



Nutritional Status of the Pregnant Women in Vengurla of the Sindhudurg District: A Geographical Analysis

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Abstract:

Nutritional problems have serious public health significance impacting psychological, physical, developmental, behavioral and work performance of pregnant women. Iron deficiency is the commonest nutritional cause of anemia. It may be associated with foliate deficiency, especially during Pregnancy. Pregnant women form a large high-risk group requiring special care.

A woman is regarded as the nerve center of the family and society maternal nutrition and health is consider as the most important regulator of human fetal growth. A healthy mother can produce a healthy child. Pregnancy is the period of dynamic change for a mother requiring a lot of care.

The present study would undertake with following objective in mind. To study the nutritional status and dietary practices prevalent amongst the pregnant women belonging to low socio-economic status. To outline and implement NE and counseling or pregnant women (completed 5-7th month of gestation).

Present study will be undertaken at Vengurla Taluka is an economically, educationally backward area, women of this area would not aware about the additional nutritional requirements during pregnancy. Hence the present study is an attempt to assess their health and nutritional status of pregnant women in rural area.

Key Words: Counseling, Health, Nutrition, Gestation, Backward etc.

Objective Of The Study:

1. To study the nutritional status and dietary practices prevalent
2. amongst the pregnant women belonging to low socio-economic status.
3. Counseling of pregnant women's (completed 5-7th month of gestation).
4. To assess the effect of counseling pregnant women (completed 8th /9th a. month of gestation), in terms of maternal nutritional status.
5. To assess the health nutritional status of pregnant women
6. To assess the prevalence of different grades of anemia among rural
7. pregnant women
8. To evaluate the dietary intake and consumption pattern of pregnant women.
9. To evaluate some nutritional function indices of pregnant women in rural community.

Study Region:

Vengurla is surrounded by circular range of hills. The northern boundary

extends to Malvan and the south to Goa state, Kudal and Sawantwadi to its East. The western corner is Arabian Sea. A narrow coastal plain is lies at Vengurla coast. Vengurla has a semi tropical climate and temperature lies between 34 c maximum in summer and 29 c in winter. So temperature is very humid and hot in most of the year. In monsoon there is heavy rainfall.

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Limitations:

1. Present investigation are based on 50 pregnant women in Vengurla Taluka should be considered as sampling limitations.
2. In the present study respondents pregnant women representing control

group of non-counseling, group to the see the effect of counseling.

3. Only the respondent's pregnant women attitude knowledge towards the nutritional status and health status will be considered.
4. Dietary consumption patterns and dietary practices will have been taken to assess the nutritional status.

Literature Review:

Aparna Pandey, Carried out a study on " Mothers status in the family and nutritional status of their under five children" concluded that mothers and those having control over family expenses take care of children more effectively reflected in better nutritional status their children, while children of poor employed mother suffer nutritionally. There is need for some place like crèche to take care of children of poor working mother during their working Hours.

Prasana Kumari, Kamini S and Menon A.G.G.2007, carried out a study on Factors affecting the Knowledge, attitude and adoption of improved practices in health and nutrition of ICDS beneficiaries need more awareness creation in nutrition and health. The Study also implies the need innovative educational measures to enhance adoption of improved practices in health and nutrition among beneficiaries.

Asma Kulsum, Jyoti Lakshmi and Jamuna Prakash,2008, carried out a study on child care behavioral knowledge of women from an urban slum with reference to health and nutrition concluded that nutrition knowledge of majority of the mother was poor. Majority of the mother were aware that breastfeeding was important and were practicing it as a custom without knowing the nutritional or health significance.

Methods:

The statistical analysis would perform using Indian food composition tables. Students t- test and chi-square would use for inter and intra group comparisons of nutrient intake, anthropometrics measurements and hemoglobin levels. Different types of variables are taken like Independent variable and Dependent variables. In independent variable age, education, family size and health status included. Pregnant women selected as sample for the study.

Discussions:

The study would conduct in an area of Vengurla Taluka in District Sindhudurg, Maharashtra. A core sample of 50 pregnant

women belonging to low category and in varied period of gestation ranging from completing their 5th month to completing their 9th month of gestation would selected purposively would selected purposively through domiciliary visits. Detailed information would gather on subjects' background. Obstetric history work status, dietary intake and other food practices and beliefs, anthropometry and hemoglobin status using a presented interview schedule. Dietary intake of the subjects would assessed by 24 hour recall and food frequency and amount questionnaire (FFAQ) weight and height of the subjects would measure by scale (0.5 kg sensitivity) and non- stretchable measuring tape (0.1cm sensitivity), respectively.

Conclusion:

1. There is a significant effect of socio-economic status, educational level and psycho situational profile on nutritional status.
2. There is positive impact of knowledge awareness and belief of pregnant dietary habits and food intake practices.
3. Pregnant women counseling significantly improve the nutritional status and health status.

References-

1. Gopalan C. Women and Nutrition in India. Ind J NutrDietet1999; 36: 95.
2. Rabkins C S, Anderson HR, Bland JM. Maternal activity and birth weight: a prospective population based study. Am pidemiol 1990; 131(1): 522-531.
3. Ramachandran P. Low-birth-weights: the Indian experience. NFI Bulletin 1993; 14 (4): 5-8.
4. Gopalan C, Sastri BVR, Bala Subramanian SC. Nutritive value of Indian Foods. Hyderabad: National Institute of Nutrition; 1990.
5. Magbitang JA. Weight for height as a measure of nutritional status in Filipino pregnant women. Asia Pacific J Public Health.1988; 2 (2): 96-104.
6. Indian Council of Medical Research (ICMR). Dietary Guidelines for Indians-A Manual. Hyderabad: National Institute of Nutrition; 1998.
7. Kashyap S. Maternal work and nutrition profile of the pregnant and nursing mothers and their offspring among the quarry workers in Delhi-a prospective study. Unpublished Doctorate

- Dissertation. Department of Foods and Nutrition.
8. Mudambi S.R & Rajgopal M.V.2007 Fundamental of foods, Nutrition and Dite Therapy. Fifth Edition, New age International Ltd publisher Inc,129.
 9. Gopalan C., Ramasastru B.V. and Balasubramani S.C. 2002.Nutritive
a. Value of Indian foods. *ICMR*, Hydrabad.