ORIGINAL RESEARCH PAPER
Volume - 15 | Issue - 07 | July - 2026 | PRINT ISSN No. 2277 - 8179 | DOI : 10.36106/ijsr
INTERNATIONAL JOURNAL OF SCIENTIFIC RESEARCH

# IMPACT OF SOCIAL STATUS ON NUTRITIONAL KNOWLEDGE AND DIETARY BEHAVIOUR OF ADULT POPULATIONS IN PATNA (BIHAR) – AN OBSERVATIONAL STUDY

Dentistry

**Shivani Singh*** Ph.D Scholar, Department of Public Health Dentistry, Bareilly International University, Bareilly, Uttar Pradesh, India*Corresponding Author

**K.k.shivalingesh** Professor and Head of Department, Department of Public Health dentistry, Institute of Dental Sciences, Bareilly, Uttar Pradesh, India

## ABSTRACT

**BACKGROUND:** WHO reported that the lack of adequate nutritional knowledge promotes unhealthy eating practices among individuals. Today, many countries are facing a double burden of malnutrition; with concurrent undernutrition, micronutrient deficiencies and overweight and obesity. One of important factor in determining nutrition status of family is marriage and how much family have knowledge about nutrition. **AIMS AND OBJECTIVES:** The aim of the present study was to assess the nutritional knowledge of adult population in Patna (Bihar) and the objectives of this study was to correlate the nutritional knowledge and dietary behavior with the social status of adult population in Patna city.**MATERIALS AND METHODS:** In our study, a total of 2500 sample size was taken and a house-to-house survey was planned. All those peoples who were 18 years and above were included in the study. Those subjects who were unwilling to give informed written voluntary consent were excluded from the study. **RESULT:** In our study, out of 2500 subjects, maximum subjects were females. The nutritional knowledge score was more in single subjects compared to married couples. Divorced subjects has a nutritional knowledge score of 4.667 + 1.48. **CONCLUSION** The study highlights the importance of nutrition education to improve the nutritional knowledge and dietary behaviour. We also found that social status plays an important role in having nutritious food in daily diet.

## KEYWORDS

Awareness, Education, Knowledge, Marital Status, Nutrition

## INTRODUCTION

Better nutrition helps in developing strong immune systems, safer pregnancy and childbirth, improved infant, child and maternal health, lower risk of non-communicable diseases (such as diabetes and cardiovascular disease), and longevity. It is a multidisciplinary field which encompasses various aspects of food science, biology, and health. Nutrition plays an essential role in the overall health and quality of life of individuals and communities [1]. Growth and development of individual depend both on physical activity level and on external factors such as genetic disposition, biological clock, nutrition and environment. Especially in recent years, the lifestyle has rapidly been changed. Proper nutrition is one of the most important aspects of lifestyle Nutrition knowledge is an important factor affecting nutrition behaviour of individuals, families and the society. Nutrition education is delivered through multiple venues and involves activities at the individual, community, and policy levels" [2]. Adequate level of nutritional knowledge of married couples help in preventing from wrong practices derive from traditions and wrong habits which will eventually affect the health and well nutrition of individuals, families and societies. Nutrition education must be given in primary school for developing positive attitudes and behaviours related to nutrition and this should continue in every phase of life [3]. Marriage customs and other cultural practices can play an important role in terms of how food and other resources are distributed within the household. Women play a vital role in ensuring the nutritional well-being of their families, regardless of the society or culture in which they live. In the modern world, women are not only responsible for their traditional family duties but also actively participate in social and economic activities. They contribute to production, create value, and make significant contributions in fields such as art, politics, science, technology, education, and industry. Empowering women with proper nutritional knowledge prevents harmful traditional practices and poor dietary habits, ultimately safeguarding the health of individuals, families, and communities. The foundation of this knowledge is education. To foster lifelong positive attitudes and healthy behaviours, nutrition education should begin in primary school and continue throughout adulthood [4]. Till today, no studies have been reported regarding nutritional knowledge among populations of Bihar. Hence this study was conducted in this part of India, to assess the knowledge and awareness of married people towards nutrition.

## MATERIALS AND METHODS

In our study, a total of 2500 sample size was taken and a house-to-house survey was planned. House to house survey helped to minimize incomplete submission and clarification of the questionnaire was done on the spot if any difficulties were encountered. The questionnaire consisted of four parts: first part collected the demographic details, second part were related to their diet, third part was related to lifestyle and oral hygiene and the fourth part consisted of nutritional knowledge. All questions were converted from English to local language (Hindi) so that people could understand it easily. The questionnaires were given to the subjects and were collected after the subjects filled it completely. The study was approved by ethical committee of the institute. Data was entered in the Microsoft excel spread sheet and the collected data were subsequently processed and analysed using SPSS statistical package version 22.

## RESULTS

In our study, out of 2500 subjects, 1531 populations were females and 969 subjects were males. In female subjects, 1014 (66.2%) were married, 502 (32.8%) were single and 15 (1.0%) were divorced. Likewise in male subjects, 610 (63%) were married, 344 (35.5%) were single and 15 (1.5 %) were divorced [Graph 1]. Maximum social status subjects (1049) belonged to the age group of 18-27 years followed by 591 subjects who were present in 28-37 years age group. 289 subjects belonged to the age group of 38-47 years. Minimum 265 subjects belonged to the age group of 48-57 years. 732 subjects who were single were of age group 18-27 years. 497 (84.1%) married subjects were of age group 28-37 years. Among divorced social status, 15 subjects were of age group 58 years and above [Table 1]

A one-way ANOVA was conducted to determine if the nutrition scores differed significantly across marital status. The results indicated a statistically significant difference between the groups, $F= 146.610$, $p < 0.001$. The mean nutrition scores varied from a high of $4.98 \pm 1.66$ in subjects who were single to a low of $3.89 \pm 1.44$ in subjects who were married. In divorced subjects, mean nutrition score was $4.67 \pm 1.49$. These results showed that marital status has a significant impact on nutritional scores [Table 2].

## DISCUSSION

Currently, the world faces a triple burden of malnutrition characterized by under-nutrition (stunted growth), overweight and micronutrient deficiencies simultaneously in an individual. The best early childhood development initiatives integrated with family support, health, nutrition or educational systems and services, have a longer lifespan, are of the highest quality, and are primarily focused on younger and less fortunate children. Due to substantial chunk of its population living in rural areas or they migrate either to bigger cities like Patna for job or other states where proper meal and food insecurity are common, Bihar has particular nutritional issues.

Malnutrition is determined by various economic and social factors. Many existing studies analyze links between marriage customs and in

gender inequality terms of various economic and social dimensions, including education outcomes, employment, wages, and access to productive resources, pensions, and government transfers. However, relatively few studies look at links between marriage customs and nutritional status. In our study, it was found that nutrition scores varied from a high of 4.98 ± 1.66 in subjects who were single to a low of 3.89 ± 1.44 in subjects who were married. In divorced subjects, mean nutrition score was 4.67 ± 1.49. This was not in accordance with the study conducted by Cakiroglu FP [5]. In his study, nutritional knowledge score for Iranian woman was 28.75 ± 5.83 and Turkish woman was 24.98 ± 6.15. these findings were much higher than the result of our study which may be due to they gained their nutrition knowledge either from correct sources like nutrition books and doctors. The reason of low nutrition knowledge in our study may be due to socioeconomic status which was not the same in all married couples which in turn is an important factor in having nutritious food as a regular dietary behaviour among our study subjects.

## CONCLUSION

Social and behaviour change communication interventions that encourage equitable treatment and healthier dietary practices for both males and females, particularly within families and schools, can play a significant role in improving nutritional outcomes. As societies undergo modernization, gender roles often become more egalitarian, reducing the negative impact of discriminatory cultural practices on women's wellbeing. Supportive policies, including greater access to childcare services and flexible work arrangements, can enhance women's wellbeing and economic participation across diverse cultural contexts, regardless of ethnicity-based marriage traditions. Future research and nutrition policies should pay greater attention to the influence of cultural factors and marriage customs in shaping nutritional outcomes.

**GRAPH 1: GRAPH SHOWS AGEWISE DISTRIBUTION OF SUBJECTS AMONG SOCIAL STATUS GROUPS**

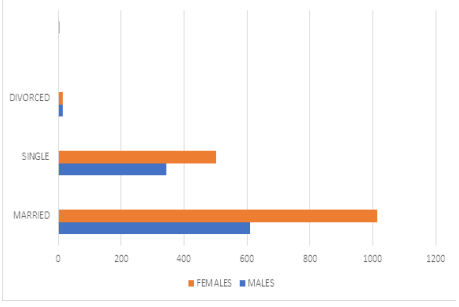


**TABLE 1: TABLE SHOWS AGEWISE DISTRIBUTION OF SUBJECTS AMONG SOCIAL STATUS GROUPS.**

| | | | SOCIAL STATUS | | | Total |
|---|---|---|---|---|---|---|
| | | | Married | Single | Divorced | |
| Age | 18-27 years | Count | 317 | 732 | 0 | 1049 |
| | | % within Age | 30.2% | 69.8% | 0.0% | 100.0 % |
| | 28-37 years | Count | 497 | 94 | 0 | 591 |
| | | % within Age | 84.1% | 15.9% | 0.0% | 100.0 % |
| | 38-47 years | Count | 275 | 5 | 7 | 287 |
| | | % within Age | 95.8% | 1.7% | 2.4% | 100.0 % |
| | 48-57 years | Count | 249 | 8 | 8 | 265 |
| | | % within Age | 94.0% | 3.0% | 3.0% | 100.0 % |
| | 58 years & above | Count | 286 | 7 | 15 | 308 |
| | | % within Age | 92.9% | 2.3% | 4.9% | 100.0 % |
| Total | Count | | 1624 | 846 | 30 | 2500 | |
| | % within Age | | 65.0% | 33.8% | 1.2% | 100.0% | |

**TABLE 2: TABLE SHOWS NUTRITION KNOWLEDGE SCORE AMONG SOCIAL STATUS**

| SOCIAL STATUS | NUMBERS | MEAN | STD. |
|---|---|---|---|
| MARRIED | 1624 | 3.8855 | 1.44027 |
| SINGLE | 846 | 4.9846 | 1.66154 |
| DIVORCED | 30 | 4.6667 | 1.49328 |
| TOTAL | 2500 | 4.2668 | 1.60544 |

## REFERENCES

1. Elmira ES, Chichaibelu BB, Qaim M. Marriage customs and nutritional status of men and women. Food Policy 2024;128:102734.
2. Fatima SB, Bano R, Alshammari E, Salamah N. A Study on the Impact of Nutritional Education Program in The University of Hail. Int J Health Sci Res 2013;3(9):56-64.
3. Cakiroglu FP, Vashfam RS. Nutritional knowledge levels of married women living in turkey and Iran: A cross-cultural comparison. Pak J Soc Sci. 2007;4(4):565-71.
4. Turner [-[33203MD, Teague M, Ayantunde A. Eating groups within households: Differentiation in food consumption by age, gender, and genealogical position in rural Burkina Faso. Food Policy 2021;101:102093.
5. Cakiroglu FP, Vashfam RS. Nutritional knowledge levels of married women living in turkey and Iran: A cross-cultural comparison. Pak J Soc Sci. 2007;4(4):565-71.