



A Study of Nutritional Status of Children of Sagar City (M.p.)

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The Child must know that he is a miracle that since the beginning of the world there hasn't been, and until the end of the world there will not be another child like him.

The building up of a nation depends on building men and women and the process of building men and women depends very considerably on what is done to children.

Children below nine year of age constitute a little over one fourth (26.7%) of our total population. They undoubtedly are the most crucial segment of our population, due not only to their sheer numbers, but also because during their formative year's foundations are laid for adult life.

School going children are the important segment of our society, their growth, development and body weight is of almost significance and presents general health status of a community and nation as a whole. Body weight depends on energy balance, intake depends not only on food availability but on a number of complex interrelationship that include stimulus of good food, the role of hunger pleasure and habit of eating. A gain or loss of energy would respectively increase or decrease body weight. Nutrition has a direct impact on health.

GROWTH AND DEVELOPMENT IN SCHOOL YEARS

The period between infancy and adolescence, encompasses great diversity in size, age, growth rates and development skill. Growth patterns are highly individual erratic at times, with spurts in height and weight followed by periods of little or no growth. The age of 6 to 10 years in girls and 6 to 12 year in boys are often referred to as the "latent growth period", a period during which growth is slow and steady preceding the prepubertal growth spurt.

Nutritional status is an important determinant of growth (Atinmo, 1983) defined it as the extent to which the customary diet of any population group has been able to meet their nutritional requirement.

Assessment of nutritional status of community is one of the first steps in the formulation of any public health strategy to combat malnutrition.

A number of studies have been conducted to assess the nutritional status of young children from urban slums (Ray et al. 1990, /Busi et al., 1991, Dwivedi et al. 1992 Awasthe Pandey, 1997).

OBJECTIVES:

Nutritional status is influenced by food intake quantity, quality; physical health, education and awareness of parents' etc. Current nutritional status will decide the well being of the present and future generations.

The present study is undertaken with a view to study the nutritional status of children aged 7 to 12 years of Sagar (M.P.) and to study the level of mother's awareness towards nutritional indicator.

METHODOLOGY-

In social survey generally two most important tools are used i.e. Schedule and questionnaire, schedule is one of the tools which is popularly used with profitable results.

In the present study, schedule used is, judged by the number of experts five doctors, five professors and ten parents had agreed and expressed the opinion that the schedules are valid. In present study, A general

information proforma and anthropometric clinical assessment proforma are used. Health and cultural believe related awareness schedule is also used.

HYPOTHESIS —

On the basis of objectives, the following hypothesis has been formulated:-

1. There is no co-relation between nutritional awareness level and education of mother and health status of children.
2. Prevalence of under nutrition will be higher in girls than their boy's counterparts.

LOCATE OF THE STUDY-

The present study was carried out in Sagar in the state of Madhya Pradesh.

The six schools were selected. The total respondents selected were 200 including 104 boys and 96 girls of age group 7 to 12 years. Respondents were belonging to different cultures (Hindu, Muslims, Backward class and Sc/St) and socioeconomic class. Respondents were randomly selected.

OBSERVATION-

Research is a process of collecting analyzing and interpreting information to answer a question. The observation and interpretation of data is as follows: **Table: - 1 Literacy status of mothers**

S. No.	Literacy status	No.	%
1	Illiterate	40	20
2	Primary	56	28
3	Middle	33	16.5
4	Higher Sec.	47	23.5
5	Graduate	18	9
6	Post Graduate	06	3
	total	200	100

Mother is the key person of kitchen. So literacy status of mother is our important factor. Table- 1 reveals that 20 percent mothers were illiterate and only 3% mothers were post graduate.

Table – 2 Prevalence of stunting, wasting and under weight according to maternal education status:

Mother Education	No	stunted	wasted	Under weight
Illiterate	40	23	10	25
Primary	56	16	08	20
Middle	33	14	05	13
Higher Sec.	47	09	02	06
Graduate	18	03	02	05
Post G.	06	01	01	02
total	200	66	28	71

P	df	X ²	S/NO
0.01	10	25.190	S

Table No. 2 Shows that the highest prevalence of stunting (23) was observed among whose mothers were illiterate and educated up to primary level, while the longest prevalence (03) and (01) were seen in children whose mothers were graduate and post graduate.

Chi square value obtained was 25.1901, which was found significant at

0.01 level of significance. This shows that the education level in mothers has direct influence the finding respects the hypothesis malnutrition status of children. Thus the finding rejects the hypothesis.

Table – 3 Nutritional status of the Boys under study

Age in year	Normal		Grade I Malnutrition		Grade II Malnutrition		Grade III Malnutrition		Total	
	No	%	No	%	No	%	No	%	No	%
7	4	2	8	4	3	1.5	-	-	15	7.5
8	3	1.5	7	3.5	5	2.5	2	1	17	8.5
9	2	1	11	5.5	4	2	1	0.5	18	9
10	5	2.5	6	3	6	3	1	0.5	18	9
11	2	1	7	3.5	7	3.5	3	1.5	19	9.5
12	4	2	10	5	3	1.5	-	-	17	8.5
Total	20	10	49	24.50	28	14	7	3.5	104	52

Table – Nutritional status of the Girls under study

Age in year	Normal		Grade I Malnutrition		Grade II Malnutrition		Grade III Malnutrition		Total	
	No	%	No	%	No	%	No	%	No	%
7	2	1	7	3.5	5	2.5	3	1.5	14	7
8	3	1.5	5	2.5	6	3	2	1	16	8
9	4	2	5	2.5	5	2.5	2	1	19	9.5
10	2	1	5	2.5	6	3	2	1	15	7.5
11	2	1	6	3	8	4	2	1	18	9
12	2	1	2	1	6	3	4	2	14	7
Total	15	7.5	30	15	36	18	15	7.5	96	48

Data in the table 3 shows that among sample of 104 male children, grade I malnutrition was prominent at the age of 9 to 12 years. The grade II and III malnutrition and were the highest at the age of eleven years.

Nutritional status of girls according to table – 4 shows that grade I malnutrition was again more prominent at the age of nine years. The

grade II malnutrition was highest at the age of 11 years. The grade III malnutrition was more noticeable at the age of 12 years. The normal nutritional status was found to be 10 percent in boys' ad 7.5 percent in girls. The comparative view and inference from these two tables reveals that female children were found to be more malnourished than male children. The above analysis can be attributed to the gender biased in Indian society in general and Sagar (M.P.) in particular. Thus the hypothesis that prevalence of under nutrition will be higher in girls than their boys counter parts is retained.

DISCUSSION –

Nutritional adequacy is one of the key determinants of the quality of human life. In the Indian sub continent, Female nutritional stress begins in childhood and continues through adolescence into adults. Attention to nutrition is therefore called for throughout the life cycle.

Nutritional status of children was very much influenced by knowledge of parents as well as home environment condition.

Educated mothers appeared to be the only meaningful solution for improving the nutritional status (Rao et. al. 2005).

There is one more study (Joshi, 2002) which supports finding that the mothers who were aware demonstrated satisfactory growth of infants and young children.

In present study girls were found to be more malnourished than boys.

The overall nutritional status of school going children of Sagar (M.P.) in not satisfactory thus effective measures should be undertaken to improve their nutritional status.

Health is cherished as a highly valued resource and a goal that every human being must for in order to perform his role effectively and efficiently in the society.

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