

Fast Food Habits of People Living In Ludhiana

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Abstract:

Food is a major component for survival- be it man or animals. It is necessary that we eat a healthy and balanced diet to lead a healthy life style. Fast food has become fashion of the day. This paper highlights the fast food habits of people living in Ludhiana. It also focuses on the people who are consuming fast food. It also gives views on the changes in the food habits over a period of time. Food provides with the essential energy for the functioning of the body and acts as nutrition. Most people are looking for ready to eat, a magic pill, or the latest popular diet.

Introduction:

The basic necessities of life are clothing, food and shelter. Food is a major component for survival – be it man or animals. It is necessary that we eat a healthy and balanced diet to lead a healthy life style. People across the globe have different eating habits Concisely, food habit refers to the way in which different people select , cook, serve and eat food that are available to them. Eating habits depend on resources available and tradition of a region. The food habits of the Chinese vary from that of the Indians though we belong to a common continent. There is a staple diet that has been followed meticulously since generations in India. It is a developing world today and it's a general tendency of people to get easily acquainted with luxury and laziness. This is where the concept of fast food restaurants figures. In a country like India where the cost of living is increasing every day, it becomes a necessity for both the couple to look out for job. In such a scenario, getting back home and cooking the staple food becomes a cumbersome process. This is where fast food restaurants have been helpful in reducing work. These days, children are found in Dominos and Pizza huts' with wallet in their hands enjoying their weekends. Gone are the days when mothers used to prepare feast on festivals. Today's feast lies in pizzas and burgers. Fast food restaurants which have spread like an epidemic is creating epidemics like obesity and related problems. There are a handful of people who have the correct body mass index. The result – clinics which will help you reduce ten kilograms in ten days for only five thousand rupees. It is an awesome business which will never run out of customers. Fast food has become fashion of the day. Issues with food, weight and body images are not easy to talk about. Most people are looking for ready to eat, a magic pill, or the latest popular diet. But the reality is that there are no magic secrets or quick tips when it comes to managing your eating habits and maintaining a healthy weight. Healthy eating is really a very simple concept. Food is the basic requirement of the life. It can be considered as the most required thing for the life. Food provides with the essential energy for the functioning of the body and acts as nutrition.

Normal eating habits

The meal should consist of all possible six tasted elements of the food. It should also contain the food of various types like solid, semisolid and liquid. It should neither be very hot and spicy nor should be very sweet. No single taste should be extra in amount more often. It should never be heated again and again and should be eaten fresh. It is also required to take the meal in the form of supper, lunch and dinner at proper timings. It is recommended that the food should be consumed at every four hours so that adequate amount of strength is received by the body and the stomach should never be empty to be filled with gases.

Effects of adverse food habits

Food eaten less than the adequate amount do not provide the body with strength, nutrition and energy and it can cause some diseases in the body as well. Food eaten more than the adequate amount makes it difficult for the digestive fire to digest it and can cause some serious disorders related with digestive system of the body.

The following rules may be helpful in planning the menu:

- The whole day, or better still, the whole week, should be regarded as the unit rather than each individual meal. Any deficiencies in one meal can be made up in the others.
- The same food should not be served more than once in the same day without varying the form in which they are served. This does not apply to such staple food as milk, butter etc.
- The color, form and texture of different courses should be varied as much as possible to avoid monotony. A soft food should be alternated with a crisp food that needs chewing; a bland food with a high seasoned one; cooked food with raw food and so on.
- No meal should contain too great a concentration of any one type of nutrient, i.e., no meal should be predominantly protein and fat should be accompanied by carbohydrate at the same meal.
- Serve the milk, dry fruits, cheese etc. in small quantities at each meal rather than concentrate them in one meal. In this way the body makes better use of their building material, particularly if accompanied by vegetable or cereal protein, e.g., pulses and oatmeal.

Decide upon the protein ingredients of the meal first; Next consider the protective materials such as the dairy foods, fruits and vegetables, and finally, supply energy food such as bread, cereals, fats and sugar to satisfy appetite.

Economy in diet

True economy in diet means the provision of necessary nutrients in adequate amounts at the lowest price, without, however, making the diet monotonous and unappetising. No matter how cheap it may be, no diet is really economical which does not supply the necessary calories, protein, minerals and

vitamins. On the other hand the fact that a large amount of money is being spent on food does not necessarily guarantee a sound diet. The cheapest sources of animal proteins are cheese and milk. The cheapest source of energy is bread and vegetables. Such a combination would also supply calcium, phosphorous, vitamin A and, if the bread be made from fortified flour, some iron and B vitamins. It would be lacking in vitamins C which could be more cheaply provided by cabbage and vitamin D which could be cheaply provided by a teaspoonful of cod liver oil. Meat and fish are more expensive body building foods than cheese and milk which provide valuable calcium, phosphorous and vitamin A and energy in addition to animal proteins. Milk is relatively good & not so expensive food but is indispensable on account of its body building and protective materials. Dry fruits are excellent foods but the same proteins, calcium, phosphorous, iodine, vitamin A and D can be more cheaply provided by milk. . Eggs, in spite of their calcium, phosphorous, iron, vitamin A and D are unfortunately, dear sources of proteins and calories.

Moods may affect your eating habits.

How you feel when eating could affect your eating habits. Boredom, nervousness, and loneliness can all cause eating binges. Sometimes other activities, such as watching TV or a movie, working or reading, may be activities you associate with eating without being conscious of it. By examining your food diary, you'll learn a great deal about your eating habits. Perhaps you'll find you eat large amounts when bored, depressed, or frustrated. You may find a lot of your eating is just routine—as in joining your children for cookies and juice when they come home from school. Learning your habits through your food diary will help you make changes that can lead to your weight loss goals.

Size of calories consumption

Size of calories consumption has increased over a period of time. The pictures given below show the huge difference between quantities of food in 1990 and 2010. Food is made more delicious by adding more creams, butter, souces, etc. but eventually it only affects the health of people.

Good food habits for young people

Improving a person's eating habits and ensuring that they drink adequate fluids can markedly increase energy levels and overall wellbeing. Often young people complain of being tired and run down, which they may attribute to lack of sleep or other lifestyle habits. Eating well is often overlooked, and young people will often turn to caffeine and a quick sugar fix to get them through the day, instead of eating well. Good eating does not necessarily mean sitting down at a table three times a day to a formal meal, which is often incompatible with young people's lifestyles.

Life style changes of Indian families & its impact on Health:

Demographic & Socioeconomic changes influence the living & working habits of populations. Economic growth, modernization, urbanization & socialization have changed the life style of Indian families. The transition from a traditional to modern lifestyle, consumption of diets rich in fat and calories combined with a high level of

mental stress has compounded the problem further. With a shift in eating habits & the adoption of a sedentary life style has lead to the increasing prevalence of life style diseases like Obesity, Diabetes, Hypertension, Coronary heart disease, Metabolic syndrome and Cancer, all across India in the last few decades. Apart from that India is facing economic burden also. WHO estimates that mortality from diabetes, heart disease and stroke costs about \$210 billion in India in the year 2005. Much of the heart disease and stroke in these estimates was linked to diabetes. WHO estimates that diabetes, heart disease and stroke together will cost about \$ 333.6 billion over the next 10 years in India alone.

- Prevalence of diabetes in India : It was reported to be 5.2% in 1984, 11.6 % in 1995 and had gone up to 13.9% in 2000
- Recent data suggest a significant load of diabetes cases in India, rising from 2.0 crore in 2000 to 4.6 crore by 2015.
- Prevalence of hypertension: It was 4% in 1954, 11% in 1984 and went up to 25%in 1994 in Urban area and 10% in rural area.
- Prevalence of obesity: In a study from south India it was 27.2% in urban area and 2 % in rural area in 1989, went up to 30% in 2000 in urban and 17% in rural population. Similarly in Delhi female population it was 34.4% in 1994 went up to 48.6 in the year 1999. Even childhood obesity is on the rise in India, according to Asia Pacific J of Clinical Nutrition it was reported to be 12.4% in boys and 9.9% in girls between the age group of 9-15 yrs.
- Prevalence of coronary heart disease: It is also on the rise, study by Dr. K.K. Sethi in 2002, it was 4% in 1960, 6.5% in 1968 and went up to 11% in 2001 in urban population of India. There is alarming projection from World Health Organization that sedentary lifestyle could very well be among the 10 leading causes of death and disability in the world and by the year 2020, seven million Indians will die of life style diseases.

Changing Scenario

1950s-1960s people used to ate at home 2-3 times/day and because of rapid transformation in the lifestyle of Indians, particularly those living in urban India, has resulted in dramatic increase in the demand for processed food. The main reason why processed food is luring the urban Indians is the convenience that it offers to cooking, as they don't need to spend hours in kitchen to get that appetizing food. Growth in working women's population and prevalence of nuclear families with double income are other trends causing this change in the lifestyle of Indians. Also, increase in overseas travel and the presence of foreign media in the country has resulted in more Indians opting for processed food. For instance, in 2005, above 5 million Indians had traveled abroad and the number is likely to rise by 15% to 20% every year. These trends have largely impacted the Indian food-processing sector, as there's been a jump in the demand for processed, ready-to-eat and ready-to-cook food. Amount of money spent by Indian on foods outside home has been assessed to have more than doubled over the last ten years to nearly \$5Billion a year. Also, it's likely to double in the five years to come.

Review of Literature

The purpose of this section is to review the theories and concepts that help to find the base of this study. The studies mainly focus on reasons and effects of Change in Food Habits. To have in depth knowledge, previous and past relevant studies have been quoted as below:

Moore I.H. (1941) prepared a report on change in food habits to improve economic, social and health standards to teach fundamentals of good nutritional practices with economic means. He concluded that there is urgent need for widespread use of use of similar programs in rural areas. Success of such programmes depends fundamentally upon effectiveness of techniques. **Alwang, Jeffrey (1991)** asserted that the explicit goals of the study was to produce a flexible model to determine the optimal stock of grains and to provide policymakers with a tool to evaluate stock levels on a real-time basis; to develop a system to intervene in local food markets using prices rather than quantities as the targeting mechanism; and to provide a detailed study of the effects of the various PFDS programs on the consumption and nutrition of the rural poor. **Katherine L. Clancy(2000)** observed that the eating habits and nutrient intakes of elderly people are affected by many environmental factors. In this study, responses to television advertisements and social participation were inspected for their relationships to adequacy of nutrient intake and food patterns. The relationships found suggest that the diets of elderly persons are better among the more social and that those who watch more television tend to eat more. **Bay An Ahmed Obeidat,(2002)** investigated dietary patterns of Arab students living in the U.S. A. Changes in dietary patterns among different immigrant groups have been reported. However, limited research data on dietary habits of Arabs living in the United States are available. **Bjarne K. Jacobsen and Dag S. Thelle, Oslo (2004)** explored associations between food habits and body mass index (BMI) (kg/m²) in a cross-sectional study with 7410 men and 7257 women. High BMI was most strongly associated with low bread consumption and use of low-fat milk. Weaker positive associations were seen for coffee, fish and ground meat consumption, and with use of table fat with a low P/S-ratio. **American Society for Microbiology (2008)** conducted the research to see whether there are any gender differences. It was found that, men were significantly more likely to eat meat and poultry products; on the other hand, women like to eat vegetables, fruits like carrots, tomatoes, strawberries, apples. They also prefer dry fruit such as almonds, walnuts and more likely consume eggs and yoghurt than men. It was also looked because if there is a difference, then this information can be used by health educators to target interventions.

Objectives:

The objectives of this study are as following:

- a. To examine the food habits of people living in Ludhiana.
- b. To find whether the people are consuming healthy food.
- c. To know about the change in food habits over period of time.

Hypotheses of study:

The research on food habits assumes various hypotheses. For hypothesis testing null hypothesis is assumed to be:

- a. There is no relationship between people’s occupation and their habit of taking meal in time.
- b. There is no significant relationship between religion and vegetarianism.

Sample design:

- a. Sample units: The sample size is an important feature of any empirical study in which the goal is to make about a units of sampling. So in this project the sample units are 60 persons. Further this is divided into 4 sections: Businessmen, Servicemen, Housewives and Students. Ludhiana city is included in the sample size because of easy accessibility. It includes both males and females.
- b. Sampling technique: convenient sampling technique has been followed to choose samples. The samples vary according to their occupation. Questionnaires were distributed to Business Class, Service Class, Students and Housewives each.

Data Collection: Both primary as well as secondary sources of data have been used for the purpose of research project. The primary source includes questionnaires. The questionnaire was designed after pilot testing and supplied to 60 respondents for collecting the data and secondary source includes books, magazines, and journals and so on. Secondary Data includes all those books and journals from where information has been collected.

Analysis of Data: The data after collection has to be analyzed in accordance with the outline laid down for the purpose at any time of developing the research plan for analyzing the data. Different statistical techniques are used like Percentage and Weighted mean tables and Bar diagrams are used for presentation of data. Likert scale is used to analyze the data. In this, response is expressed in five degrees of agreement and disagreement i.e., Strongly Agree, Agree, Neutral, Disagree and Strongly Disagree. Each response is given numerical score, indicating its favorableness or unfavorableness and scores are totaled to measure respondent’s attitude and to check the accuracy chi test is applied further.

FINDINGS:

**TABLE-1
TAKE MEALS IN TIME**

Take meals on time	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	Weighted Mean
	1	2	3	4	5	
Business	0	1	2	9	3	3.93
Service	0	1	6	6	2	3.6
Students	0	3	2	7	3	3.67
Housewives	0	0	2	12	1	3.93

CHI-TEST

OBSERVED FREQUENCY	EXPECTED FREQUENCY	(O-E)	(O-E) ² /E
3.9	3.78	0.12	0.014/3.78
3.6	3.78	0.18	0.032/3.78
3.67	3.78	0.02	0.0004/3.78
3.93	3.78	0.12	0.014/3.78
15.13			0.01596

Degree of freedom= $(n-1) = (4-1) = 3$ For $V=3$, $\chi_{20.05}=7.815$.

Table 1 depicts that housewives and business class prefers to take meals in time as compared to students and service class. As table value is greater than calculated value, thus null hypothesis is accepted. It states that there is no relationship between occupation and taking meals on time.

**TABLE -2
NUMBER OF PERSONS WHO SKIP MEALS**

SKIP MEALS	BUSINESS		SERVICE		STUDENT		HOUSEWIFE		TOTAL
	NO.	%	NO.	%	NO.	%	NO.	%	
YES	6	40	8	53.33	7	46.67	5	33.33	26
NO	9	60	7	46.67	8	53.33	10	66.67	34
TOTAL	15	100	15	100	15	100	15	100	60

Table 2 shows that only 33.33% and 40% of housewives and business class often skip meals which are lower than 46.67% of students and 53.33% of service class.

**TABLE-3
THE REASON FOR SKIPPING THE MEALS**

TAKE MEALS ON TIME	BUSINESS		SERVICE		STUDENT		HOUSEWIFE		TOTAL
	NO.	%	NO.	%	NO.	%	NO.	%	
Diet conscious	1	16.67	2	25	3	42.86	2	40	8
Busy schedule	3	50	5	62.5	4	57.14	3	60	15
Any other	2	33.33	1	12.5	0	0	0	0	3
TOTAL	6	100	8	100	7	100	5	100	26

Table 3 asserts that 62.5% and 60% of service class and housewives skip their meals due to busy schedule as against 16.67% and 42.86% business class and students who skip meals as they are diet conscious.

TABLE-4
CATEGORIZATION ACCORDING TO BREAKFAST CHOICES

EAT IN BREAKFAST	BUSINESS		SERVICE		STUDENT		HOUSEWIFE		TOTAL
	NO.	%	NO.	%	NO.	%	NO.	%	
Pranthalas	11	73.34	13	86.67	8	53.34	12	80	44
Breadtoast/eggs	2	13.33	2	13.33	3	20	1	6.67	8
Cereals	0	0	0	0	2	13.33	1	6.67	3
Fruits milk	2	13.33	0	0	2	13.33	1	6.66	5
TOTAL	15	100	15	100	15	100	15	100	60

Table 4 indicates that 80% of housewives eat pranthalas in breakfast against only 13.33% of students preferring cereals and fruits/milk and only 13.33% of business and service class eat breadtoast/eggs as compared to 20% of students.

TABLE-5
FREQUENCY OF CONSUMING MILK

MILK CONSUMED	BUSINESS		SERVICE		STUDENT		HOUSEWIFE		TOTAL
	NO.	%	NO.	%	NO.	%	NO.	%	
Once daily	7	46.67	8	53.33	5	33.33	7	46.67	27
2 times a day	5	33.33	3	20	7	46.67	2	13.33	17
3-4 times a week	0	0	0	0	1	6.67	2	13.33	3
Occasionally	3	20	4	26.67	2	13.33	3	20	12
Never	0	0	0	0	0	0	1	6.67	1
TOTAL	15	100	15	100	15	100	15	100	60

Table-5 shows that out of 15 students only 33.3% students take milk daily while 26.67% service class take milk occasionally and 6.67% housewives never take milk.

TABLE-6
TYPE OF MILK PREFERRED

TYPE OF MILK CONSUMED	BUSINESS		SERVICE		STUDENT		HOUSEWIFE		TOTAL
	NO.	%	NO.	%	NO	%	NO.	%	
Skimmed	5	33.33	3	20	4	26.67	7	46.67	17
Full fat	9	60	10	66.67	10	66.67	5	33.33	34
Soya	1	6.67	1	6.67	0	0	2	13.33	4
Any other	0	0	1	6.67	1	6.67	1	6.67	3
TOTAL	15	100	15	100	15	100	15	100	60

Table-6 states that 60% business class prefers full fat milk as compared to only 33.33% of housewives and 6.67% service class prefers soya or any other milk.

TABLE-7
FRUIT EATING HABITS

EAT FRUITS DAILY	BUSINESS		SERVICE		STUDENT		HOUSEWIFE		TOTAL
	NO.	%	NO.	%	NO	%	NO.	%	
YES	8	53.33	2	13.33	6	40	5	33.33	21
NO	7	46.67	13	86.67	9	60	10	66.67	39
TOTAL	15	100	15	100	15	100	15	100	60

Table 7 indicates that 53.3% business class eat fruits daily as compared to 86.67% service class who does not prefer to eat fruits daily and only 5% housewives eat fruits daily as against 40% of students.

TABLE-8
PREFERENCE OF NON-VEGETARIAN FOOD

VEGETARIAN	BUSINESS		SERVICE		STUDENT		HOUSEWIFE		TOTAL
	NO.	%	NO.	%	NO	%	NO.	%	
YES	4	26.67	6	40	5	33.33	11	73.33	26
NO	11	73.33	9	60	10	66.67	4	26.67	34
TOTAL	15	100	15	100	15	100	15	100	60

Table 8 shows that majority of business; service class and students are Non-Vegetarians with 73.33%, 60% and 66.67% as against housewives who are only 26.67%

TABLE-9
RELATIONSHIP BETWEEN RELIGION AND VEGETARIANISM

Religion affects vegetarianism	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	Weighted Mean
	1	2	3	4	5	
YES	1	5	4	9	7	3.61
NO	2	14	5	13	0	2.85

CHI TEST

OBSERVED FREQUENCY	EXPECTED FREQUENCY	(O-E)	(O-E) ²	(O-E) ² /E
3.61	3.23	0.38	0.144	0.0447
2.85	3.23	0.38	0.144	0.0447
6.46				0.894

Degree of freedom= $(n-1) = (2-1) = 1$ For $V=1$, $\chi_{20.05} = 3.841$

Table 9 depicts respondents who are vegetarians agree that religion affects vegetarianism while the one who are non vegetarians does not agree with this. Here calculated value is less than table value so our (Ho) is accepted which means that there is vegetarianism is not affected by religion.

TABLE-10
MAIN MEAL PREFERRED

MAIN MEAL	BUSINESS		SERVICE		STUDENT		HOUSEWIFE		TOTAL
	NO.	%	NO.	%	NO.	%	NO.	%	
VEGETABLES/ CHAPPATI	13	86.67	13	86.67	12	80	14	93.33	52
CHICKEN / FISH	2	13.33	1	6.67	1	6.67	1	6.67	513
ANY OTHER	0	0	1	6.67	2	13.33	0	0	3
TOTAL	15	100	15	100	15	100	15	100	60

Table 10 depicts that 86.67% business class and service class eat chappati/vegetables as a main meal while 13.33% students prefer others which includes rice or junk food and 6.67% housewives eat chicken/fish as a main meal.

TABLE-22
AWARENESS ABOUT FOOD PYRAMID

AWARENESS ABOUT FOOD PYRAMID	BUSINESS		SERVICE		STUDENT		HOUSEWIFE		TOTAL
	NO.	%	NO.	%	NO	%	NO.	%	
VERY WELL	1	6.67	1	6.67	4	26.67	2	13.33	8
NOT WELL	11	73.33	7	46.67	5	33.33	9	60	32
NEVER HEARD OF IT	3	20	7	46.67	6	40	4	26.67	20
TOTAL	15	100	15	100	15	100	15	100	60

According to Table 22, 73.33% business class is not well aware whereas 26.67% student's and 13.33% housewives are very well aware and 6.67% of service class never heard of it.

TABLE-23
CHANGE IN FAST FOOD EATING IN LAST FIVE YEARS

CONSUMPTION AS COMPARED TO LAST 5 YEARS	BUSINESS		SERVICE		STUDENT		HOUSEWIFE		TOTAL
	NO.	%	NO.	%	NO	%	NO.	%	
MORE	3	20	2	13.33	7	46.67	3	20	15
SAME	3	20	7	46.67	4	26.67	1	6.67	15
LESS	9	60	6	40	4	26.67	11	73.33	30
TOTAL	15	100	15	100	15	100	15	100	60

Table 23 data asserts that 60% business class and 73.33% housewives are consuming less fast food as compared to last 5 years while 13.33% service class is consuming more. On the other hand 26.67% students are at same level.

Conclusion and Suggestions:

It can be concluded that it is necessary that we eat a healthy and balanced diet to lead a healthy life style. Fast food has become fashion of the day but we will not ignore ourselves life and health issues. Keeping the conclusions in mind, author would like to suggest some points on this study.

- 1) Adequate amount of fruits and milk should be consumed regularly.
- 2) Proper knowledge about balanced diet and food pyramid should be provided.
- 3) Awareness about changing food habits and its effect should be created among large number of people.
- 4) Cheap food should be avoided as it may not be of good quality.

- 5) Consumption of Junk food rich in calories should be minimum.
- 6) Meals should not be skipped and junk food should not be preferred much.

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