

Food pattern of rural and urban people (Comparative study with special reference to TamilNadu)

Dr.M.Mary Anbumathy

Head of PG and Research Department of Commerce

Nehru Memorial College

Puthanampatti

Introduction

Our body contains Material consisting essentially protein, carbohydrate, and fat used in the body of an organism to safeguard growth, repair, and vital processes and to furnish energy with supplementary substances such as minerals, vitamins and condiments . Indian philosophy says Annam or food is an aspect of Bhraman. It is a gift of paramatma. The physical body is called Annamayakosha(Food body) since it is nourished and grown by absorbing ingredients from food.

Changing food and cooking pattern

The traditional food pattern plays important role in maintaining the well-being and health of people. The various types of traditional food system has been recorded in ancient scriptures and literature. Recent research shows that 10 to 15% of citizens remain in traditional food pattern. This is caused due to ecology becoming different, Change is science, technological advancement and economic conditions. Changes occurred not only in food pattern but also in cooking methods, cooking vessels, ingredients used in cooking including drinking water.

Importance of traditional food pattern

Food should be eaten for survival, growth and strength of the body, not for pleasure. Awareness created on traditional food system can contribute to create a healthy society to build strong nation. The traditional knowledge of food is considered to be the best for particular geographical condition. Changing food pattern can damage the quality health of the society.

Thiruvalluvar says in the kural 945 “If only agreeing foods are consumed, that too with limitation, there is no health problems to the living”. Our elders practiced the food habit in such a way there is no need for drugs. It helps them to stay healthy. Today in modern world drugs become food for many due to their unhealthy food behaviours. Today we are moving on to packed food and fast food which is base for many disease. This is the right time to turn back to our traditional food like siru thaniya food, fireless cooking, steam less cooking, eating too much of fruits and vegetables. Bad eating habits increases risk of lifestyle like diabetes, heart disease, cancer and various other chronic diseases not only to adults but also to kids.



Source : www.medindia.net

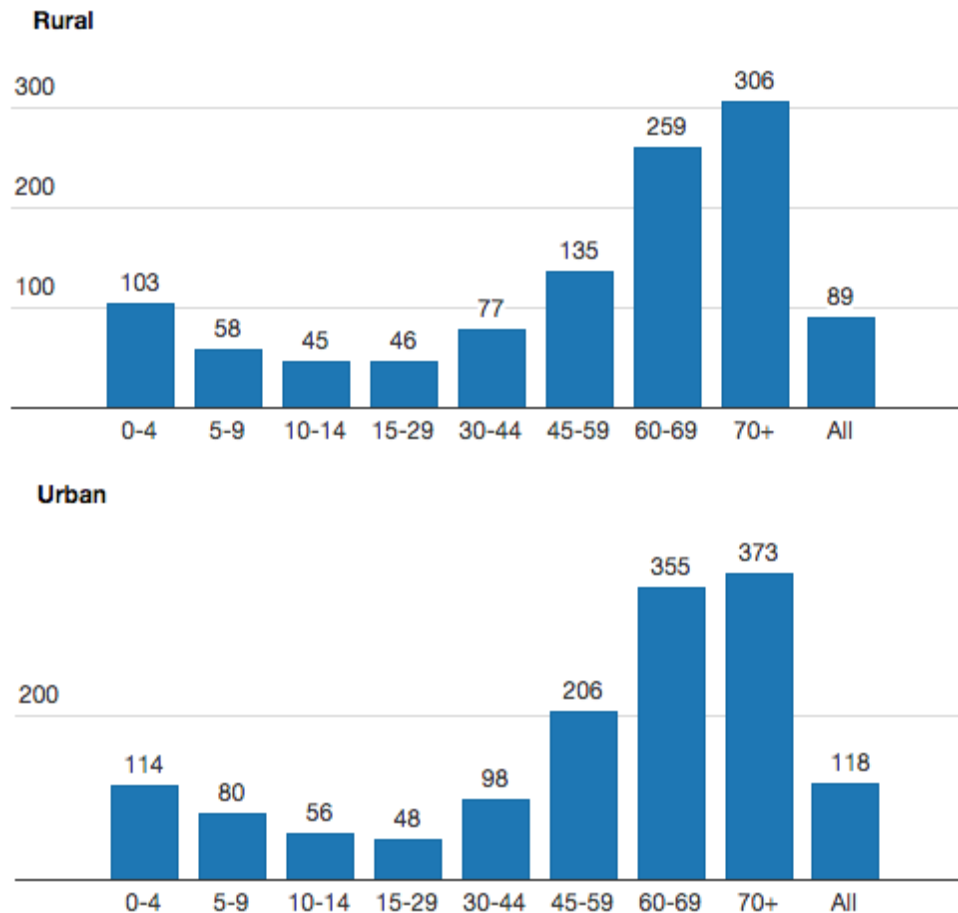
In a specific region how the people, groups and nation is formed is termed as life style of the people. In a specific time and place the real inhabitants of a region is life style. It lists the behaviour, functions, activities, and diet of the people. WHO says that sixty percent of the health of the people is related to their life style. Life style not only influence physical health and also mental health. In this study only the diet aspect is taken for study.

India is rapidly becoming urbanized. Around 2030 forty percent of the country's population will live in urban areas. This study deals about comparatively the health awareness and diet pattern of rural and urban people in India.

Junk foods are high energy food which increases weight and which contains lot of fat and sugar. Intake of junk food will reduce the sensory-specific satiety. It brings chronic diseases like Type 2 diabetes and nutritional deficiencies. Too much of sugar can have many negative health effects. An excess of sweetened foods and beverages can lead to weight gain, blood sugar problems and increased risk of heart diseases. Millets are alkaline and it digests easily. Millets will hydrate your colon to keep you from being constipated. Millets are smart carb with lots of fiber and low simple sugars. Antioxidants are retained in our body due to cold pressed oil. Antioxidants help combat free radicals that cause cell damage in the body. Vitamin E is rich in cold pressed oil. Rock salt oil improves Digestion, boosts metabolism, stabilizes blood pressure, treats sinus, promotes sleep and reduces stress.

Age-wise Break-up Of Sufferers, 2014

Proportion per 1,000



Source: [MOSPI](#) [Get the data](#)

The above diagram shows comparatively that urban people are more sufferers in health than in rural people. The researcher wants to concentrate on these items of food and have a comparative study in rural with urban area

Research methodology

The researcher collected 800 households in TamilNadu were collected from rural and urban areas. The researcher used non probability sampling called random sampling. The researcher used Likert scaling technique. Five point scale was used.

The degrees used are (1) Strongly Agree (2) Agree (3) Neutral (4) Disagree (5) Strongly Disagree. The researcher used convenience Descriptive research design to study the consumer behaviour, awareness, concern and action towards health awareness. The study is mainly based on primary data collection with pre tested questionnaire. Secondary data was also collected through journals magazines, articles and various websites. The collected data was analysed through Chi square test, Mann-Whitney test, Two –sample Kolmogorov-Smirnov Test to give the result. Cronbach's alpha score for the attributes was calculated as .876 which is greater than 0.7. It can be seen that the factors chosen are quite good and relevant.

Objective of the study

1. To know whether health awareness are more in rural or in urban areas in Tamil Nadu.
2. To study the life style of people with food habit in rural and urban areas
3. To understand the type of product they use in daily cooking.
4. To give suggestions to improve the awareness regarding health pattern.

1 Relation between fruits as supplement of food and place of the respondents

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	.920 ^a	4	.922
Likelihood Ratio	.926	4	.921
Linear-by-Linear Association	.562	1	.453
N of Valid Cases	800		

a. 0 cells (0.0%) have expected count less than 5. The minimum expected count is 6.34.

Null Hypotheses: There is no association between food and place of the respondents. Since the calculated value .922 is more than .05 the hypothesis is accepted. Irrespective of gender both male and female is supplementing in both rural and urban.

2. Relation between place and in take of junk food

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	13.970 ^a	4	.007
Likelihood Ratio	14.823	4	.005
Linear-by-Linear Association	6.268	1	.012
N of Valid Cases	800		

a. 2 cells (20.0%) have expected count less than 5. The minimum expected count is 3.90.

Null Hypotheses: There is no association between the awareness that Intake of junk food makes serious illness to the health and place of the respondents.

Since the calculated value is lesser than table value the hypothesis is rejected. Hence it is proved that junk food is more taken more by people in urban areas.

3. Mann-Whitney Test

Test Statistics^a

	Usage of Cold Press oil helps in increasing immunity
Mann-Whitney U	312.500
Wilcoxon W	1092.500
Z	-4.796
Asymp. Sig. (2-tailed)	.000

a. Grouping Variable: Place of the respondents

Null Hypotheses: There is no association between the awareness that usage of cold press oil helps in increasing immunity. Since the calculated value is lesser than table value the hypothesis is rejected. Hence it is proved that there is difference in usage of cold press oil in rural and urban area. It is widely used in rural area.

4.

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	6.879 ^a	4	.142
Likelihood Ratio	7.182	4	.127
Linear-by-Linear Association	5.112	1	.024
N of Valid Cases	800		

a. 5 cells (50.0%) have expected count less than 5. The minimum expected count is 1.46.

Null hypothesis: There is no association between the awareness of millets helps in reduction of diabetics with respect to place of the respondents. Since the calculated value is greater than table value 0.05 the hypothesis is accepted. There is no association between place of living and knowledge that millets helps in reducing diabetics.

5.Two-Sample Kolmogorov-Smirnov Test

Test Statistics^a

	Rock salt is rich in mineral than table salt
Absolute	.323
Most Extreme Differences	Positive .323
	Negative .000
Kolmogorov-Smirnov Z	1.443
Asymp. Sig. (2-tailed)	.031

a. Grouping Variable: Place of the respondents

Null Hypothesis There is no association between usage of rock salt in food and place of residence of the respondents. Since the calculated value is lesser than 0.05 the hypothesis is rejected. Urban people are more aware of rock salt and they use more.

6. Chi square Test

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	46.967 ^a	4	.000
Likelihood Ratio	60.092	4	.000
Linear-by-Linear Association	36.888	1	.000
N of Valid Cases	800		

a. 4 cells (40.0%) have expected count less than 5. The minimum expected count is 2.00.

Null Hypothesis: There is no association between use of jaggery in the place of white sugar and place of residence. Since the calculated value is lesser than 0.05 the hypothesis is rejected. Rural people are using jaggery more in the place of white sugar which is not good for health.

FINDINGS

- 800 members from both rural and urban were selected for the study to give their opinion regarding health awareness and usage of food items.
- Chi square test reveals that irrespective of place, both rural and urban and irrespective of gender both male and female are aware of the fact that fruits can be supplemented for food and also they practice this concept in their food pattern.
- Man-Whitney test reveals that cold press oil is mostly used by rural area people and they are aware of the advantages of cold press oil increases the immunity power.
- Two-sample Kolmogorov-Smirnov Test reveals that urban people are more aware of rock salt and they use in their food pattern.

- Chi square test reveals that junk food is taken more by urban population due to their busy life and saving the time.

Suggestions

This interesting study shows the result that rural people are having healthy food habit than urban people. Rural people are having more awareness regarding the advantages of cold press oil, usage of jaggery instead of white sugar and they occasionally have hunk food. As far as urban people are concerned they are more aware of usage of rock salt. Both rural and urban are aware of the advantage and usage of millets and fruits as supplement for food. Awareness should be created from the school level regarding health education. Government should promote various advertisement regarding good food habits and food pattern in social medias.

Conclusion

Food plays important part in everyone's lives. It gives us energy and nutrients to grow and develop. It is main source of energy. If we give wrong food one will get overweight, undernourished, and at risk for development of diseases and conditions such as arthritis, diabetes, and heart diseases. The science and art dealing with the maintenance of health and the prevention alleviation, or cure of diseases. Knowingly or unknowingly rural people are practicing good food habits than urban people. To avoid chronic diseases everyone should practice good life pattern.

References

1. Farhud DD, Malmir M, Khanahmadi M. (2015). Happiness as a healthy life style. Iranian Academy of Medical Science. (In press) [Google Scholar]
2. Farhud DD, Tahavorgar A. (2013). Melatonin hormone,

- metabolism & its clinical effects: a review. Iran J Endocrinol Metabol, 15 (2): 221– 236 (In Persian). [Google Scholar]
3. Ebrat news (2013). Frequency of using cigarette in adolescents: awareness of authority. www.ebrat.ir/part=mobil&inc=news&id=48774 . Accessed: 1 Oct 2014
4. Ebadi M, Vahdaninia M, Azin A, Aeenparast A, Omidvari S, Jahangiri K, et al. (2011). Prevalence of smoking: health in view of Iranian. Peyesh Quarterly, 10 (3); 365– 372. [Google Scholar]
5. Thomee S, Harenstam A, Hagberg M. (2011). Mobile phone use and stress, sleep disturbances, and symptom of depression among young adults. BMC Public Health, 11: 66–77. [PMC free article] [PubMed] [Google Scholar]
6. Farhud DD, Malmir M, Khanahmadi M. (2015). Happiness as a healthy life style. Iranian Academy of Medical Science. (In press) [Google Scholar]
7. Farhud DD, Tahavorgar A. (2013). Melatonin hormone, metabolism & its clinical effects: a review. Iran J Endocrinol Metabol, 15 (2): 221– 236 (In Persian). [Google Scholar]
8. Ebrat news (2013). Frequency of using cigarette in adolescents: awareness of authority. www.ebrat.ir/part=mobil&inc=news&id=48774 . Accessed: 1 Oct 2014
9. Ebadi M, Vahdaninia M, Azin A, Aeenparast A, Omidvari S, Jahangiri K, et al. (2011). Prevalence of smoking: health in view of Iranian. Peyesh Quarterly, 10 (3); 365– 372. [Google Scholar]
10. Regi, S. B., & Golden, S. A. R. (2014). A Descriptive Study On The Role Of Consumer Psychology And Behaviour In Product Purchasing. *Indian Streams Research Journal*, 3(12), 1-6.