

JOURNAL OF BALTALİMANI

https://dergipark.org.tr/tr/pub/iol

Review

Promoting Healthy Lifestyle Behaviors in Children ilke KARABIYIK DEMIR ©

İlke KARABIYIK DEMİR, MsC, PhD (Candicate), Metin Sabancı Baltalimanı Kemik Hastalıkları Eğitim ve Araştırma Hastanesi

ARTICLE INFO

Article history: Submitted Agust 26 2025 Accepted Agust 29, 2025 Publication date September 8

Keyword

Child,

Healthy Lifestyle

Nursing

ORCID iDs of the authors:

0000-0002-3639-1176

ABSTRACT

Healthy lifestyle behaviors are a set of key habits that are essential for maintaining and enhancing an individual's physical, mental, and social well-being. Childhood is a critical period during which these behaviors are shaped, forming the foundation for lifelong habits. During this pivotal stage, habits such as regular physical activity, healthy nutrition, adequate sleep, hygiene practices, and health beliefs are among the fundamental factors that support children's development and influence long-term health outcomes. The literature indicates that family attitudes, environmental conditions, individual characteristics, and health literacy are decisive factors in acquiring these behaviors. In this context, multi-component, parent-focused, school-based, technology-supported, and community-based interventions have been found effective in promoting healthy lifestyle behaviors in children. Implementing these comprehensive approaches during childhood not only prevents chronic diseases and improves quality of life but also strengthens public health, representing a sustainable long-term investment.

ÖZET

Sağlıklı yaşam biçimi davranışları, bireyin fiziksel, zihinsel ve sosyal iyilik halini koruması ve geliştirmesi açısından temel öneme sahip alışkanlıklar bütünüdür. Çocukluk dönemi, bu davranışların şekillendiği ve yaşam boyu sürecek alışkanlıkların temellerinin atlıdığı kritik bir evredir. Bu kritik dönemde kazanılan düzenli fiziksel aktivite, sağlıklı beslenme, yeterli uyku, hijyen alışkanlıkları ve sağlık inancı gibi alışkanlıklar; çocukların gelişimini destekleyen ve uzun vadeli sağlık sonuçlarını şekillendiren temel faktörler arasında yer almaktadır. Literatür, bu davranışların kazanılmasında aile tutumları, çevresel koşullar, bireysel özellikler ve sağlık okuryazarlığının belirleyici olduğunu ortaya koymaktadır. Bu doğrultuda geliştirilen çok bileşenli, ebeveyn odaklı, okul temelli, teknoloji destekli ve topluluk tabanlı müdahalelerin çocuklarda sağlıklı yaşam biçimi davranışların desteklemede etkili olduğu görülmektedir. Çocukluk döneminde bu kapsamlı yaklaşımların uygulanması, yalnızca kronik hastalıkların önlenmesi ve yaşam kalitesinin artırılmasını değil, aynı zamanda toplum sağlığının güçlendirilmesini de sağlayarak uzun vadede sürdürülebilir bir yatırım niteliği taşımaktadır.

Introduction

Healthy living is a holistic concept encompassing an individual's physical, mental, and social well-being (Sonğur et al., 2019). This approach enables individuals to manage factors that influence their health and to adopt behaviors that reduce disease risk and promote overall well-being (Moussi et al., 2024). Lifestyle, in turn, refers to the collection of behaviors and habits that directly affect health and are within an individual's control (Sonğur et al., 2019). Adopting a healthy lifestyle contributes to sustainable well-being throughout the lifespan (Moussi et al., 2024).

Methods

A literature review was conducted using the PubMed, Scopus, Cochrane, and Web of Science databases. The search strategy included the keywords "child," "healthy lifestyle," and "nursing," as well as their corresponding English terms. The review was restricted to studies published between 2014 and 2025.

Healthy Lifestyle Behaviors in Children

A healthy lifestyle comprises a set of controllable behaviors and habits that positively influence an individual's physical, mental, and social well-being (Larose et al., 2023; Sonğur et al., 2019). Lifestyle behaviors acquired during childhood are particularly critical for improving overall health and enhancing quality of life throughout the lifespan (Larose et al., 2023).

Childhood represents a critical developmental period that lays the foundation for a healthy adulthood. Habits established during this stage such as those related to nutrition, physical activity, sleep patterns, hygiene, and screen time form the basis for behaviors that persist throughout life (Kang et al., 2024; Moussi et al., 2024; Larose et al., 2023). Many of these foundational habits begin to solidify before the age of three, a period when lifestyle behaviors are first established (Chia et al., 2024). Therefore, promoting healthy lifestyle habits during early childhood is of paramount importance (Kang et al., 2024).

Children's healthy lifestyle behaviors were examined based on the subdimensions of the Healthy Lifestyle Belief Scale for Adolescents (Kudubeş & Bektaş, 2020), with only the variables of physical activity, nutrition, and health beliefs being considered.

Corresponding author: İlke KARABIYIK DEMİR ilkekarabyk@gmail.com



15

Physical Activity

Physical activity is defined as any bodily movement produced by skeletal muscles that results in energy expenditure. This behavior encompasses all body movements, ranging from planned exercise to activities of daily living (Yalçın & Yılmaz, 2023).

Regular physical activity in children has numerous positive effects on lifelong health. In addition to regulating metabolism and maintaining energy balance, consistent physical activity strengthens the musculoskeletal system and reduces the risk of cardiovascular diseases, metabolic syndrome, hypertension, and type 2 diabetes. Moreover, it supports mental well-being by decreasing the risk of anxiety and depression, enhances academic performance, fosters selfesteem, and improves overall quality of life. Extensive scientific studies have also demonstrated a strong association between a sedentary lifestyle or insufficient physical activity and obesity, diabetes, cardiovascular diseases, and psychosocial problems (Yalçın & Yılmaz, 2023; Larose et al., 2023; Lu et al., 2020).

According to a global study, 81% of school-going adolescents aged 11–17 failed to meet the recommended levels of physical activity. This proportion was 81.3% in Turkey, 72% in the United States, and 79.9% in the United Kingdom. Slovakia stood out among countries with more active adolescents, with only 71.5% failing to meet the recommended levels (Guthold et al., 2020).

Nutrition

One of the cornerstones of public health is the development of healthy eating habits. Healthy nutrition plays a critical role in disease prevention and in improving quality of life. In a globalized world, it is essential for healthy eating to become an integral part of lifestyle and for all individuals to possess nutritional awareness. Adequate and balanced nutrition supports optimal health and quality of life, enabling individuals to maintain health throughout their lifespan (Republic of Turkey Ministry of Health, General Directorate of Public Health, 2022).

Establishing proper nutritional habits during childhood and adolescence is of great importance for the prevention of chronic diseases that may arise later in life, such as obesity (Jebeile et al., 2022), iron deficiency anemia (Moscheo et al., 2022), iodine deficiency (Zimmermann, 2020), vitamin D deficiency (Fiamenghi & Mello, 2021), dental caries (Peng & McGrath, 2020), hypertension (Ashraf et al., 2020), certain types of cancer (Rogers & Barr, 2020), and diabetes (American Diabetes Association, 2020).

In the Turkey Nutrition Guide published by the General Directorate of Public Health, Ministry of Health of the Republic of Turkey in 2022, the "Plate Model by Food Groups" was described for five food groups to enhance awareness of a healthy lifestyle approach among individuals and the community and to make it easily understandable. The plate-based dietary pattern model was designed according to food diversity, considering the food groups and their energy and nutrient content (Figure 2.1).



Figure 2.1: Healthy Eating Plate: A Balanced Diet Plate According to Food Groups

T.C. Sağlık Bakanlığı Halk Sağlığı Genel Müdürlüğü, 2022, Türkiye Beslenme Rehberi (TÜBER), Ankara. https://hsgm.saglik.gov.tr/depo/birimler/saglikli-beslenme-ve-hareketli-hayat-db/Dokumanlar/Rehberler/ Turkiye_Beslenme_Rehber_TUBER_2022_m in.pdf, [Ziyaret tarihi: 13.10.2024].

The food groups included on the plate are essential for a balanced diet. These groups consist of dairy products (e.g., yogurt, ayran, cheese), meat and meat products (e.g., chicken, fish, eggs, legumes such as lentils, beans, chickpeas), nuts and seeds (e.g., walnuts, hazelnuts, almonds), fresh vegetables, fresh fruits, and grains and cereals (e.g., bulgur, rice). To make healthy choices within these groups, foods should be evaluated based on color diversity, structural characteristics, as well as the individual's health and disease status, age, sex, physical activity level, and physiological condition. Additionally, fiber, fat, salt, and added sugar contents should be taken into consideration (Republic of Turkey Ministry of Health, General Directorate of Public Health, 2022).

The goal is to select and consume a food item from each food group at every meal. Ensuring the recommended daily intake of water, which is placed alongside the plate, including olive oil in the daily diet, and supporting an active lifestyle are important complements to a healthy lifestyle (T.C. Ministry of Health, General Directorate of Public Health, 2022).

The World Health Organization has reported that approximately 45% of deaths in children under 5 years of age are caused by nutrition-related factors (World Health Organization, 2022).

According to the Türkiye Child Survey 2022 report, the proportion of children consuming dairy products such as cheese or yogurt daily is 57.8%. It has been determined that the consumption of sugary foods (sugar, chocolate), processed snacks (chips, crackers), and sugary drinks increases with age. The report indicates a positive correlation between the educational level of the family and children's consumption of healthy foods. As the education level of the mother/primary caregiver increases, the daily consumption rate of fruits, vegetables, meat, chicken/fish, and dairy products among children also rises (TÜİK, 2023).

Health Beliefs

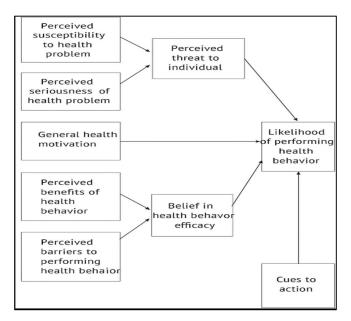
Individuals typically seek healthcare when they become ill. However, according to the modern public health approach, the primary goal is for individuals to maintain and enhance their health during periods of wellness, before the onset of illness. Numerous factors influence health status, some of which stem from personal characteristics. These personal factors include not only genetic makeup but also an individual's level of knowledge, attitudes, and behaviors (Gözüm & Çapık, 2014).

The Health Belief Model is a foundational theoretical framework widely used in health education, asserting that individuals' health-related values, beliefs, and attitudes shape their behavior. This model is employed to understand preventive attitudes and behaviors, such as early detection practices, and to evaluate the treatment responses of individuals with acute or chronic illnesses. Health education grounded in the Health Belief Model explores individuals' beliefs and perceptions about their health within the context of their demographic characteristics and knowledge, aiming to identify their motivation to avoid illness and their confidence in its preventability (Eghbal et al., 2023; Suirvi et al., 2022; Green et al., 2020).

This approach aims to guide individuals toward more effective health behaviors. Identified negative beliefs or attitudes are addressed through tailored educational interventions. According to this model, the interaction of the assumptions illustrated in Figure 2.4 supports the development of healthier behaviors by individuals in preventing diseases and avoiding risky situations (Suirvi et al., 2022; Sümen & Öncel, 2017).

Figure 2.4: Health Belief Model

Gözüm, S., & Çapık, C., 2014, Sağlık davranışlarının geliştirilmesinde bir rehber: sağlık inanç modeli, Dokuz Eylül Üniversitesi Hemşirelik Fakültesi Elektronik Dergisi, 7(3), 230-237.



According to the literature, health education provided based on the Health Belief Model (Figure 2.4) affects children's physical activity levels (Khodaveisi et al., 2021), healthy eating behaviours (Suirvi et al., 2022), hygiene behaviours (Walker and Jackson, 2015), injury prevention (Cheraghi et al., 2014), and other related topics.

Interventions for Promoting Healthy Lifestyle Behaviors in Children

Today, many children and adolescents are moving away from healthy lifestyle behaviors due to factors such as fast-paced lifestyles, technology dependence, and poor dietary habits. Educators, parents, and health professionals play a crucial role in reversing these negative trends by collaborating to promote healthy lifestyle behaviors among children (Mollborn et al., 2024; Muth et al., 2024; Yalçın & Yılmaz, 2023).

Childhood is a critical period for the development of healthy lifestyle behaviors that influence lifelong health and well-being. Therefore, it is of great importance to develop and implement effective interventions aimed at promoting healthy lifestyle behaviors in children during this stage (Larose et al., 2023).

The literature has evaluated various intervention strategies to support healthy lifestyle behaviors.

Multicomponent Interventions

These interventions aim to support healthy lifestyle behaviors in children by combining nutrition education, physical activity programs, parent education, and community-based programs. Multicomponent approaches have been found to be more effective than single-component interventions (Robinson et al., 2021; Brand et al., 2020). According to the literature, implementing interactive classroom workshops, crosscurricular activities, homework assignments, visual educational materials, and parent education together in schools has been shown to increase children's fruit and vegetable consumption (Ilić et al., 2022). Similarly, combining nutrition education for families with school-based physical activity programs leads to more pronounced improvements in children's healthy eating and physical activity behaviors (Robinson et al., 2021; Brand et al., 2020).

Parent-Focused Interventions

Parents play a significant role in fostering their children's adoption of healthy lifestyles. Educational and support programs targeting parents positively influence children's healthy lifestyle behaviors. These programs not only provide parents with information about healthy eating and physical activity but also aim to teach them how to communicate effectively with their children and promote a healthy lifestyle within the home environment (Ku & Rhodes, 2020).

School-Based Interventions

Schools provide an ideal setting for teaching and promoting healthy lifestyle behaviors among children. Health education programs integrated into the curriculum support the development of health literacy by increasing children's knowledge and awareness regarding nutrition and physical activity (Jakobovich et al., 2023; Sevil-Serrano et al., 2022).

The literature indicates that nutrition and physical activity lessons integrated into the curriculum and supported by additional activities such as homework and workshops increase nutrition knowledge, improve attitudes toward fruit, vegetable, and water consumption, and reduce BMI z-scores (Balderas-Artega et al., 2024). Additionally, an eight-month program of healthy eating and physical activity activities for preschool children was found to positively influence the quality of their snack choices, water intake, ability to express post-exercise feelings, and adoption of a healthy lifestyle at home (Jakobovich et al., 2023).

Technology-Assisted Interventions

Digital games, mobile applications, and other technological tools can be used to teach healthy lifestyle behaviors to children in an engaging and interactive manner. These tools help increase children's motivation, develop their knowledge and skills, and support healthy behavior changes (Espinosa-Curiel et al., 2022; Browne et al., 2020). Mobile game-based healthy lifestyle programs contribute to the improvement of children's physical, psychological, social, and emotional health and can also be implemented as a health education method for specific groups, such as childhood cancer survivors (Kang et al., 2024).

Community-Based Interventions

Community-based programs aim to bring together families, schools, and other social organizations on a shared platform to promote healthy lifestyle behaviors. These programs may include environmental arrangements that support children's participation in physical activity, increase accessibility to healthy foods, and cultural activities that encourage a healthy lifestyle within the community. A scoping review found that activities designed to promote healthy eating and physical activity in summer camps had positive effects on healthy lifestyle behaviors themselves, or on their determinants, among children and adolescents (Larose et al., 2023).

Conclusion

There is a need for multicomponent and comprehensive interventions to promote healthy lifestyle behaviors in children. These interventions should be implemented at the family, school, and community levels and tailored to children's ages, developmental stages, and cultural characteristics. Promoting healthy lifestyle behaviors in children is an important step not only for individual well-being but also for improving the overall health status of the community (Larose et al., 2023).

Conflict of Interest Statement

The author declare that there are no potential conflicts of interest related to the research, authorship, and/or publication of this article.

Funding

No financial support was received for this project.

Ethical Approval

As this study is a review article, ethical approval was not required.

References

American Diabetes Association. (2020). Children and adolescents: Standards of medical care in diabetes–2020. Diabetes Care, 43(Supplement_1), S163–S182. https://doi.org/10.2337/dc20-S013

Ashraf, M., Irshad, M., & Parry, N. A. (2020). Pediatric hypertension: An updated review. Clinical Hypertension, 26, 1–6. https://doi.org/10.1186/s40885-020-00156-w

Balderas-Arteaga, N., Mendez, K., Gonzalez-Rocha, A., Pacheco-Miranda, S.,

Bonvecchio, A., & Denova-Gutiérrez, E. (2024). Healthy lifestyle interventions within the curriculum in school-age children: Systematic review and meta-analysis. Health Promotion International, 39(2), daae020. https://doi.org/10.1093/heapro/daae020

Brand, C., Martins, C. M. D. L., Lemes, V. B., Pessoa, M. L. F., Dias, A. F., Cadore, E. L., ... Gaya, A. R. (2020). Effects and prevalence of responders after a multicomponent intervention on cardiometabolic risk factors in children and adolescents with overweight/obesity: Action for health study. Journal of Sports Sciences, 38(6), 682–691. https://doi.org/10.1080/02640414.2020.1725384

Browne, S., Kechadi, M. T., O'Donnell, S., Dow, M., Tully, L., Doyle, G., & O'Malley, G. (2020). Mobile health apps in pediatric obesity treatment: Process outcomes from a feasibility study of a multicomponent intervention. Journal of Medical Internet Research mHealth and uHealth, 8(7), e16925. https://doi.org/10.2196/16925

Cheraghi, P., Poorolajal, J., Hazavehi, S. M. M., & Rezapur-Shahkolai, F. (2014). Effect of educating mothers on injury prevention among children aged <5 years using the Health Belief Model: A randomized controlled trial. Public Health, 128(9), 825–830. http://doi.org/10.1016/j.puhe.2014.06.017

Chia, A., Toh, J. Y., Natarajan, P., Cai, S., Ong, Y. Y., Descarpentrie, A., ... Chong, M. F. (2024). Trajectories of lifestyle patterns from 2 to 8 years of age and cardiometabolic risk in children: The GUSTO study. International Journal of Behavioral Nutrition and Physical Activity, 21(1), 9. $\frac{1}{2} \frac{1}{2} ghbal, S. B., Kenari, Z. A., Ashouri, A., Rouhani-Tonekaboni, N., Kasmaei, P., Mehrabian, F., ... Fattahi, E. (2023). The effectiveness of educational program based on health belief model on promotion of puberty health concepts among teen girls: A cross-sectional study in north of Iran. BioMed Central Women's Health, 23(1), 239. https://doi.org/10.1186/s12905-023-02391-3

Espinosa-Curiel, I. E., Pozas-Bogarin, E. E., Hernández-Arvizu, M., Navarro-Jiménez, M. E., Delgado-Pérez, E. E., Martínez-Miranda, J., & Pérez-Espinosa, H. (2022). HelperFriend, a serious game for promoting healthy lifestyle behaviors in children: Design and pilot study. Journal of Medical Internet Research Serious Games, 10(2), e33412. https://doi.org/10.2196/33412

Fiamenghi, V. I., & Mello, E. D. D. (2021). Vitamin D deficiency in children and adolescents with obesity: A meta-analysis. Jornal de Pediatria, 97, 273–279. https://doi.org/10.1016/j.jped.2020.08.006

Gözüm, S., & Çapık, C. (2014). Sağlık Davranışlarının Geliştirilmesinde Bir Rehber: Sağlık İnanç Modeli. Dokuz Eylül Üniversitesi Hemşirelik Fakültesi Elektronik Dergisi, 7(3), 230-237. Erişim: https://dergipark.org.tr/tr/pub/deuhfed/issue/46807/586981

Green, E. C., Murphy, E. M., & Gryboski, K. (2020). The health belief model. In The Wiley Encyclopedia of Health Psychology (pp. 211–214). Wiley. https://doi.org/10.1002/9781119057840.ch68

Guthold, R., Stevens, G. A., Riley, L. M., & Bull, F. C. (2020). Global trends in insufficient physical activity among adolescents: A pooled analysis of 298 population-based surveys with 1.6 million participants. The Lancet Child & Adolescent Health, 4(1), 23–35. https://doi.org/10.1016/S2352-4642(19)30323-2

llić, A., Rumbak, I., Brečić, R., Barić, I. C., & Bituh, M. (2022). Increasing fruit and vegetable intake of primary school children in a quasi-randomized trial: Evaluation of the three-year school-based multicomponent intervention. Nutrients, 14(19), 4197. https://doi.org/10.3390/nu14194197

Jakobovich, R., Berry, E. M., Levita, A., & Levin-Zamir, D. (2023). Developing healthy lifestyle behaviors in early age—An intervention study in kindergartens. Nutrients, 15(11), 2615. https://doi.org/10.3390/nu15112615

Jebeile, H., Kelly, A. S., O'Malley, G., & Baur, L. A. (2022). Obesity in children and adolescents: Epidemiology, causes, assessment, and management. The Lancet Diabetes & Endocrinology, 10(5), 351–365. https://doi.org/10.1016/S2213-8587(22)00047-X

Kang, K. A., Kim, H. H., Kim, S. J., Song, I. H., Lee, M. J., Lee, S. Y., ... Yoon, H. J. (2024). Effectiveness of a healthy lifestyle program based on a mobile serious game for childhood cancer survivors: A quasi-randomized trial. Journal of Pediatric Nursing, 77, 35–44. https://doi.org/10.1016/j.pedn.2024.03.006

Khodaveisi, M., Azizpour, B., Jadidi, A., & Mohammadi, Y. (2021). Education based on the health belief model to improve the level of physical activity. Physical Activity and Nutrition, 25(4), 17. https://doi.org/10.20463/pan.2021.0022

Ku, B., & Rhodes, R. E. (2020). Physical activity behaviors in parents of children with disabilities: A systematic review. Research in Developmental Disabilities, 107, 103787. https://doi.org/10.1016/j.ridd.2020.103787

Kudubeş, A. A., & Bektas, M. (2020). Psychometric properties of the Turkish version of the healthy lifestyle belief scale for adolescents. Journal of Pediatric Nursing, 53, e57-e63. https://doi.org/10.1016/j.pedn.2020.02.006

Larose, D., Chen, M. C.-S., Panahi, S., Yessis, J., Tremblay, A., & Drapeau, V. (2023). Interventions to promote healthy lifestyle behaviors in children and adolescents in summer day camps: A scoping review. BioMed Central Public Health, 23(1), 773. https://doi.org/10.1186/s12889-023-15521-1

Lu, C., Chi, X., Liang, K., Chen, S. T., Huang, L., Guo, T., ... Zou, L. (2020). Moving more and sitting less as healthy lifestyle behaviors are protective factors for insomnia, depression, and anxiety among adolescents during the COVID-19 pandemic. Psychology Research and Behavior Management, 13, 1223–1233. https://doi.org/10.2147/PRBM.S284103

Mollborn, S., Pace, J. A., & Rigles, B. (2024). Children's health lifestyles and the perpetuation of inequalities. Journal of Health and Social Behavior. Advance online publication. https://doi.org/10.1177/00221465241255946

Moscheo, C., Licciardello, M., Samperi, P., La Spina, M., Di Cataldo, A., & Russo, G. (2022). New insights into iron deficiency anemia in children: A practical review. Metabolites, 12(4), 289. https://doi.org/10.3390/metabo12040289

Moussi, C., Tahan, L., Habchy, P., Kattan, O., Njeim, A., Abou Habib, L., ... Chahine, M. N. (2024). School-based pre- and post-intervention tests knowledge about healthy lifestyles: A national school health awareness campaign on children aged between 3 and 12 years old. Children, 11(2), 213. https://doi.org/10.3390/children11020213

Muth, N. D., Bolling, C., Hannon, T., & Sharifi, M. (2024). The role of the pediatrician in the promotion of healthy, active living. Pediatrics, 153(3), e2023065480. https://doi.org/10.1542/peds.2023-065480
Peng, S. M., & McGrath, C. (2020). What can we do to prevent small children from suffering from tooth decay? Evidence-Based Dentistry, 21(3), 90–91. https://doi.org/10.1038/s41432-020-0111-9

Robinson, T. N., Matheson, D., Wilson, D. M., Weintraub, D. L., Banda, J. A., McClain, A., ... Desai, M. (2021). A community-based, multi-level, multi-setting, multi-component intervention to reduce weight gain among low socioeconomic status Latinx children with overweight or obesity: The Stanford GOALS randomised controlled trial. The Lancet Diabetes & Endocrinology, 9(6), 336–349. https://doi.org/10.1016/S2213-8587(21)00084-X

Rogers, P. C., & Barr, R. D. (2020). The relevance of nutrition to pediatric oncology: A cancer control perspective. Pediatric Blood & Cancer, 67(12), e28213. https://doi.org/10.1002/pbc.28213 Sevil-Serrano, J., Aibar, A., Abós, Á., Generelo, E., & García-González, L. (2022). Improving motivation for physical activity and physical education through a school-based intervention. The Journal of Experimental Education, 90(2), 383–

403. https://doi.org/10.1080/00220973.2020.1764466

Sonğur, C., Kar, A., Kıran, Ş., & Macit, M. (2019). Sağlıklı yaşam biçimi davranışlarının değerlendirilmesi: Klinik sağlık hizmeti alan hastalar üzerinde bir araştırma. Balkan Sosyal Bilimler Dergisi, 8(15), 43–52. Erişim: https://dergipark.org.tr/tr/pub/bsbd/issue/43873/425512

Suirvi, L., Herlina, & Dewi, A. P. (2022). Efektivitas pendidikan kesehatan berbasis the Health. Jurnal Ners Indonesia, 12(2), 114–121. Erişim: https://www.researchgate.net/publication/361909002_EFEKTIVITAS_PENDID IKAN_KESEHATAN_BERBASIS_THE_HEALTH_BELIEF_MODEL_PADA_P ENDERITA_HIPERTENSI

Sümen, A., & Öncel, S. (2017). Türkiye'de lise öğrencilerinin sağlıklı yaşam biçimi davranışlarını etkileyen faktörler: Sistematik derleme. European Journal of Therapeutics, 23(2), 49–94. https://doi.org/10.5152/EurJTher.2017.04044

T.C. Sağlık Bakanlığı Halk Sağlığı Genel Müdürlüğü. (2022). Türkiye Beslenme Rehberi (TÜBER). Ankara. Erişim: https://hsgm.saglik.gov.tr/depo/birimler/saglikli-beslenme-ve-hareketli-hayat-db/Dokumanlar/Rehberler/Turkiye_Beslenme_Rehber_TUBER_2022_min.pdf

Türkiye İstatistik Kurumu (TÜİK). (2023). Türkiye Çocuk Araştırması-2022. Erişim: https://data.tuik.gov.tr/bulten/index?p=turkiye-cocuk-arastirmasi-2022-49744

Walker, K., & Jackson, R. (2015). The health belief model and determinants of oral hygiene practices and beliefs in preteen children: A pilot study. Pediatric Dentistry, 37(1), 40–45. Erişim: https://pubmed.ncbi.nlm.nih.gov/25685972/

World Health Organization. (2022). Child mortality (under 5 years). Erişim: https://www.who.int/news-room/fact-sheets/detail/levels-and-trends-in-child-under-5-mortality-in-2020

Yalçın, R., & Yılmaz, E. A. (2023). Physical activity levels and healthy lifestyle behaviors of high school students. Cumhuriyet Üniversitesi Sağlık Bilimleri Enstitüsü Dergisi, 8(3), 385–392. https://doi.org/10.51754/cusbed.1287299

Zimmermann, M. B. (2020). Iodine and the iodine deficiency disorders. In Present Knowledge in Nutrition (pp. 429-441). Academic Press. https://doi.org/10.1016/B978-0-323-66162-1.00025-1