



NUTRITIONAL DEFICIENCIES AND MENTAL HEALTH: A COMPARATIVE STUDY OF VILLAGE AND CITY POPULATIONS

Psychology

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ABSTRACT

Nutrition supports physical functioning and psychological well-being. This proposed study examines the association between dietary habits and self-reported mental health indicators among village and city residents, comparing homemakers with working professionals. A quantitative descriptive design will use an online structured questionnaire with 52 adults selected through convenience sampling. Items will cover demographics, meal patterns, food-group intake, deficiency-related physical symptoms, stress or anxiety, and sleep problems. Frequencies, percentages, and group-wise comparisons will be used to summarize responses. The study may help identify dietary patterns associated with poorer perceived well-being and inform nutrition-awareness initiatives. Because the design relies on self-report and does not include laboratory testing, it cannot confirm clinical nutritional deficiencies or establish causation.

KEYWORDS

Nutritional Deficiency; Mental Health; Dietary Habits; Rural–urban Comparison; Homemakers; Working Professionals.

INTRODUCTION

A balanced diet provides energy and nutrients required for normal body functioning and processes involved in brain and emotional health. Inadequate dietary quantity or variety may coincide with physical symptoms such as fatigue, dizziness, and headaches, alongside reported stress, anxiety, or sleep difficulties. These symptoms can have many causes, so dietary patterns and symptoms should be interpreted as indicators for investigation rather than proof of a nutrient deficiency.

Food access, daily routines, awareness, and economic circumstances may differ between village and city settings. Homemakers and working professionals may also experience different schedules and constraints that shape meal regularity and food choices. This study proposes to examine these differences within one comparative framework.

Objectives and Research Questions

The objectives are to describe dietary habits among village and city participants; examine the association between dietary patterns and self-reported mental health indicators; compare homemakers with working professionals; and identify commonly reported physical and psychological symptoms. The central questions are whether dietary habits differ by residence and occupation, and whether indicators suggestive of nutritional inadequacy are associated with stress or anxiety, sleep problems, and tiredness.

Methodology

The proposed research uses a quantitative descriptive design. The sample will include 52 adults aged 18 years or above, recruited through convenience sampling from village and city areas. Participants will include homemakers and working professionals, including private-sector, government, and self-employed categories. Data will be gathered anonymously through an online structured questionnaire. The questionnaire will collect demographic information; meals per day and meal skipping; fruit, vegetable, and protein-rich food intake; and frequency of junk-food consumption. It will also ask about physical indicators such as fatigue, dizziness, headaches, and hair fall, and mental health indicators such as stress or anxiety and sleep problems. Analysis will use frequencies and percentages, followed by descriptive comparisons between village and city participants and between homemakers and working professionals. Participation will be voluntary. Limitations include the small sample, possible recall and response bias, and the absence of clinical assessment or laboratory confirmation.

Expected Findings and Significance

The synopsis anticipates that irregular meals, meal skipping, and lower intake of nutrient-dense foods may be associated with more frequent reports of fatigue, stress or anxiety, and sleep problems. It also expects that food availability and variety, time constraints, work schedules, and awareness may help explain differences across residence and occupation groups. These are expectations to be tested; they are not established results. Findings may guide future research and support

practical nutrition-awareness and preventive-health initiatives in both village and city communities.

CONCLUSION

This proposed comparative study focuses on how everyday dietary practices relate to self-reported psychological well-being among village and city residents, particularly homemakers and working professionals. Its descriptive findings may identify patterns worth exploring in larger studies. Since symptoms alone cannot diagnose nutritional deficiencies and the design is non-experimental, conclusions should describe associations rather than causal effects. Future research could use larger, more representative samples and validated mental-health measures alongside clinical or laboratory assessment of nutritional status.

REFERENCES

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