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RESEARCH ARTICLE

Relationship of food preferences, education level and food awareness among diabetic population in central U.P.

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ABSTRACT

The study is an attempt to create more awareness among the diabetics regarding dietary pattern and role of food in their health as well. 57 per cent respondents acknowledged the consumption of salads and green vegetables as control measure whereas only 41 per cent respondents opined that it is better to consume smaller meals at regular intervals. It was found that respondents up to High School level education were less aware of harmful food stuff as compared to respondents above High School level education. Maximum respondents considered sugar and sweets, rice, puri and paratha and fat as harmful foodstuff. Most of the females in both samples were strictly vegetarian. Majority of diabetics males were almost equally distributed in three food habit categories.

Key words: Diabetes, Dietary habbits, Beneficial foods, Harmful foods

INTRODUCTION

India has the largest diabetic population in the world. It is estimated that in 1996 around 19.4 million individuals in the country were suffering from this deadly disease, which is likely to go up to 57.2 million by the year 2025 (Ramchandran, 1998). Diabetes mellitus begins at an early age amongst Indians. Increase duration of uncontrolled diabetes leads to late complications (Raheja et al., 2001). Diabetes is one of the most leading causes of death and it ranks third among chronic diseases (Park, 2000). Inspite of its wide prevalence, unknown to known diabetes ratio is about 1.8:1 in urban areas, while it is as high as 3.3:1 in rural areas (Indian task force, 2003). Anuradha and Vidhya (2000) observed that diabetes is gaining ground throughout the world in both developed and developing countries. The incidences of diabetes are increasing at an alarming rate in India. It was estimated that India had 19.4 million diabetics in 1995, and expected to register a near threefold increase by year 2025. Diet control is foundation stone of diabetic treatment and for many diabetics, it is the only treatment needed. A diabetic can eat almost any food, provided it is balanced and within the permissible calorie limits, dietary management for diabetics should not aim only to achieve glycemic control, but also to normalize dyslipidaemia, commonly associated with it (Srilaxmi, 2000). Considering the gravity of the problem, the present study was designed and carried out with the objective to assess the dietary pattern and food awareness among diabetics of different age, sex and income groups of people in the study area.

MATERIALS AND METHODS

The present study has been conducted in the Kanpur city of Uttar Pradesh in India. Kanpur is assured to be near and true representative of the state as it has a rural urban mix economy. Primary and secondary data were analyzed for the purpose. Due to large sample population, sample survey method was used for sampling. Three stage sampling procedure was adopted. At first stage *i.e.* selection of hospitals, purposive sampling technique has been used while for selection of samples respondents' random sampling technique was preferred. For the present study, 200 diabetic respondents were chosen from various hospitals. The study was conducted at two state

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