The Nutritional Level of Toddlers Residing in Urban Area and Rural Area of Tapi District

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ABSTRACT Healthy Children's are the Nations greatest resource. Investment in child Development is an investment in the future Nation. Healthy children are the greatest asset to the Nation and also the pride of the Nation. During the period from 12 to 18 month the growth rate slows resulting in a slight adjustment from the previous calories requirement1. The study was under taken to" A comparative study to assess the nutritional level of toddlers residing in urban area and rural area of tapi district of Gujarat state". A survey approach was suitable for the study. Research design was comparative survey research design. The study was conducted in Selected area of Vyara urban area and Valod & Rupwada rural area of Tapi district of Gujarat state. The target population toddlers of 1 to 3 year of Age. The sample of the study 120 toddlers. The investigator has adopted simple random sampling method for the selection of area and sample. The malnourishment gradation showed that in the urban area (28 %) of toddlers were malnourished were as in rural area (52%) of toddlers were malnourished. Malnutrition is due to lower socio-economical status and poor dietary pattern. From the above findings, it was concluded that nutritional level of the urban toddlers were higher than the rural toddlers and it was found that the variables like educational status of father, educational status of mother, number of sibling, dietary pattern of toddlers had positive effect on nutritional status of the toddlers.

1. INTRODUCTION

Healthy Children's are the Nations greatest resource. Investment in child Development is an investment in the future Nation. Healthy children are the greatest asset to the Nation and also the pride of the Nation.

Promotion of Health from the beginning of Human life is essential. Growth and Development are most outstanding characteristics of Toddlers well being. It also indicates the status of child's health.

Toddler is a common term for a young child who is learning to walk. The toddling stage is generally considered to be the stage of development between infancy and childhood. Toddling usually begins between age 12 and 24 months. Understanding toddlers is fundamental to successful child bearing, eating habits established in first 2 to 3 years of life tends to have lasting effects on subsequent years. During the period from 12 to 18 month the growth rate slows resulting in a slight adjustment from the previous calories requirement[1].

--Dorothy R. Marlow.

Gujarat is a state noted for reforms and good governance in almost every field of development but child malnutrition still persists and is a big challenge here. A child's entire life is determined in large measures by the food given to him during his first 5 years[2]. (WHO Report, 2012)

FACTORS INFLUENCING NUTRITIONAL STATUS:

✓ Social and Economic Conditions:
✓ Cultural Influences:
✓ Nutrition:

II STATEMENT OF THE PROBLEM

"A Comparative Study To Assess The Nutritional Level Of Toddlers Residing In Urban Area And Rural Area Of Tapi District Of Gujarat State."

OBJECTIVE OF THE STUDY

1. To assess the Nutritional level of toddlers residing in urban and rural area of Tapi district of Gujarat state.
2. To compare the nutritional level of toddler residing in urban and rural area of Tapi District.
3. To find an association between Nutritional level of Toddlers with their selected variable.

HYPOTHESIS

H1: The Nutritional level of toddles from urban area will be significantly higher than toddlers from rural area at 0.05 level of significance.

H2: There is significance association between nutritional level and selected demographic variables.

II. MATERIALS AND METHODS

Research Approach: A survey approach was considered most suitable for the study.

Research Design: Research design selected for the present study was comparative survey research design.

Setting of the Study: The study was conducted in Selected area of Vyara urban area and Valod & Rupwada rural area of Tapi district of Gujarat state.

Target Population: The target population consisted of toddlers of 1 to 3 year of Age.

Sample: The sample of the study comprised of 120 toddlers from selected urban and rural area of Tapi district of Gujarat state.

Sampling technique: The investigator has adopted simple random sampling method for the selection of area and sample.

Description of tools: The present study and for the monitoring of the growth, measuring tape, weighing scale, and WHO growth chart were used.

Reliability:
The reliability of tools was checked before and during pilot study. According to Inter ratter reliability method investigator has checked reliability of weighing scale and the coefficient variance between two observers was 0.9 which is in between the normal range of .00 and 1.00, hence the instrument was fond to be reliable.

A pilot study was conducted with Twelve Toddlers to refine the methodology and find the feasibility of the study.

Data collection procedure:
Before starting data collection formal permission was obtained from Programme officer, District health office of Tapi District. The data was collected in month of November-18th to November 30th- 2013, and time schedule for each area was 9:00 am to 5:00 pm. The investigator took the interview and did the observation of the sample. All the samples were respond well; investigator did not find any difficulty during data collection and finished within a time limit.

Plan for data analysis:
It was decided to take help from statistician for data analysis as the study had verities of data Researcher met to statistician Descriptive and inferential statistics were used to analyze the data.

Methods of data analysis
Frequency and percentage of the data obtained through background data calculated, and then tabulated. From those data gets various tables and graphs. Interpretations were made in descriptive manner in terms of the objectives of the study. Following statistical tests were used to test hypotheses:

- Frequency and percentage
- Standard Deviation
- Chi-square test

III. RESULTS
MAJOR FINDINGS
1. Majority of the toddlers age group 13 month to 18 month (32%) in Urban area while in rural area it was (28%).
2. Majority of toddlers were Hindu by religion (100%) in rural area while (56%) in urban area.
3. In urban area majority of the fathers (45%) were educated up to secondary and mothers (75%) were educated up to secondary. In rural area majority of the fathers (58%) were educated up to secondary and mothers (40%) were up to secondary.
4. Present study showed that in urban area majority of fathers (70%) were in privet job and in rural area majority of fathers (50%) were laborer. In urban area majority of mothers (90%) while in rural area (85%) were house wives and. In urban area majority of parents of toddlers 72% and in rural area 55% had monthly income was up < 5000.
5. In urban area and rural area majority (60%) and (68%) of toddlers were from joint family. In urban area and rural area majority (35%) and (41%) of toddlers having one sibling.
6. In urban area majority of toddlers (78%) and in rural area (93%) were taking vegetarian diet.
7. It was observed that the toddlers in urban area had height 28%, Head circumference 28%,Chest circumference 28%,mid arm circumference 28% were below average indicates protein energy malnutrition due to poor Dietary pattern and lack of knowledge regarding nutrition.
8. The majority of the toddlers in rural area had height 52%, Head circumference 52%, Chest circumference 52%, mid arm circumference 52% were below 78 average indicates protein energy malnutrition due to poor Dietary pattern, lack of knowledge regarding nutrition and low Socio-economical status.

9.   Majority of the toddlers 17% in the urban area had grade-I malnourishment than the toddlers 29% in the rural area. In urban area 11% grade-II malnourishment than the toddlers 20% in rural area.
10.   In urban area no any toddlers having a Grade - III. In rural area 3% toddlers having Grade III malnourishment because of poor dietary pattern, lack of knowledge regarding nutrition and lower socio-economical status.

11.   The chi-square (X2) value.015 is lower than tabular value 43.19 to 79.08 and hence research hypotheses has been accepted at 0.05 significance level.
12.   It is evident from above table that the Nutritional status/health status of toddlers from urban area was significantly higher than toddlers from rural area.
13. The relationship between the nutritional level of toddlers and educational status of father among urban area and rural area were positive as the chi-square values were .173 and .478.
14. The relationship between the nutritional level of toddlers and educational status of mother among urban area and rural area were positive as the chi-square values were .807 and 4.284.
15. The relationship between the nutritional level of toddlers and number of sibling among urban area and rural area were positive as the chi-square values were 4.955 and 5.229.

❖ **Frequency and percentage wise distribution of toddlers among Urban and rural area according to gradation of malnutrition.**
**N=120**

Gradation of Malnutrition	Urban area N=60		Rural area N=60	
	F	%	F	%
Over weight	00	00	00	00
Healthy	43	72	29	48
Grade I	10	17	17	29
Grade II	07	11	12	20
Grade III	00	00	02	03

Above table shows that majority of the toddlers (72%) in the urban area were healthy than the toddlers (48%) in the rural area.

Majority of the toddlers (17%) in the urban area had grade-I malnourishment than the toddlers (29%) in the rural area.

In urban area (11%) grade-II malnourishment than the toddlers (20%) in rural area. In urban area toddlers having a Grade III 00% and in rural area 03% malnourishment because of poor dietary pattern, lower socio-economical status.
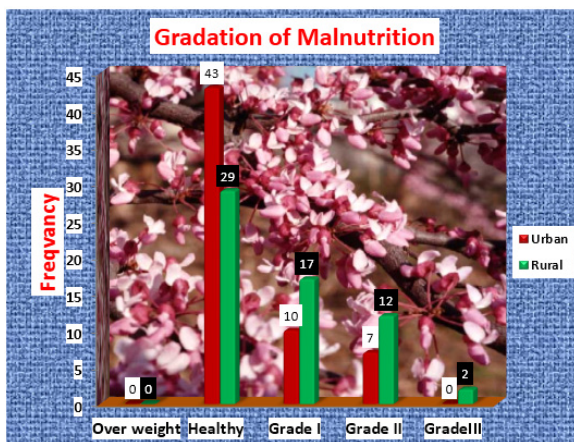
Summary of major findings

1. The nutritional status of toddler in urban area was better than rural area in terms of height, weight, mid arm circumference, head circumference and chest circumference.
2. The malnourishment gradation showed that in the urban area (28 %) of toddlers were malnourished were as in rural area (52%) of toddlers were malnourished. Malnutrition is due to lower socio-economical status and poor dietary pattern.

So, those findings show that the Nutritional status of the toddler in urban area is better than the rural area.

IV. CONCLUSION

Nutritional level deficit was existed in urban and rural area of Tapi district. From the above findings, it was concluded that nutritional level of the urban toddlers were higher than the rural toddlers and it was found that the variables like educational status of father, educational status of mother, number of sibling, dietary pattern of toddlers had positive effect on nutritional status of the toddlers.

Recommendations for further study:

1. A similar study may be replicated using the large sample and among more number of areas so that findings can be generalized for a larger population.
2. A similar study can be replicated among the various group of children's like infant, preschool, school going.
3. A comparative study can be conducted in order to compare the nutritional level of the toddlers among two District or two states.
4. A comparative study can be conducted in order to compare the growth and development.
5. A study can be done on effect of nutritional status on the growth of toddler.
6. A study can be done to find out the malnourishment among the various group of children.
7. A study can be conduct to identify the factors responsible for poor nutritional level among the higher socio economical status and lower socio economical status group.

REFERENCE   1. Marlow D. R.; "Text book of pediatrics nursing"; 3rd edition; Publication by Sundaes Company Philadelphia; London, Toronto.1969.Pp:126 to 135. 2. http://www.cdc.gov (WHO Report, 2012)