universities. FN In Healthcare (Vol. 12, No. 10, p. 1034). MDPI.

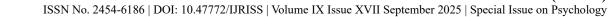
In a cross-sectional study by Mallaram et al. (2023), 777 female medical students were interviewed, and results showed that body image perception had a significant effect on eating disorder behaviours, self-esteem, and quality of life. Being preoccupied with weight, restrictive dieting, binge eating, and purging were closely related to low self-esteem and diminished life quality, which shows the necessity to provide early detection and prevention in a medical student population.

Mallaram, G. K., Sharma, P., Kattula, D., Singh, S., and Pavuluru, P. (2023). Perceptions of body image, eating disorder behaviour, self-esteem and quality of life: A cross-sectional study among female medical students. Journal of Eating Disorders, 11 (1): 225.A real-time eating detection system evaluated college students in terms of eating context and identified a poorer linkage between eating context and mental well-being and a beneficial relationship between eating context with children and psychological affect, anxiety, depression and stress (Morshed et al., 2023). The implications of these findings are that the social eating context can be used to enhance better mental health outcomes of students.

Krupa-Kotara et al. (2023) studied self-esteem on a global self-esteem scale, body composition, and body mass distribution, as well as physical activity in 305 university students in Poland (19-26 years). Among the study results, body weight and BMI were negatively correlated with self-esteem, and physical activity indicated raising the global self-esteem. These results help us realise the importance of physical activity in enhancing physical and emotional health.

Krupa-Kotara, K., Markowski, J., Gdańska, A., Grajek, M., Dzialach, E., Szlachta, G., Rozmiarek, M. (2023). The meaning of global self-esteem, body composition and physical activity among student ages in Polish universities. Nutrients 2013, 15(18), 3907.

A cross-sectional study by Farhangi, Dehghan, and Jahangiry (2016) on 107 Iranian female adolescents (15-17 years) showed that unhealthy eating behaviours like snacking, convenience foods, and meal skipping were found to have positive connections with emotional disorders and a low-fat eating behaviour with the possibility of hyperactivity disorders. Lower emotional, conduct and hyperactivity disorders were also associated with higher vitality and mental health scores in HRQoL.





Farhangi, M., Baseload, Dehghan, P., Jahangiry, L. (2018). Mental health issues in regard to eating behavioural patterns, nutrient intakes and quality of life in relation to health among the Iranian adolescent girls. J Pagoto, S Imamura, A Milianti, E K Cadarette, D Misra, S V Lavori, et al., Articles, JAMA internal medicine, 171(4), 399(2), e0195669.

Aim:

This study explores the impact of eating habits on self-esteem and mental health among college students, with an emphasis on gender and academic level differences.

Objectives Of the Study:

- 1. To understand the socio demographic factors of the respondents
- 2. To assess the eating habits, level of self-esteem and Mental health status of college students.
- 3. To analyse the impact of eating habits on self-esteem and mental health among the college students.
- 4. To compare gender and academic level differences in eating habits, self-esteem, and mental health.
- 5. To give suggestions on improving the good eating habits among the college students.

Hypotheses:

- H1: Healthy eating habits are positively correlated with higher self-esteem.
- H2: Unhealthy eating habits are associated with poor mental health outcomes.
- H3: There is a significant gender difference in the relationship between eating habits, self-esteem, and mental health.
- H4: Undergraduate and postgraduate students differ significantly in their eating habits and psychological outcomes.

METHODOLOGY

Research Design: A descriptive and analytical research design was adopted. As the data were collected from the college students at a single point of time and the study describes the eating habits, self esteem and mental health status among the college students. It also describes the impact of eating habits on self esteem and mental health among the college students.

Universe:

All undergraduate (UG) and postgraduate (PG) students enrolled in Anugraha Institute of Social Sciences, Dindigul forms the universe of the study. From that respective samples have been extracted.

Sampling Technique: Stratified random sampling with equal allocation across gender and education strata.

Sample Size: A total of 300 college students were selected using stratified random sampling by applying the following conditions:

Total sample size = 300 (pre-specified). Allocation:

1. Male — UG: 75 and PG: 75 2. Female — UG: 75 and PG 75

Total: 150 Male + 150 Female = 300





- Gender Stratification: 150 Male, 150 Female
- Academic Level Stratification: 75 UG and 75 PG in each gender category (male and female)

Tools Used:

Demographic details of the respondents were collected using the questionnaire constructed by the authors. 2 scales have been applied which is explained as below:

Tool	Purpose	Reliability (a)	Validity
Eating Habits Questionnaire (EHQ)	Assess healthy vs. unhealthy eating patterns	0.78 - 0.85	Content & construct validity (correlated with lifestyle & nutrition measures)
Rosenberg Self-Esteem Scale (RSES)	Assess self-esteem (Low, Moderate, High)	0.77 - 0.88	Convergent & construct validity
MHI-38	Assess psychological well- being & distress	>0.90	Strong construct validity

Major Findings & Interpretation

Table.No.1: Demographic Details

Variable	Category	Frequency (n)	Percentage (%)
Gender	Male	150	50.0
	Female	150	50.0
Education Level	UG	150	50.0
	PG	150	50.0
Year of Study	1st (UG)	40	13.3
	2nd (UG)	38	12.7
	3rd (UG)	38	12.7
	I (PG)	34	11.3
	II (PG	150	50.0
Type of Residence	Hostel	110	36.7
	With Family	120	40.0
	Paying Guest	50	16.7
	Alone	20	6.7
Monthly Food Allowance (₹)	< 2,000	60	20.0
	2,000 – 3,999	120	40.0
	4,000 – 5,999	90	30.0
	≥ 6,000	30	10.0
BMI Category	Underweight	20	6.7
	Normal	180	60.0

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Overweight	70	23.3
Obese	20	6.7
Not Reported	10	3.3

The table above describes the individual characteristics of the respondents that are uniformly split between male and female (50% each) and the (50%) and postgraduate (50%) students. Close to 50 percent of the students are pursuing II PG (50%). Most of the respondents are day scholars (40%) with the least in the hostel system (36.7%), followed by paying guests (16.7%) and a few (6.7%) on their own. In monthly food allowance, a considerable percentage reported spending 2000-3999 (40%), 4000-5999 (30) and less than 2000 (20). Only a small percentage (10 per cent) spent 6000 and above. Based on BMI, most of the students 60 % had normal BMI, 23.3 % were overweight, 6.7 % each were under weighted and obese, 3.3 % did not report their BMI.

Table.No.2: Eating Habits of the Respondents

Item	Category	Frequency (n)	Percentage (%)
Meals per day	1	5	1.7
	2	60	20.0
	3	200	66.7
	More than 3	35	11.6
Breakfast habit	Always	100	33.3
	Sometimes	120	40.0
	Rarely	60	20.0
	Never	20	6.7
Fast food / junk food	Daily	10	3.3
	2–3 times a week	80	26.7
	Once a week	110	36.7
	Rarely	80	26.7
	Never	20	6.7
Fruits & vegetables	Daily	140	46.7
	3–4 times a week	90	30.0
	Occasionally	60	20.0
	Never	10	3.3
Water intake	< 1 litre	50	16.7
	1–2 litres	200	66.7
	> 2 litres	50	16.7
Skipping meals due to stress	Often	40	13.3
	Sometimes	120	40.0
	Rarely	90	30.0
	Never	50	16.7





Special diet followed	Yes	60	20.0
	No	240	80.0
Sugary drinks/snacks	Daily	40	13.3
	2–3 times a week	100	33.3
	Occasionally	120	40.0
	Never	40	13.3

The eating habits of the respondents have indicated that majority (66.7) can eat three meals a day, whereas 20.0 responded that they only ate twice a day, and 11.6 ate more than three meals and lastly 1.7 only ate one meal. Regarding the breakfast, only 40 % of the students who take it sometimes, 33.3 always take it, 20 % of them rarely, and 6.7 never do it. Speaking of the number of junk food consumed by the students, 36.7 reported having consumed the product once a week, 26.7 having consumed it two to three times a week, another 26.7 reported having consumed it rarely, 6.7 never ate it, and there are only 3.3 who consumed junk food daily. Forty-six-point seven percent of the students ate fruits and vegetables on a daily basis, 30 percent three to four times a week, 20 percent occasionally and 3.3 percent never. The majority (66.7%) used to drink 1-2 litres of water a day, whereas 16.7% consumed less than 1 litre per day and 16.7% consumed more than 2 litres each day. Missed meals because of stress were also reported with 40% reporting they sometimes, 13.3% reported often, 30% reported rarely and 16.7% never. Only 20 per cent of them were on the special diet where 80 per cent were not. Lastly, the consumption of sugary beverages or food revealed that 40% people consumed them fairly, 33.3% two to three times a week and 13.3% everyday with 13.3 percent taking them never.

Table.No.3: Self Esteem Level of the Respondents

Self-Esteem Level	Frequency (n)	Percentage (%)
Low	72	24.0%
Moderate	168	56.0%
High	60	20.0%
Total	300	100%

The analysis of self-esteem levels among the respondents shows that more than half (56%) had a moderate level of self-esteem, nearly one-fourth of the respondents (24%) reported low self-esteem. Meanwhile, only 20% of the respondents demonstrated high self-esteem. This suggest that a smaller proportion exhibited strong confidence and positive self-perception. The data shows that majority of the students possess moderate level of self-esteem and they need attention &self-confidence interventions.

Table.No.4: Mental Health Status of the Respondents:

Mental Health Status	Frequency (n)	Percentage (%)
Poor	66	22.0%
Moderate	162	54.0%
Good	72	24.0%
Total	300	100%

The mental health status of the respondents indicates that more than half (54%) were in the moderate category, about 24% of the respondents reported good mental health, reflecting positive well-being and resilience. However, 22% of the respondents were found to have poor mental health. This shows the need for the intervention to maintain good mental health.





Table No.5: Correlation between Healthy Eating Habits and Self-Esteem (H1)

Variable	N	Mean	SD	Minimum	Maximum
Eating Habits Score	300	22.85	5.40	12	35
Self-Esteem Score	300	27.96	6.05	15	40
Variables			r-value	p-value	Significance
Eating habits vs. Self-estee	em		0.312	0.000**	Significant

Healthy eating habits are positively correlated with higher self-esteem. (p < 0.01). The results show that the mean eating habits score of the respondents was 22.85 (SD = 5.40), ranging from 12 to 35, while the mean self-esteem score was 27.96 (SD = 6.05), with a range of 15 to 40. The correlation analysis indicates a **positive relationship** between eating habits and self-esteem ($\mathbf{r} = 0.312$, $\mathbf{p} = 0.000$), which is statistically significant at the 0.01 level. Hence the hypothesis (H₁) that healthy eating habits are positively correlated with higher self-esteem. In other words, respondents who reported better eating habits also tended to exhibit higher self-esteem. Hence its essential to promote healthy dietary practices may contribute to improving students' psychological well-being and confidence levels.

Table.No.6.Association between Unhealthy Eating Habits and Mental Health (H2)

Junk Food Consumption	Poor Mental Health (n, %)	Moderate Mental Health (n, %)	Good Mental Health (n, %)	Total (n, %)
Daily (n=10)	6 (60.0%)	3 (30.0%)	1 (10.0%)	10 (100%)
2–3 times a week (n=80)	24 (30.0%)	42 (52.5%)	14 (17.5%)	80 (100%)
Once a week (n=110)	20 (18.2%)	58 (52.7%)	32 (29.1%)	110 (100%)
Rarely (n=80)	12 (15.0%)	46 (57.5%)	22 (27.5%)	80 (100%)
Never (n=20)	4 (20.0%)	13 (65.0%)	3 (15.0%)	20 (100%)
Total (N=300)	66 (22.0%)	162 (54.0%)	72 (24.0%)	300 (100%)
Variables	χ² value	Df	p-value	Significance
Junk food consumption × Mental health	18.46	6	0.005**	Significant

The worsening level of mental health is associated with increasing consumption of junk food (p < 0.01). The findings establish a clear correlation between the mental health of the respondents and the amount of junk food they consume. Sixty percent of those people who consumed junk food daily reported that they had poor mental health and only ten percent indicated that they had good mental health. Individuals who consumed junk food 2 times or more every week also received higher figures of poor mental health (30%) as compared to people who consumed it less frequently. Comparatively, those who consumed junk food one or less times every week portrayed fairly better mental health outcome, with a percentage of about 29.1 and 27.5 responding positively as healthy. Surprisingly, the group that had never consumed junk food consisted mostly of the moderately (65%), but a very small percentage revealed that they had good mental health (15%).

The result of the Chi-square test (X2 = 18.46, DF = 6, p = 0.005) indicates that there is significant correlation between eating junk food and mental health. This supports the hypothesis (H 2) that poor dietary habits are associated with poor mental health. In other words, those respondents that consumed more junk were likely to have mental health problems.





Table No.7: Gender Difference in Eating Habits, Self-Esteem, and Mental Health (H3)

Variables	Gender	Mean	SD	t-value	p-value	Result
Eating Habits Score	Male	22.14	5.2	-2.13	0.034*	Significant
	Female	23.76	5.6			
Self-Esteem Score	Male	28.64	6.1	1.45	0.148	NS
	Female	27.58	5.9			
Mental Health Score	Male	30.22	6.5	-2.67	0.008**	Significant
	Female	32.40	6.9			

The results of independent samples t- test indicate that there are significant differences among the genders on some variables. Females had higher mean score (= 23.76, SD = 5.6) than males (= 22.14, SD = 5.2), and the results were significant (t = -2.13, p = 0.034). This implies that the female participants adopted healthier eating behaviors as compared to the males. Regarding self-esteem, there was no statistically significant difference between self-esteem levels of the males (M = 28.64, SD = 6.1) and females (M = 27.58, SD = 5.9) (t = 1.45, p = 0.148), and thus, they did not differ meaningfully in their self-esteem levels. Nevertheless, it was noted that females have better mental health scores than their male counterparts (M = 32.40, SD = 6.9 vs. M = 30.22, SD = 6.5), but it was found to be significantly different (t = -2.67, p = 0.008).

Altogether, the results confirm the hypothesis (H 3) that there is a gender difference in eating habits and mental health: females demonstrate health eating behaviors and better mental health compared to males, but no significant gender difference could be identified with regard to self-esteem levels.

Table No.8: Difference between UG and PG Students in Eating Habits and Psychological Outcomes (H4)

Variables	Group	Mean	SD	F-value	p-value	Result
Eating Habits Score	UG	21.84	5.1	6.72	0.010*	Significant
	PG	23.95	5.3			
Self-Esteem Score	UG	27.12	6.0	2.18	0.089	NS
	PG	28.46	6.2			
Mental Health Score	UG	29.76	6.7	7.31	0.008**	Significant
	PG	32.18	7.0			

It is indicated by ANOVA test that there exist significant differences among undergraduate (UG) and postgraduate (PG) students in many subjects. As far as eating habits are concerned, the mean scores of PG students (M = 23.95, SD = 5.3) are bigger compared to UG students (M = 21.84, SD = 5.1). This difference was significant (F = 6.72, P = 0.010), thus showing that the eating habits of the PG students were healthier than that of the UG students. There was also no statistically significant difference in the mean score of self-esteem between the UG and PG students (F = 2.18, P = 0.089) though this was slightly higher (M = 28.46, SD = 6.2) among the former group compared to the latter (M = 27.12, SD = 6.0). In the area of mental health, the means of PG and UG students were 32.18 (SD = 7.0) and 29.76 (SD = 6.7) respectively, and the difference between the groups was found to be statistically significant (F = 7.31, P = 0.008), which was an indicator of better mental health outcomes in the case of PG students in comparison to the UG students.

On the whole, the findings support the hypothesis (**H sub 4**) that undergraduate and postgraduate students have a different eating habit and mental health. Postgraduate students portrayed better dietary health habits, and were found to be healthier psyche-wise with a non-significant result coming out on self-esteem.





Table No. 9: Simple Linear Regression of Eating Habits on Self-Esteem and Mental Health

Dependent	R	R ²	F-	β	В	t-	Sig. (p)	Interpretation
Variable			value	(Standardized)	(Unstandardized)	value		
Self- Esteem	0.312	0.097	27.84	0.312	0.41	5.28	0.000**	Better eating habits significantly improve self-esteem.
Mental Health	0.284	0.081	24.34	0.284	0.36	4.93	0.000**	Better eating habits significantly improve mental health.

- 1. Eating habits have a positive and significant impact on both self-esteem and mental health.
- 2. The effect is slightly stronger on self-esteem ($\beta = 0.312$) than on mental health ($\beta = 0.284$).

The regression analysis indicates that eating habits have a large and positive coefficient in terms of mental health and self-esteem. The 9.7 percentage point explained difference in self-esteem by eating behaviours ($\mathbf{R} \ 2 = 0.097$), and a standardized beta value of 0.312 indicated that it had a small positive influence. The unstandardized correlation ($\mathbf{B} = 0.41$) shows that each one-unit increase in score of eating habits will be associated with one-point increase in self-esteem. The model was significant ($\mathbf{F} = 27.84$, $\mathbf{t} = 5.28$, $\mathbf{p} = 0.000$) thus validating the effect.

The R-squared value was 8.1% (0.081), the standardized beta coefficient was 0.284, indicating that eating habits were a favourable contributor to the mental illness but to a lower degree than to self-esteem. The unstandardized coefficient ($\mathbf{B} = \mathbf{0.36}$) indicates that a unit increase in the score of eating habits will result in an increase of 0.36 scores in the mental health. This model was also significant ($\mathbf{F} = \mathbf{24.34}$, $\mathbf{t} = \mathbf{4.93}$, $\mathbf{p} = \mathbf{0.000}$).

It is indicated in the results that eating habits have a significant positive effect on self-esteem and mental health. The effect is somewhat more pronounced in the case of self-esteem than it is in mental health.

RESULT AND DISCUSSION

The demographic composition of the respondents was unique in the sense that it was equal in the male and female population (50 % each population) and equitable between the undergraduate (50%) and postgraduate (50%) students. The greatest proportion of them were PG II-year students (50%), then 13.3% I-year UG students, 12.7 % PG I-year, 12.7 % UG III-year, and 11.3 % UG II-year. The majority of the students resided with their families (40%) and stayed in hostels (36.7%) and very few with friends alone (6.7%) and as paid guests (16.7%). Majority of residents indicated that food commodities were affordable with 40 percent and 30 percent spending 2000-3999 and 4000-5999 respectively. Three out of every five (60%) respondents had a BMI that fell in the range of being normal. Only a quarter (23.3) were overweight, 6.7 were obese and 6.7 were underweight. This indicates that majority of the respondents who answered the question were of normal weight.

Eating pattern observation revealed that majority of the people (66.7%) had three meals a day. Smaller groups ate two, more than three, or one meal (1.7%) only. Breakfast was not always taken recently One third (33.3) of them did, 40 were occasionally absent taking it and 20 rarely took it. Junk food was the type of food consumed by many people whereas 36.7 percent consumed it once a week, 26.7 percent consumed it twice or thrice a week, and the remaining 26.7 percent engaged in its consumption rarely. Fewer than 3.3 percent said that they eat it on a daily basis. Higher fruit and vegetables consumption on a daily basis (46.7%) or thrice or four times a week (30%) meant that people were eating well. But there is also a tendency of stress related eating habits as 40 percent of the students say they occasionally skip meals due to the stress and another 30 percent say that they rarely do. Two out of every three people used 1-2 litres of water a day and this was sufficient to hydrate them. Eighty percent of the students did not adhere to a certain diet. They had sugary drinks and snacks once or twice a week

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(33.3/100), and this was their only source of consumption.

Sixty percent of respondents replied that they have average self-esteem, 24 percent reported low self-esteem and 20 percent reported strong self-esteem. This shows that although the majority of them possessed a firm commitment to sense of worth, a significant number did have difficulties in terms of confidence. The evaluation of mental health also indicated that five in ten (54%) inhabitants performed averagely in terms of mental health, one in four (24%) had good mental health, and one in five (22%) performed poorly concerning mental health. These findings indicate that despite most children performing well, a large number of children suffered mentally, and this can affect their academic performance and their lives among other things in a significant way.

Additional correlation analysis revealed a positive relationship between the dietary behaviours and self-esteem (r = 0.312, p < 0.01), so that indeed healthy eating improves self-esteem and mental well-being. On the other hand, there was a significant association between high consumption of junk foods and negative influence on mental health (2 = 18.46, p = 0.005), and daily consumers had the highest rate of poor mental health (60%).

According to the comparison of the perceptions by gender, significant differences in dietary habits and mental health were observed. Females had better eating habits (M = 23.76 vs. 22.14, p = 0.034) and better mental health (M = 32.40 vs. 30.22, p = 0.008), whereas males had slightly higher self-esteem although this difference approached but did not reach the level of significance (p = 0.148). Similarly, a comparison of the two groups, UG and PG students, recorded significant differences on eating behaviours (PG: M = 23.95 vs. UG: M = 21.84, p = 0.010) and mental health (PG: M = 32.18 vs. UG: M = 29.76, p = 0.008), where PG students ate better and had better psychological outcomes. There was however no significant difference in self-esteem between groups (p = 0.089).

The findings were proven correct using regression analysis that firstly, dietary habits were a significant influence on mental health and secondly that dietary habits also had a significant influence on self-esteem. Excepting the eating behaviours that explained 9.7 relative deviations of self-esteem (R 2 = 0.097), there was a moderate positive impact on the result of eating behaviours (beta = 0.312). Food preferences also accounted 8.1 percent of the disparity in mental proceeds (R 2 = 0.081), with a standardized beta () of 0.284. Although the impact was slightly higher on the self-esteem as compared to the mental health, both the models were significant (p < 0.01) indicating the vitality of nutrition in mental health.

The findings of demographic, behavior, and psychological variables show a definite line of relationship; better food intakes with regards to better self-esteem and mental health, and worsened mental health outcomes with regards to greater intakes of junk food. Eating habits and mental wellbeing were also gender-dependent and academic level-dependent. The students' females and PG reported to have consumed healthier products and felt better mentally. These results emphasize the importance of promoting balanced diets, reducing junk food consumption, and addressing stress-related eating patterns to enhance both physical and psychological well-being among students.

Suggestions:

- 1. Awareness programmes must be initiated in all the colleges & schools for the students to Enlight them with the good dietary practices.
- 2. Healthy food options must be implemented among the students in their canteens and colleges at reasonable rates.
- 3. Counselling must be available to all the students in the colleges.
- 4. Inculcate peer group support to manage stress, diet practices, and self-care practices.
- 5. Parents and institution must work together to make the health life styles.

CONCLUSION

The study concludes that eating habits play an important role in shaping students' self-esteem and mental health. PG students showed better outcomes than UG students, highlighting the importance of maturity and awareness in lifestyle choices. Overall, students who maintain healthy eating habits tend to feel better about themselves and

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experience fewer mental health problems. Hence, promoting good dietary practices in higher education settings is essential for improving psychological well-being.

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