



A STUDY OF FOOD INTAKE & NUTRIENT CONSUMPTION PATTERNS AMONG WORKING WOMEN: SOME OBSERVATION

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ABSTRACT

Background: Women play a significant role at home, workplace as well as in the society. Every age group of women had different lifestyles and workloads for which they might have different fitness level as well as different health status. In previous years majority of Indian women were illiterate, shy and were in engaged and sometimes restricted to household activities only but now a day's women is getting higher educating and are being worked in the various areas of the society.

Objectives: The present study was designed to find out the food consumption patterns of working women in Hamirpur district of Himachal Pradesh. This study also shows the food Patterns and habits which also affects the health and nutritional status of the working women only.

Methodology: This study was conducted in district Hamirpur. Fifty women have been taken for the study with the help of purposive sampling technique. Data was collected by using semi-structured questionnaire and for the information on the frequency consumption of each food item; food frequency and 24 hours recall dietary method was used.

Results: Seventy four percent of the rural women stated that the nature of diet is vegetarian; the majority of the women thought that the vegetarian food is healthier than the non-vegetarian food. Majority of the women nearly 32% consumed Tea+ Roti+ Vegetable curry as morning diet, and least about 6% includes fruits as diet in breakfast. The majority of the respondents (42 percent) consume rice with vegetable curry in their diet out of total 26 percent of them had outside food like chana samosa, chana kulcha, tikki, etc.

Conclusion: The present study reveals that working women with less economic status had a poor nutrient intake of food in their diet they consumed a negligible amount of fruits, fats, energy intake in their diet.

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INTRODUCTION

In India, Food is a symbol of social status & hierarchy; in this social diversity food over and over again plays significant aspects of the margins between the various regions.[1] A variety of cultures & socio-economic status influence the food intake choices and consumption patterns in this diverse society is likely to vary according to the season, availability of food groups & prices of the food products. These all indicators regarding food have been shown as significant determinants of food intake. [2] Dietary patterns and foods provide our bodies with the energy, protein, essential fats, vitamins and minerals to live, grow and function properly. Human beings need a wide variety of different foods to provide the right amounts of nutrients for good health and enjoyment of a healthy diet can also be one of the great cultural pleasures of life. The amount of food taken by the human beings i.e. too small, or too large or inadequate food or diet patterns causes in diseases such as malnutrition.

In many other studies done by (Roos *et al.* 1998; Dittus *et al.* 1995; Hupkens *et al.* 2000), it is explored that unemployment has also been an important indicator in food intake choices it affects less spending of money on food items or purchasing of food groups, thus low income becomes a barrier to the purchase of fruit and vegetable consumption. [8,9,10] in our study type of occupation is significantly associated with all food items. Nutrition and food problems are often difficult to solve because of the magnitude of many political, social, economic and geographical factors. Now rather than food patterns, knowledge on what should be eaten and the awareness of the healthy food habits are some steps to changing our eating behaviours. Many research studies show that the usual dietary intake of certain nutrients is inadequate for meeting the needs of vulnerable groups especially women and child in our country. "A woman's health in her total well-being is not resolute only by her biological and reproduction factors it also affects by her workload in office & household, stress at workplace, nutritional health & migration." [3] Women play a significant role at home, workplace as well as

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in the society. Every age group of women had different lifestyles and workloads for which they might have different fitness level as well as different health status [4]. In previous years majority of Indian women were illiterate, shy and were in engaged and sometimes restricted to household activities only but now a day's women is getting higher educating and are being worked in the various areas of the society. In today's era women is entering into certain new fields that were unknown to the woman's sphere of role-sets as housewife, mother, grandmother and daughter in old traditional societies and are starting participating in social, economic, and political activities. In this male dominating society, modern women have been started caring her health, involving in social issues and also trying to improve the economic needs of the families and to accomplish the higher standard of living by contributing in economic activities. Numerous research studies based on the correlation between nutritional food intakes has been done in various parts of the world and also report the important influence of social and demographic factors on food consumption pattern (Harriss-White and Hoffenberg, 1994). [5]

Objectives of the Study

The present study was designed to find out the food consumption patterns of working women in Hamirpur district of Himachal Pradesh. This study also shows the food Patterns and habits which also affects the health and nutritional status of the working women only.

METHODOLOGY

This study was conducted in district Hamirpur. Fifty women have been taken for the study with the help of purposive sampling technique. Data was collected by using semi-structured questionnaire and for the information on the frequency consumption of each food item; food frequency and 24 hours recall dietary method was used.

RESULTS AND DISCUSSION

The following figures were used to analyse the primary data collected from the field as their responses were explained through this tabulation.

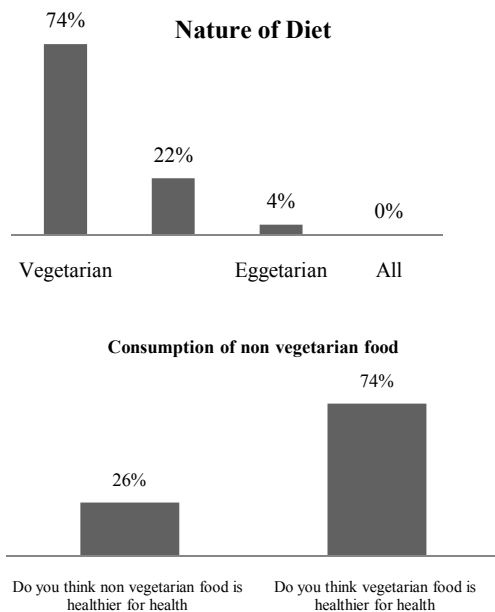


Figure No 1 & 2

Here figure no 1: Seventy four percent of the rural women stated that the nature of diet is vegetarian on the few percent i.e. 22 percent consumed non-vegetarian food in nature & rest only 4 percent are eggetarian in nature. Behind this the reason was that the most of the working women participated in religious activities, they practice fasting, visited the temple, read holy books. A study was done by Martorell, R. and J.J. Ho (1984), titled "Malnutrition Morbidity and Mortality" found that the existing literature on the relation between food energy intake and nutritional status is problematic. This is because food energy intake is an inadequate measure of nutritional status. Various factors like non-nutrient food attributes, privately and publicly provided inputs and health status of the individual also affect the nutritional status. [11] Figure no: 2: Showed the opinion of the working women towards the consumption of non-vegetarian food, the majority of the women thought that the vegetarian food is healthier than the non-vegetarian food.

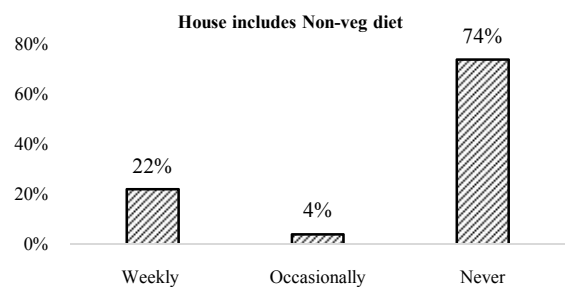


Figure No: 3

Figure 3: Indicated that the non-vegetarian diet in household cooked only sometimes like if there is a function or when any relative/friends especially males visited the household. In the present study, most of the women consumed vegetarian food because in non vegetarian food it requires an increased amount of oil, ghee, lots of spices as compared to vegetarian's food. As per the study was done by Michael J. Orlich, *et al.* (2014) titled "Patterns of food consumption among vegetarians and non-vegetarians" highlighted that choosing a vegetarian diet would also consciously make other healthful dietary choices. It is consistent with a health motivation for choosing a vegetarian diet. [12]

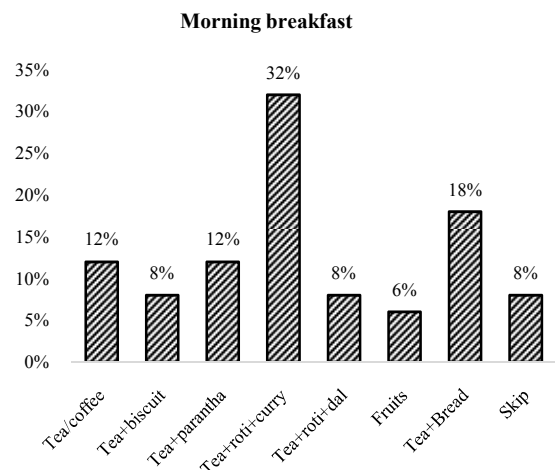


Figure No 4

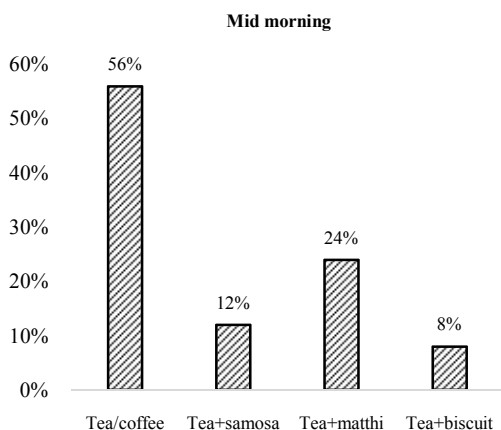


Figure No: 5

Figure No: 5 & 6 highlighted the morning & mid-morning habits of the working women. Majority of the women nearly 32% consumed Tea+ Roti+ Vegetable curry as morning diet, and least about 6% includes fruits as diet in breakfast. The fruits are consumed only when it is told by the health practitioner only during illness. The prices of the fruits were high these days so they do not spend more money on them. A research work stated by Estaquio *et al.* (2008) found that food consumption pattern among different occupation categories shows that men from highest occupation level spend more money to eat fruits and vegetables whereas this is negatively related to occupation among women. [13] Further the figure no: 6 showed that the working women respondents consumed tea/coffee mostly in mid-morning time only a few percent (8%) consumed tea with biscuits. A Study conducted by Khalid, F. A, *et al.* (2017) found that tea and coffee were excessively consumed in the morning and during the day. Fruit and vegetable consumption was low. Conclusion: There was excessive consumption of tea and coffee, which had a negative impact on food intake and absorption. [14]

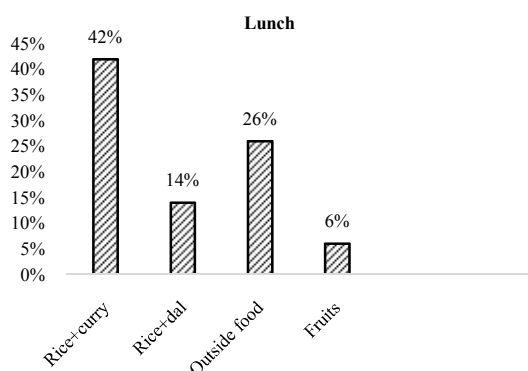


Figure No 6

Figure no 6 & 7 represented the lunch intake & tea consumption of the working women. The majority of the respondents (42 percent) consume rice with vegetable curry in their diet out of total 26 percent of them had outside food like chana samosa, chana kulcha, tikki, etc. A study had done by

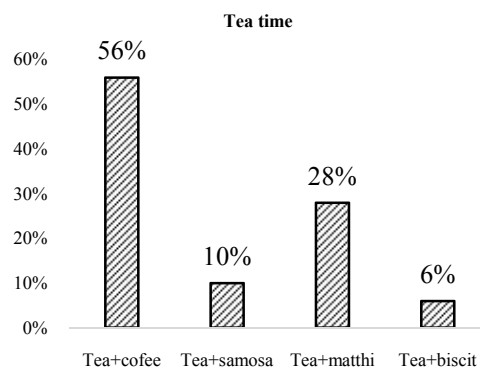


Figure No 7

Rout, N. R. (2009) highlighted that most of the rural women when categorized were found to be taking less food than their requirement. All these clearly suggest a condition of emergency for improving the nutritional status of women, especially in the rural areas either if they are working. [15] In tea time the women generally had tea only which is 56 percent and 28 percent of the respondent had tea with matthi because they skip lunch.

CONCLUSION

The present study reveals that working women with less economic status had a poor nutrient intake of food in their diet they consumed a negligible amount of fruits, fats, energy intake in their diet. Whereas the other study done by Gupta, A., & K Mishr, D. (2014) reveals that consumption of different food items varies among socioeconomic groups and regions. The working person with a better income in the household has a higher status in the family also the families having less dependent members. Shows sign of high food diversity which makes them nutritionally healthier. [6] On the other hand a study was done by Nguyen, P. H, *et al.* (2013) showed that low income and less education status is a significant predictor of less nutritional food intake including protein fats & carbohydrates etc. [7] Above studies found focused on the healthier patterns of diet with reference to economic status, our present study also focused on the dietary patterns it also highlights the income status of the women as the respondents which were government servants faced less problem on food intake choices as compared to the women working in private sector.

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