

Fibre intake amongst third level students in Ireland during the covid-19 pandemic

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Fibre is an important nutrient with an adequate intake associated with many health benefits including the promotion of bowel movements, blood sugar control and gastrointestinal (GI) health⁽¹⁾. Moreover, fibre also exerts protective effects against different cancer types and cardiovascular disease (CVD)⁽¹⁾. Therefore, it is important that individuals are consuming an adequate amount of fibre daily, achieving the recommended daily intake (RDI) of >25 g⁽¹⁾. Targeting younger generations including third level students is particularly important to curate eating habits that will withstand the lifespan, ideally reducing the prevalence of health issues and disease in later years⁽²⁾. To achieve this, monitoring adherence levels amongst this cohort via research is required in which is the aim of this study, with low adherence levels hypothesised. In June 2020 a survey was distributed to third level students globally, used to assess the health behaviours of individuals within this cohort during the mid-point of the corona virus disease 2019 (covid-19) pandemic. From the information obtained, data pertaining to fibre intake amongst third level students in Ireland ($n = 191$), collected using a food frequency questionnaire (FFQ) was extracted and analysed to determine if this cohort are adhering to fibre intake guidelines. Data analysis was conducted using statistical package for the social sciences (SPSS) version 26 via frequency and descriptive functions. Moreover, difference tests relative to gender (male, female), course year (1st year, 2nd year, 3rd year, 4th year, postgraduate) and student status (undergraduate, postgraduate) were conducted. Correlations between fibre intake and body mass index (BMI) relative to self-reported weight and height was conducted also, alongside regression analysis. Regression analysis in respect of age was conducted as well. The mean age of study participants was 24.9 ± 8.2 years, and the majority were female, accounting for 72.3% ($n = 138$). Overall, fibre intake was inadequate, indicated by a mean intake of 17.9 ± 4.0 g with only 5.3% ($n = 10$) meeting the RDI for fibre. In respect of gender, intake was higher amongst males compared to females; the mean intake of males was 20.0 ± 4.9 g compared to 17.1 ± 3.1 g in females, a statistically significant difference of 3.7 g ($p = <0.05$). Moreover, no statistically significant difference in fibre intake was observed across course groups or in respect of student status. Similarly, no statistically significant correlation or regression was observed between fibre intake and BMI. Regression analysis related to fibre intake and age wasn't statistically significant either. These findings indicate that adherence to fibre recommendations is poor amongst this cohort. This could translate into an increased prevalence of health issues and disease in Ireland, in later years as these individuals age without addressing this poor dietary habit⁽³⁾. Thus, an intervention may prove worthwhile.

References

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