Comparative Study of Nutritional Status of Urban and Rural Children

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ABSTRACT

Children are an important wealth of the nation and play a supportive role in nation-building. Only if they remain healthy then they could design the future of the nation for that, they should get healthy food. If children don't get these food elements in sufficient amounts, they can face malnutrition and it also affects children's health. As a result, such children get sick constantly and their physical development stops. Such children remain weak in the study. According to the medical examination of children, the average number of healthy children in urban areas is 80% and in rural areas it is 62.5%. Weight, height, and shoulder size of urban children are respectively found 16.15, 97.70, and 15.87. Rural children's weight, height, and shoulder size are respectively found 14.93, 96.42, and 14.73. And the difference was found as per the Chi square test. According to the above data, the method which was used to determine the diet status of the urban and rural area children as per its conclusion it's found that the diet status to be degraded in a rural area. Parents of rural areas work in the fields for entire day and unable to pay proper attention toward their children and Parents in urban areas seem to be more aware. If we make the economical comparison between urban and rural areas, it would be found that the economic status of the urban areas is good than the rural area.

Keywords: - Children, Malnutrition, Health, Nutritional status

Introduction:

Children are an important wealth of the nation and play a supportive role in nation-building. Only if they remain healthy then they could design the future of the nation for that, they should get healthy food. This age group, which constitutes 25% of the Indian population, is the basis of future society but they are suffering from many contagious diseases. For example, respiratory disorders, diarrhea, pneumonia, skin disorders, fever, malnutrition, etc. Because of this they are getting weaker due to these diseases. Therefore, it is having an adverse effect on their overall development.

There is a slight difference in malnutrition both urban and rural areas. Carbohydrates, proteins, calories, vitamins, iron, water, and oxygen are needed for the proper function of the human body. All these elements work together in the human body. If children don't get these food elements in sufficient amounts, they can face malnutrition and it also affects children's health. As a result, such children get sick constantly and their physical development stops. Such children remain weak in the study.

Malnutrition means there is an insufficiency in the human body of one or more proteins for a long period. It affects children's physical growth and overall development, this is called malnutrition. The term malnutrition means the human body gets food in less or more amounts and the body fails to perform the digest process properly, or excessive loss of nutrients from the body. Therefore, this leads to cells' imbalance in the body and various diseases occur due to lack of nutrients. Such as hemorrhage, diseases caused by iodine deficiency, eye diseases, Kwashiorkor disease and Marasmus disease, etc.

If the quality of nutrition of a person is good then his health also remains good. The major reason behind writing this research paper is to identify the health conditions of the children.

Objectives:

- 1. Nutritional status of urban children.
- 2. Nutritional status of rural children.
- 3. To compare nutritional status of urban and rural children.

Hypothesis:

- 1. Children in rural areas are malnourished.
- 2. The nutritional status of children in rural areas is low.

Research Area:

Ektanagar and Ayodhyanagar in Aurangabad city. Chitegaon, and Kesapuri of the rural area.

Sample Selection:

Randomly, 80 children from urban areas and 80 children from rural areas have been selected for primary study.

Data Collection:

The analytical method for determining the quality of nutritional status for this study will be applied as a best method. In this method, most of the symptoms of diseases caused by lack of nutrients are visible from outside. The information obtained by this method is useful if these symptoms can be identified. Diseases can be diagnosed on the basis of symptoms.

While doing a medical examination of the whole body check-up from head to toes is performed in a good light. It includes hair, face, nose, eyes, tongue, teeth, gums, skin, nails, hands, feet, chest, swelling on the feet and bone diseases, etc.

Review of Pre-Research Material:

As per the report of the National Nutrition Monitoring Bureau (2001), near about 45% of preschool children are malnourished. It is also observed that 65% of children are short in height and near about 47% of adults have energy deficiency for a long time.

According to Parimita Sen Gupta's research study, malnutrition was 9.50%, and in the developing areas its growth rate was 14.9%. If entire society decides to reduce child malnutrition by half by 2015, this would help to decrease its effect. Health and malnutrition are the major problems in India. And not they only invite death and disease among the

children. So it creates permanent physical weakness in children. 47% of underweight children are found malnourished in 2004 in India who were below five years age. Among them, 16 children died, and 46 children remained short in height.

As per the study of SimranVisai, ChhandaMallik in 2011, they found children like underweight, short in height, and weak in health. Their proportions are as follows respectively, 52.1%, 49.6% and 22.7%. It was found that near about 16% children were underweight, 24.4% children were short in height and 1.7% children were weak in a health.

In a study conducted by Sadruddin Biswas and Kaushik in 2011, they measured height and weight applying the human milli method. Then they came to the conclusion that the height and weight of boys were more than girls. Overall, underweight children 54.42%, undergrowth children 39.2% and weak in health22.10% children were found.

This suggests that if the quality of the diet is poor, children face different types of nutrition's efficiency and have to fall victim to problems like malnutrition. As a result, their overall development is also affected.

Signs and symptoms occurred due to lack of nutrients in medical examination

Sr.No.	Part of Body	Signs	Deficiency
1	Overall appearance	Very thin body	Celeries
2	Hair	Thin, to change hair color	Proteins, Vitamins
			C
3	Nails	Having white spots	Iron, Proteins
4	Skin	Dry and scaly skin, pale	D, iron, B-2
		face and hyper tension	
5	Eyes	Night blindness, burning	Vitamin A
		eyes and dry	
6	Mouth	Flowing blood from gums,	C, B-2, B-2, B-3
		inflammation of the lips	
7	Throat	Jyoter	Iodine

Anthropometric assessment:

Height, weight and other measurements are used to determine nutritional status of human. Human physical growth is depend on his heredity and nutritional status. Therefore, in the anthropometric assessment method human height, weight, and arm size are being measured.

1. Weight:

Weight measurement is one of the most widely used simple criteria for determining the nutritional level of children's. If someone doesn't get a proper diet, it affects weight. So weight was measured.

2. Height:

Nutritional level is determined by considering height and weight according to age. If there is less growth in height and have a nutritional deficiency for a long time, then it affects the human body. Therefore, it is useful to assess the nutritional status of young children.

3. Shoulder size:

Shoulder size measurement indicates muscles growth and development. This measurement is useful for determining whether children have protein or calorie malnutrition.

Doctors' consultation has been taken into consideration for determining the nutritional status for this research paper.

Percentage of symptoms in medical examination of urban and rural children

Sr. No.	Symptoms	Urban area	Percentage	Rural area	Percentage
1.	Normal children	64	80	50	62.5
2	Torn lips	02	2.5	05	6.25
3	White tongue	03	3.75	04	05
4	Swollen gums	04	2.5	06	7.5
5	Easily broken hair	03	3.75	08	10
6	Decayed teeth	04	5	03	3.75
7	White nails	02	2.5	03	3.75
8	Swelling on the	00	00	01	1.25
	body				

According to the medical examination of children, the average number of healthy children in urban areas is 80% and in rural areas it is 62.5%. Torn lips were found 2.5% in urban areas and 25% in rural areas. White –tongued children were found 3.75% in urban area and 5% in rural area. Children having swollen gums found in 2.5% in urban areas and 7.5% in rural areas. Children with easily broken hair found 3.75% in urban areas and 10% in rural areas. Children with white nail found 2.5% in urban areas and 3.75% in rural areas. Children with decayed teeth found 5% in urban areas and 3.75% in rural areas, and the percentage of swelling on the body found 1.25% only in rural areas.

Anthropometric assessment: Comparison of moderate weight of children in urban and rural areas

Group	Area	Moderate of Weight	Kay square
A Group	Urban area	16.15	X^2
B Group	Rural area	14.93	3.75

Comparison of moderate height of children in urban and rural areas

Group	Area	Moderate of Height	Kay square
A Group	Urban area	97.70	X^2
B Group	Rural area	96.42	3.75

Moderation and comparison of shoulder size

Group	Area	Moderate of Shoulder size	Kay square
A Group	Urban area	15.87	X^2
B Group	Rural area	14.73	6.07

Weight, height, and shoulder size of urban children are respectively found 16.15, 97.70, and 15.87. Rural children's weight, height, and shoulder size are respectively found 14.93, 96.42, and 14.73. And the difference was found as per the Kay square.

Discussion and Analysis:

According to the above data, the method which was used to determine the diet status of the urban and rural area children as per its conclusion it's found that the diet status to be degraded in a rural area. Because, while determining diet status through the medical examination, it was found that there were deficiencies in it. It means that, they don't have a balanced and good diet for their children. Parents of rural areas work in the fields for entire day and unable to pay proper attention toward their children. Their children mostly eat chocolates and biscuits, that's why they have more chances of decayed teeth. There is also found iron deficiency among these children. Torn lips, swollen gums and easily broken hair, all these symptoms are found in huge number on their body. Therefore, it seems that, because of poverty, ignorance, and lack of time, parents of rural areas are unable to provide a good diet to their children.

Parents in urban areas seem to be more aware. If we make the economical comparison between urban and rural areas, it would be found that the economic status of the urban areas is good than the rural area. And all type of facilities are available easily in urban areas. Parents are also pay full attention toward an infant from the pregnancy. They have good eating habits. They also get an information about health through the various sources. When they bring their children into hospitals then they also get information about the good diet. Due to all these things, the qualities of nutrition is better in urban areas.

Conclusion:

- 1. The nutritional status of children in rural areas was found to be degraded.
- 2. Malnutrition was seen in children in rural areas.
- 3. Their immune system was found to be weak.
- 4. The health of children in urban areas was found to be better than rural areas. This means that the nutritional level of children in urban areas is found to be good.
- 5. Nutritional quality affects physical development.
- 6. If the nutritional level is low then the holistic development of children is not possible.
- 7. Children with good nutritional quality are good in all respects like intelligence, socialization capacity and ability skills, etc.

Remedies:

- 1. Parents need to maximize the use of jaggery, peanuts, beetroot, and green leafy vegetables for feeding their children.
- 2. The diet should be changed regularly so that all pulses and cereals should be used intermittently without using a single pulse or cereal.
- 3. Though there is an insufficiency of food then if we avoid food cooking in the wrong way, it can lead to better health. For example, the wrong practices like flour using without cleaning, washing vegetables after cutting, overcooking vegetables, etc. still exist in rural areas and need to be changed

- 4. Anganwadi workers or Asha workers should be sent by providing training in dietary guidance for public awareness.
- 5. There are government schemes for the children, we have to try for its implementation.
- 6. With good diet vaccination, personal or surrounding cleanliness, and women literacy all these measures are also important for healthiness.
- 7. With all kinds of ingredients in the diet, at least a single fruit throughout the day is essential.

References:

- Pramita Sengupta (2001), "Epidemiological correlates of under Nutrition in under syeurs Children in an urban slam of Ludhiyana," Health and Population, perspectives and Issues, 33 (I) PP-1.
- Simran Bisai, (2011), "Preyalence of under nutrition among Koramudi children aged 2-13 years in paschinsnedinipurDistric, West Bengol, World Journal of Pediatric, 7 (1) PP-31.
- Sadruddin Biswas, Kaushik (2011), "Effects of social factors on nutritional status among rural Banglore, pre-school children from Eastern India, Enter: Journals of H. Sci. 8 (1), PP-3.
- Shobha Waghmare (2010), AaharopcharaniSamajPoshan, Vidya Book Publishers, Aurangabad, PP-126,149,150.

Triveni Farkade (2007), Poshanani Aaharshastra, Pimplapur Prakash, Nagpur. PP-9.