

## **Understanding the Interplay of Gender and Lifestyle Practices in Health Status of Children: A Study of Bihar and West Bengal, India**

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### **ABSTRACT**

This paper explores the substantial influence of gender on the lifestyle practices of children such as physical activities (PA), dietary habits, and body image concerns in the age group of 6-18 years. The study employed qualitative approach like in-depth interview, survey and participant observation to offer comparative analysis between urban and rural areas of Bihar and West Bengal. To ensure an equitable representation across genders and age groups, the research applied purposive sampling techniques for determining study population. Findings suggest that gender significantly shapes participation of children in PA, also influencing their dietary choices and perceptions of body image. Variations are induced by societal expectations, peer interactions and cultural norms. This study emphasizes the imperative of gender-sensitive health promotion initiatives for fostering comprehensive well-being among children. It also holds significance for policy makers, educators and health professionals to enhance the well-being of children in India by incorporating gender-specific considerations in the development of interventions.

**Keywords:** Children, Gender, Lifestyle, Physical Activities, Dietary Habits, Body Image, Bihar, West Bengal, Qualitative research, Health Promotion

### **Introduction**

Lifestyle practices such as physical activities (PA), diet, and body image play a significant role on the health of children.<sup>1</sup> WHO (1986) defines lifestyle as a pattern of behavioral choices that is determined by socio-economic circumstances of an individual and the available options. Lifestyle also includes an interests, attitudes, activities, and behaviors that are also frequently guided by gender norms.<sup>2</sup> Gender significantly influences the lifestyle practices of children, impacting their PA, dietary habits, and body image perceptions.<sup>3</sup> According to WHO<sup>4</sup>, gender refers to the characteristics of women, men, girls and boys that are socially constructed norms which shapes the behaviors and roles for males, females, and children. Boys and girls often experience different societal expectations and cultural norms, which can shape their engagement in various activities and influence their choices.<sup>2</sup> It is observed that girls often face barriers in terms of their participation in sports or outdoor activities due to entrenched gender roles.<sup>5</sup> Gender differences are also apparent in the perception of PA, with girls' often associating it with weight management while boys see it as a matter of competition. Cultural expectations and gender role also play a substantial role in shaping dietary habits of children<sup>6</sup>.

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In various societies, boys may be encouraged to consume larger portions or specific foods associated with perceived masculinity, while girls may feel pressured to adhere to dietary restrictions linked to societal beauty standards.

There is no denial fact that children are increasingly exposed to societal standards of beauty and body ideals through media and peer influences.<sup>7</sup> Gendered expectations regarding body image create distinct pressures for boys and girls. Girls may face higher scrutiny and dissatisfaction with their appearance, leading to potential risks of engaging in unhealthy weight control practices.<sup>8</sup> Conversely, boys may grapple with societal expectations related to muscularity, impacting their perceptions of body image. Addressing gender-specific body image concerns is crucial for fostering positive self-perceptions and mitigating the risk of unhealthy lifestyle practices among children.

Through an exploration of how gender influences the lifestyle of children, placing specific emphasis on aspects such as PA, dietary habits, and body image concerns, this study intends to provide comparative analysis between Bihar and West Bengal in the age group of 6-18 years. Within Bihar, Patna, the capital city of the state is considered in the current study. As per the Government of Bihar report (2023),<sup>9</sup> Patna, serving as the state capital, stands among the world's fastest-growing cities and ranks fifth in India in terms of size. Fieldwork conducted in the city brought to light significant changes in the lifestyles of children. While in West Bengal, Siliguri and Bijanbari is undertaken in the concerned study. According to the Ministry of Urban Development, Government of India and The World Bank report (2015), Siliguri is one of the second-largest cities in West Bengal and the gateway to North-Eastern India, undergoing swift changes in the lifestyle practices of people. In addition to Patna and Siliguri, Census of India (2011)<sup>10</sup> suggests that out of 687 villages in Darjeeling district, Bijanbari village experienced substantial urbanization between 2001 and 2011. As a result, these changes witnessed significant migration, impacting the lifestyles of people due to educational and work opportunities in urban areas within India and abroad. During the empirical study it was observed that despite distinct cultural backgrounds, Patna, Siliguri, and Bijanbari village is observed to be similar in terms of its developing pace facilitating comparisons in lifestyle practices of children. Hence, by highlighting the influence of gender in lifestyles of children, the concerned study aspires to provide valuable insights that can inform interventions and policies to enhance the overall well-being of children. The primary objective of this research is to contribute essential knowledge that can guide future initiatives, ensuring that considerations of gender and lifestyle are integral components in addressing the health disparities encountered by children in India.

### **Review of the Literature**

Gender roles significantly influence the lifestyle practices of children.<sup>11</sup> These roles often dictate how children should engage in various activities or display certain behavior, shaping their PA, dietary habits, and body image.<sup>8</sup> In terms of PA, girls are often discouraged from engaging in any outdoor activities that are deemed less appropriate for their gender, leading to reduced involvement in sports. These dynamics are rooted in traditional perceptions of gender, where girls are often directed towards activities perceived as more suitable or 'safe'. Previous studies suggests that boys are more likely to meet the recommended PA guidelines as compared to girls.<sup>12</sup> Moreover, societal norms about femininity can discourage girls from engaging in vigorous PA, which are often culturally aligned with masculinity.<sup>11</sup> Perceived safety in the built environment also becomes a critical factor influencing PA levels, thereby leading girls to spend more time indoors due to safety concerns. This combination of family influence and societal expectations can lead to fewer opportunities for PA among girls, and over time, this can shape their attitudes towards sports and active lifestyles, creating a cycle that perpetuates these gender-based disparities.<sup>8</sup>

It is observed that gender also significantly shapes the dietary habits of children. Most of the times, cultural norms play a role in favoring boys in the distribution of nutritious food within households.<sup>13</sup> During childhood and adolescence, parents continue to act as primary gatekeepers for food choices within families. This unequal distribution of

food can lead to health inequalities among girls, increasing their risk of diseases later in life. While in some cases it is observed that girls are more likely to consume healthy foods and vegetables than boys which varies by geographical location and environment. In urban areas, both girls and boys tend to consume unhealthy foods.<sup>14</sup> Dietary habits of both male and female in urban areas often exhibit over consumption of energy-dense foods and sugar-sweetened beverages, coupled with lower intake of fruits and vegetables, which can have long-term health impacts.<sup>13</sup> However, it is frequently observed that girls often display a higher tendency to skip breakfast, driven by the misguided belief that it aids in weight reduction.

Additionally, gender differences also extend to body image concerns, with girls expressing greater dissatisfaction with their body weight than boys, leading to restrictive dietary habits. Over past decades, the experience of dissatisfaction with one's body has been linked to eating and weight related issues mostly due to its higher prevalence among female. Factors such as socio-cultural influence and mass media play a crucial role in shaping perceptions of body image.<sup>15</sup> Socio-cultural influence is observed when ideal body image is internalized with specific appearance associated with thinness and muscular while impact of mass media contributes to this phenomenon by promoting specific body type as desirable.<sup>7</sup>

Based on the review of literature, it is observed that a significant research focus has been placed on studies emanating from developed nations when exploring lifestyle practices of children. Besides, in India, current research has primarily concentrated on elucidating the lifestyle and health of adults while neglecting children in this regard. In terms of Bihar, previous studies have predominantly focused on children in rural areas with limited attention given to urban areas, including the capital city of Bihar, Patna.<sup>16</sup> Furthermore, while there have been fewer research and reports concerning urban children in Bihar, none have specifically investigated the changing lifestyle practices of these children and their influence on health.

Apart from Bihar, Siliguri and Bijanbari, have seen relatively fewer research regarding health of children. Previous studies, in Siliguri have primarily focused on environmental factors and their impact on health of children, with little attention to their lifestyle practices. While, Bijanbari village, in particular, has been a widely neglected area in West Bengal in terms of research, and there is a notable dearth of studies and literature addressing the health of children in this region. Consequently, the absence of prior research and the unique circumstances of these regions provide a compelling rationale for conducting an in-depth study. The concerned study is dedicated to a thorough exploration of lifestyle practices of children from gender perspective and their consequences on their health.

## **Methodology and Methods**

This study is based on a comparative analysis between Bihar and West Bengal in India. For detail understanding on the influence of gender in lifestyle practices of children, both urban and rural areas were chosen within Bihar and West Bengal. In terms of the urban area, Patna Municipal Corporation (PMC) was selected within Bihar while Siliguri Municipal Corporation (SMC) was selected within West Bengal. On the other hand, to draw a comparison with urban area, Bijanbari village was chosen within Darjeeling district in West Bengal. These areas were selected in the current study due to their distinct demographic attributes and cultural distinctions, providing a varied context for analyzing lifestyle practices of children.

The study population comprises children aged 6-18 years in the selected areas. Moreover, in this research, children between this age group were chosen as, studies that are conducted earlier suggests that lifestyle practices such as PA, diet and body image of children are ingrained in this age group and persist throughout adulthood.<sup>1</sup> Qualitative research methodologies that integrate interviews, participant observation, and surveys have been employed in the concerned study. In this research, children are recognized not just as subjects but as active participants whose perspectives

are crucial to understand the impact of lifestyle practices on health. Furthermore, purposive sampling was used to select participants who could provide relevant and significant insights about their lifestyle practices. This process involved identifying children in the specified age range within the chosen locations, aided by local contacts and parents of the respondents. In total, 148 participants were selected across the various locations. The sampling was influenced by factors such as accessibility, representativeness, and feasibility.

After data collection, data analysis process was initiated to gain key insights from the responses. The analysis revolved around the coding of responses within the interview schedule, employing a systematic approach for both close-ended and open-ended questions. Responses to close-ended questions were coded in Microsoft Excel. This method enabled the systematic categorization of data into distinct sections of the interview schedule. The coded data was visually represented through the utilization of bar graphs, offering a clear and concise interpretation. Responses to open-ended questions were transcribed into English and underwent a color-coding process for ease of interpretation. Following transcription and color-coding, information provided by respondents was organized based on recurring themes. This meticulous and systematic approach to data analysis provided nuanced understanding of lifestyle practices of children in Bihar and West Bengal. During the study, ethical concerns were taken care which involved informed consent from the parents. Participation of the respondents was confidential and voluntary. Additionally, anonymity was also maintained for all the participants involved.

## **Results**

### ***Impact of Gender Roles in determining PA of Children***

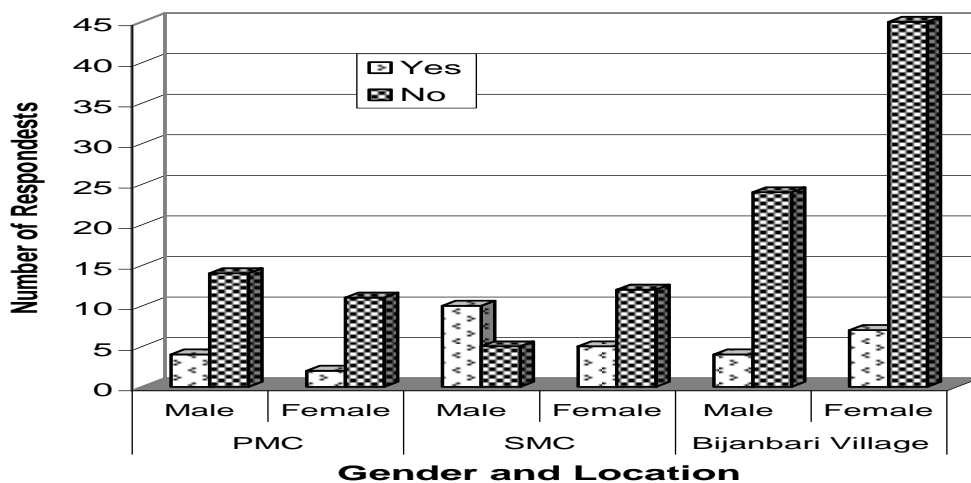
In the above section it was observed that influence of gender is predominantly channeled through the construct of gender roles, where societal expectations play an essential role in shaping the long-term lifestyle choices of children.<sup>5</sup> Conforming to prevailing gender norms, children are expected to adopt and enact their gender roles in a manner that aligns with the specific norms of their society.<sup>17</sup> The present study highlights the influence of gender role expectation in PA of both girls and boys. In the case of PMC, it was observed that 13 percent of boys and 6 percent of girls actively participated in PA, while 44 percent of boys and 38 percent of girls did not prefer to engage in any forms of PA. In contrast, the scenario in SMC exhibited different patterns, with 31 percent of boys and 23 percent of girls actively participating in PA, and 17 percent of boys and 29 percent of girls not including PA as a part of their daily routine. Interestingly, there was a marked disparity in the participation of boys in PA between PMC and SMC, whereas participation of girls remained relatively stable. Bijanbari village displayed unique patterns, as only 5 percent of boys and 10 percent of girls engaged in PA, while 30 percent of boys and 56 percent of girls abstained from participating in any form of PA. The above-mentioned scenario will be comprehensively elucidated with the aid of the **Fig.1**, presented below.

Fig.1. provides insights into the prevailing trends in PMC, SMC, and Bijanbari village regarding participants engagement in PA, encompassing both girls and boys. Notably, a significant portion of boys in PMC exhibited a reduced inclination toward outdoor activities. This decreased interest was also observed among girls which was primarily attributed to the limited availability of suitable outdoor spaces for engaging in PA and the relatively distant location of playgrounds. Additionally, safety concerns were also one of the major factors in outdoor activities that served as a barrier in PA for both girls and boys. In PMC, it was observed that PA was not popular or socially encouraged especially among girls between the age groups of 15-18 years which resulted in less inclination to their participation.

Conversely, in SMC it was observed that boys displayed higher levels of activity than their counterparts in PMC, while girls exhibited lower levels of reduced activity. The enhanced engagement of boys in PA in SMC was facilitated by the presence of nearby spaces in their residential areas. In terms of participation of girls, it was observed that, parents had

different attitudes towards PA, which was influenced by their own lifestyles and beliefs about gender roles where boys were encouraged to engage in sports as a way of embodying traditional masculine traits, while girls were discouraged due to concerns about societal perceptions or safety. Moreover, in some cases girls resorted to utilizing the rooftops of their apartment buildings for outdoor activities, even though rooftops are generally considered unsafe for children.

Fig-1: Participation in PA among Girls and Boys in three Locations



Source: Compiled from empirical research during field work

While in Bijanbari village both girls and boys exhibited a notable reluctance to engage in PA. This reluctance was more pronounced in comparison to their counterparts in PMC and SMC. Interviews revealed that limited availability of proper playing areas contributed to a growing disinterest in outdoor activities among children. Due to limited options for PA, both boys and girls in Bijanbari village turn to mobile phones and virtual activities. This shift to digital entertainment was common across genders, though the reasons varied where boys were drawn to video games, while girls engaged themselves in social media or other online platforms. Additionally, educational opportunities that promote sports and PA was limited in this village, especially for girls, further reducing their participation.

In light of these findings, it is evident that in all three locations of Bihar and West Bengal girls exhibited a reduced inclination to participate in PA, while boys were more active in SMC when compared to PMC and Bijanbari village. Numerous factors can be attributed to the insufficient PA among both girls and boys. The lack of adequate space in their respective neighborhood areas significantly discouraged their participation in outdoor activities, particularly for girls. This insufficiency in space was further compounded by safety concerns related to road accidents and the potential threat from strangers within the built environment in neighborhood settings. Consequently, parents were hesitant to allow their children to engage in PA, especially in urban areas with distant playgrounds. Additionally, most of the time, boys were encouraged to engage in sports and outdoor play even in distant location especially among 15-18 years. Whereas girls were often directed towards more sedentary or culturally acceptable activities such as spending time in art and craft and dancing.

**Body Image Construction and its relation with Gender Role Expectation**

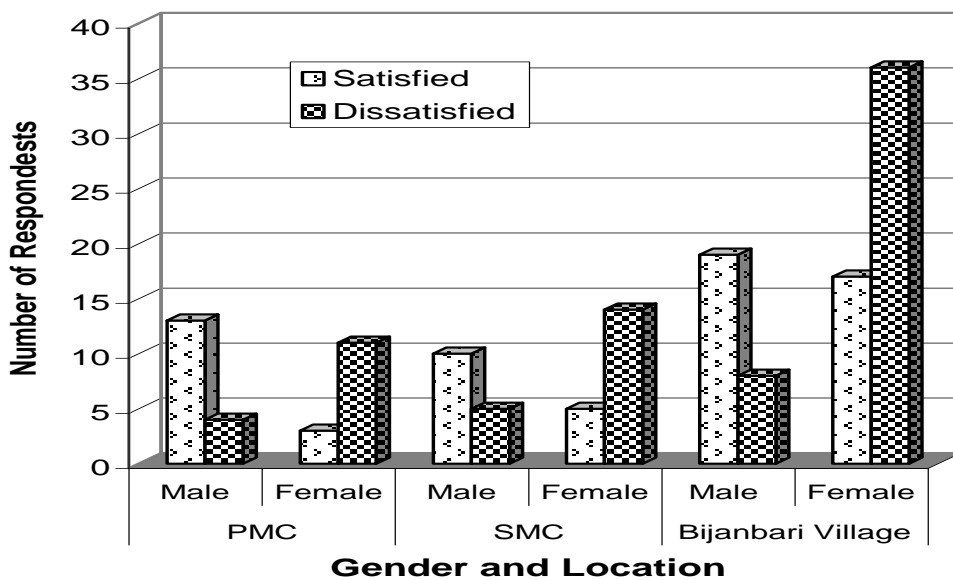
In contemporary society, there is a growing awareness of body image among children, with many of them exhibiting higher concerns about their appearance.<sup>15</sup> A significant portion of children expresses apprehension about meeting the standards of attractiveness and perfection required for social acceptance. Notably, the influence of social

media in shaping body image of children has emerged as a crucial factor in this context. Numerous studies highlight that social media frequently portrays images and content that contribute to the formation of body images among children.<sup>7, 8</sup> These studies shed light on the substantial impact of social media on the development of body image of children, often resulting in adverse effects on their health. Consequently, children often experience dissatisfaction with their body image. Research conducted by Ricciardelli et al.<sup>3</sup> indicates that both girls and boys begin to develop a sense of body image dissatisfaction between the ages of 6-15, especially among girls throughout late adolescence. Negative body image among girls is closely associated with psychosocial issues, contributing to low self-esteem and depression, ultimately impacting their overall health and lifestyle.<sup>18</sup>

This section highlights body image construction and its relation with gender role expectation. Notably, during the interviews, it was observed that in all three locations of PMC, SMC, and Bijanbari village, girls displayed pronounced dissatisfaction with their body image, particularly in terms of their weight. Ironically, these girls did not fall into the category of being overweight or obese. Additionally, these female participants also expressed apprehensions about their skin color, frequently influenced by comments from family members and peer groups. These external remarks created a mental pressure for them to conform to certain appearance expectations. In contrast, boys displayed a lesser degree of concern regarding their body image and physical appearance. The nuances of the body image among children in three locations are thoroughly explored in Fig.2.

During the interview it was observed that one primary reason for this discontent among girls is their tendency to perceive themselves as overweight, even when they were of average or underweight. This dissatisfaction concerning body weight is compounded by the societal emphasis on girls that play a key role in shaping attitudes and behaviors of during their formative years. Moreover, comparisons within peer groups for achieving an ideal body image also contribute to the overall dissatisfaction among girls.

Fig.- 2: Body image construction among Girls and Boys in three Locations



Source: Compiled from empirical research during field work

Conversely, among boys, dissatisfaction with their body was also attributed to lower weight. While girls were concerned about gaining excess weight. During the interview it was also observed that most of the children between the age group of 11-15 and 16-18 years had their own mobile phones which also played a substantial role in propagating behavior in terms of body image. Since social media platforms like Facebook and Instagram was widely popular among both girls and boys that often-displayed idealized body types and beauty standards, which played an influential role in the perceptions of their own bodies. Majority of both girls and boys expressed that their dietary behaviors, pursuit of thinness, and use of social media are influenced by their peer groups.

The study also identified a common belief among most girls that thinness equates to fitness, regardless of age. Consequently, girls had a natural concern about a fear of gaining weight in the long run. The ideal body image among children is also a consequence of gender role expectations. From childhood, both girls and boys are socialized according to societal norms and expectations. These norms are internalized by children which are also subsequently reflected in their habits and behavior.

For Butler (1988), gender is a performance that is constantly acted through behaviors, acts and rituals in all aspect of social life.<sup>19</sup> This phenomenon can be comprehended through the concept of gendered habitus, where gender norms and role expectations are legitimized through the appropriate portrayal of femininity and masculinity. Although habitus is shaped by class circumstances, it is often decisive in directing behaviour according to gender. Bourdieu recognizes this by assigning gender role in its own right in the formation of habitus mediating through primary socialization that includes masculinization of male and feminization of female.<sup>20</sup>

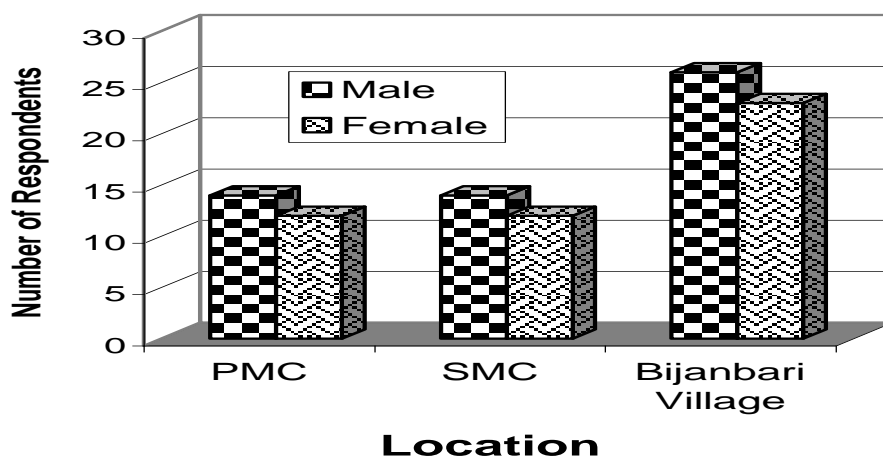
Considering the concept of gendered habitus in the current study, it is asserted that systematically differentiated habitus among both girls and boys is inculcated through socialization that is observed in the gender roles where children adopt lifestyle practices that are uniquely feminine for girls and masculine for boys. For instance, both girls and boys are advised to adopt lifestyle practices that display their gender where household chores are the part of PA for girls while for the boys it includes outdoor activities even in distant location. Importantly, both girls and boys internalize these norms at a very young age, which gradually becomes an integral part of their behavioral patterns. As a result, this negative body image can gradually impact the health of both girls and boys. Lack of PA, especially among girls, leads to the habit of consuming smaller quantities of food, which can give rise to various health problems that become more pronounced as individuals progress into adulthood.

#### ***Influence of Gender on Dietary Habits of Children***

Dietary habits are not merely a matter of personal preference but are deeply intertwined with social, cultural, and gender norms. This influence of gender on dietary habits manifests early in childhood, with societal norms exerting a substantial influence on the dietary choices made by both male and female. Previous research highlights that female exhibit higher concern regarding their food choices, consistently making deliberate and thoughtful decisions about their eating habits, in contrast to men. This section thoroughly examines the gender-specific dimensions of dietary habits, with the objective of achieving a holistic comprehension of how societal anticipations, cultural frameworks, and personal decisions converge to shape the dietary behaviors of both girls and boys. It was observed that in the urban areas of both PMC and SMC and in rural area of Bijanbari village, both girls and boys adhered to the practice of regularly consuming a healthy diet. During the interviews, girls expressed their tendency to consume smaller quantities of food out of concern for potential weight gain; this scenario was not observed among boys. This scenario is elucidated with the aid of the **Fig.3.** presented below. In contrast to their male counterparts, female participants exhibited awareness regarding the type of food they consumed daily. During the interviews, it was observed that girls, particularly those in the age group of 15-18 years had concerns about weight gain, prompting them to reduce the quantity of their food compared to boys.

According to Butler people do gender because they are accountable to the expectations of others, although these expectations are not always met, they are criticized or held accountable for not performing their roles at almost any point of time.<sup>19</sup> For instance, boys are expressed to eat food that can strengthen their physic as they will be breadwinners in the long run while girls are trained to eat controllably and aesthetically as they might develop the chance of gaining weight easily. Despite some differences in their food preferences, both girls and boys recognized the significance of maintaining a healthy diet. This included a common practice across all families of consuming homemade meals at least three times daily.

**Fig.- 3: Everyday Consumption of Healthy Diet among Girls and Boys in three Locations**



*Source: Compiled from emperical research during field work*

The above insight into dietary habits emphasizes that both girls and boys in urban and rural areas of Bihar and West Bengal consistently followed the practice of consuming a healthy diet almost daily. Unlike previous studies that reported gender-based disparities in food allocation within families, where healthier diets were typically provided to male members due to their engagement in outdoor activities, no such distinctions were evident in this study. These shared dietary habits can be attributed to the process of socialization, wherein children of both genders are ingrained with the custom of maintaining a healthy diet as an indispensable part of their daily lives. This practice is instilled in children from an early age, with parents playing a crucial role in shaping these dietary norms, which are perpetuated across generations.

**Conclusion**

The study suggests the substantial impact of gender role expectations on the lifestyle choices and health behavior of children in Bihar and West Bengal. Systematically differentiated habitus, as suggested by Butler from the perspective of gender and Bourdieu,<sup>19,20</sup> is evident in the way children adopt gender-specific lifestyle practices. This research highlights the critical need to address these deeply rooted gender norms to encourage more healthier and equitable behaviors among children. Furthermore, the study points out consistent dietary habits among both genders, contradicting prior research that indicated gender-based disparities in food allocation within families. This indicates a positive shift and equal emphasis towards a balanced and healthy diet for both girls and boys, influenced by familial and social upbringing. In light of these findings, it becomes imperative for policymakers and health professionals to incorporate these gendered dimensions when developing strategies to enhance PA and the overall health of children in these areas. Stakeholders



should also ensure the enforcement of stringent regulations governing media content and advertising that portray choices and preferences of children differently. It is undeniable that India embodies diverse cultural and geographical facets, leading to variations in disparities associated with gender norms and their relationship with lifestyle practices, depending on regional and community-specific nuances. Implementing interventions closely aligned with regional variations can be a significant step in addressing unhealthy lifestyle practices among children based on their gender (ibid). Additionally, fostering the development of self-efficacy among children, with a specific focus on the assimilation of health-promoting lifestyles can be pivotal in their holistic well-being.

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