A Comparative Study of Rural and Urban Area’s Persons on the Basis of Lifestyle
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INTRODUCTION
Lifestyle is the way a person lives. A lifestyle typically reflects an individual's attitudes, values or world view. An individual's health depends a lot on their lifestyle. Maintaining physical and mental health are crucial to an individual's longevity. The more time spent on hygiene, physical fitness, and diet regulation, the healthier lifestyle they have. Disease that are caused partly by unhealthy behaviour and partly by other factors called lifestyle disease like diabetes, hypertension. According to latest health survey, (August 2012) in Rajasthan, 277 among 1 lakh were diagnosed with hypertension. In urban Rajasthan, the figure is 541 among 1 lakh, but in rural Rajasthan 190 among 1 lakh people were diagnosed with the disease.

Statement of the problem
A comparative study of rural and urban area on the basis of lifestyle.

Objective
- Reduce the risk of clinical cardiovascular disease (CVD).
- Prevent heart disease through lifestyle management.
- Encourage all patients to adopt a healthy lifestyle will help to lower their risk of CVD.
- Self-assessment of lifestyle will help you determine areas which you may need change to promote optimal health.
- To promote intervention to reduce the main shared modifiable risk factor like tobacco use, unhealthy diets, physical inactivity and harmful use of alcohol.

Hypothesis
Null Hypothesis 1
There is no significant difference between diet pattern of the rural and urban area.

Null Hypothesis 2
There is no significant difference between physical activity of the rural and urban area.

Research approach
Survey method used for the study.

Research design
The tools consist of two parts i.e. Diet assessment questionnaire, Physical activity assessment questionnaire. Both are self-made.

Setting of study
The study was conducted in rural area namely Nathawali and urban area namely Sriganganagar of Rajasthan.

Sample size
The sample consisted of 60 persons (35-60 years); 30 persons from rural area and 30 persons from urban area.

Sampling technique
Random sampling was used for this study.

Data analysis
In this study, t-value was used for comparison of rural and urban area data.

Analysis of study
Table 1
Comparison of diet pattern in rural and urban area (N=30)

<table>
<thead>
<tr>
<th>S.no</th>
<th>Group</th>
<th>M</th>
<th>SD</th>
<th>t-value</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Rural</td>
<td>7.5</td>
<td>2.25</td>
<td>1.45*</td>
</tr>
<tr>
<td>2</td>
<td>Urban</td>
<td>6.7</td>
<td>2.16</td>
<td></td>
</tr>
</tbody>
</table>

*Significant at 0.05 level at df 29

Table 2
Comparison of physical activity in rural and urban area (N=30)

<table>
<thead>
<tr>
<th>S.No</th>
<th>Group</th>
<th>M</th>
<th>SD</th>
<th>t-value</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Rural</td>
<td>4.96</td>
<td>0.38</td>
<td>4.02*</td>
</tr>
<tr>
<td>2</td>
<td>Urban</td>
<td>3.43</td>
<td>1.42</td>
<td></td>
</tr>
</tbody>
</table>

RESULT
Table 1 shows mean and standard deviation of rural area 7.5, 2.25 and urban area having
6.7, 2.16 respectively, t-value is 1.45. Thus Null hypothesis 1 is accepted. Table 2 shows mean and standard deviation of rural area 4.96, 0.38 and urban area having 3.43, 1.42 respectively, t-value is 4.02. Thus Null hypothesis 2 is rejected.

CONCLUSION
The diet pattern of rural and urban area are similar because of The basic thinking has not changed in rural areas but the outward manifestations of change in lifestyle are visible there like in food habits and style of living. The physical activity of rural and urban area are different, more physical activity found in rural area in comparison to urban area because most of the persons exist in rural area are farmer or labour class.

Limitations
- This study done as a comparative study between the urban and rural populations, on the basis of lifestyle. In this study two parts of lifestyle are taken one is diet pattern and second is physical activity.
- This study limited on Sri ganganagar District.
- This study conducted among males (35-60 years).

REFERENCES