Overall Nutritional Status of Rural Children a Case Study of Latur District: Study of Medical Geography

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Abstract:
There are certain general guidelines in arriving at Nutrient Requirements and dietary Allowances for children. Between 0-6 years of age the nutrient requirement of an individual and the dietary allowances for child population are distinctly different. The former depends upon the age body weight and physiological and metabolic status of the individual.

Here are some facts about major nutrients including what they contribute to good health and in what foods they are found. The nutrients are organized in various groups.

Keywords: Nutritional Status, Rural Children.

Introduction:
Humans need a wide range of nutrients to lead a healthy and active life. Component of the diet must be chosen judiciously to provide all the nutrients to meet the human requirements in proper proportion for the different physiological activities. The amount of each nutrient needed for an individual depends upon his/her age, body weight and physiological status. Adults need nutrients for maintenance of constant body weight and for ensuring proper body function infants and young children grow rapidly and require nutrients not only for maintenance but also for growth. They require relatively more nutrients than adults. In physiological conditions like pregnancy and lactation, adult women needs additional nutrients to meet the demand for growth and maternal tissue expansion in pregnancy and milk secretion during lactation. These extra intakes of nutrients are essential for normal growth of infants in uterus and during early post-natal life.

Study Area:
The choice of the study area is influenced by so many considerations:

1) Latur is one of the districts of Maharashtra state which comprises ten tahsils. The area under study has a long cultural and historical past. It is characterized by diverse physical and cultural attributes.

2) Latur district is selected for the study as a region where tremendous prospects exists for the study of health.
3) The study region is a socio-economically backward as compared to western part of Maharashtra.

For the study of food, nutrition and rural child health of Latur district is selected as a study region. The district of Latur lies between 17° 12’ to 18° 50’ North latitudes and 76° 12’ to 77° 18’ East longitudes. It is surrounded by Beed and Parbhani district in the North, Nanded district in the North-East, Karnataka state in the South-East and Osmanabad district in the west and North West. The Latur district has an area of 7157 Sq. Km. and population 24,55,543 as per 2011 census.

Objectives:

The main objectives of this paper for given below.
1) To study the physical and socio-economic setting of the region.
2) To study the overall nutritional status.

Methodology:

Primary and secondary data have been obtained from the government health care centers and statistical offices for the study. A two tips questionnaire has been prepared for the Aganwadi (Disease or clinical status of the child) and socio-economic status of the family of the diseased child. To generate primary data this primary data are intended to unveil the physiological, environmental, economic and social aspects of health in the study area. The varying quality and quality of health care facility have been measured and the levels of development have been recognized. The results have been interpreted so as to highlight the causes and consequences of the nutritional status problem and the adequacy or otherwise of the rural children in the study region which will be useful for further planning.

Nutritional Status of Rural Children:

Table No. 4.1 shows the overall nutritional status of rural children in the study area. The overall nutritional status is negative. After studying all important nutrients and their consumption status among children in study area the revealings are really disturbing as none of the tahsils have positive intake.
Table No. 4.1
Overall Nutritional Status of Rural Children in the Study Area 2013
(Based on Samples)

<table>
<thead>
<tr>
<th>Sr. No.</th>
<th>Tahsils</th>
<th>PHC</th>
<th>Average Intake</th>
<th>RDA</th>
<th>Surplus/Deficit</th>
<th>% Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Latur</td>
<td>Bhatangali</td>
<td>1160.3</td>
<td>3060.6</td>
<td>-1900.3</td>
<td>-62.08</td>
</tr>
<tr>
<td>2</td>
<td>Renapur</td>
<td>Pangaon</td>
<td>1782</td>
<td>3060.6</td>
<td>-1278.6</td>
<td>-41.77</td>
</tr>
<tr>
<td>3</td>
<td>Ahmadpur</td>
<td>Hadoli</td>
<td>375.6</td>
<td>3060.6</td>
<td>-2685</td>
<td>-87.72</td>
</tr>
<tr>
<td>4</td>
<td>Chakur</td>
<td>Chapoli</td>
<td>698.52</td>
<td>3060.6</td>
<td>-2362.08</td>
<td>-77.17</td>
</tr>
<tr>
<td>5</td>
<td>Jalkot</td>
<td>Atnoor</td>
<td>653.68</td>
<td>3060.6</td>
<td>-2406.92</td>
<td>-78.64</td>
</tr>
<tr>
<td>6</td>
<td>Shirur (A)</td>
<td>Shirur A.</td>
<td>619.33</td>
<td>3060.6</td>
<td>-2441.27</td>
<td>-79.76</td>
</tr>
<tr>
<td>7</td>
<td>Ausa</td>
<td>Lamjana</td>
<td>1139.91</td>
<td>3060.6</td>
<td>-1920.69</td>
<td>-62.75</td>
</tr>
<tr>
<td>8</td>
<td>Nilanga</td>
<td>Kasar (S)</td>
<td>707.65</td>
<td>3060.6</td>
<td>-2352.95</td>
<td>-76.87</td>
</tr>
<tr>
<td>9</td>
<td>Deoni</td>
<td>Walandi</td>
<td>453.95</td>
<td>3060.6</td>
<td>-2606.65</td>
<td>-85.16</td>
</tr>
<tr>
<td>10</td>
<td>Udgir</td>
<td>Nalgir</td>
<td>473.17</td>
<td>3060.6</td>
<td>2587.43</td>
<td>-84.53</td>
</tr>
</tbody>
</table>

Source: Computed by the Researcher.

The graph No. 4.1 shows the overall status of nutrients intake of rural children in the study area.

Beside these, social-caused like illiteracy, below poverty line, Lack of Balanced diet, washing clothes, utensils in rivers of dams, near the sources of Drinking water, Lack of Nutrition Education, problem of communication, Lack of Monitoring and Surveillance. Etc are the responsible for the prevalence of overall Nutrients Change in Nilanga, Deoni and Udgir Tahsils in the study area.
Conclusion:

To nutritional consumption pattern of children in rural areas of Latur tahsil in very pathetic. To assess nutritional status and consumption vital nutrients which are essential for the healthy growth of children were taken into consideration. Eleven nutrients were taken to know the consumption pattern. Protein and Fat consumption in Bhatangli and Pangaon PHC of Latur and Renapur tahsils respectively have positive consumption and in remaining PHC and tahsils consumption in negative.

References: