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Nutritional Status, Social Awareness and Attitude Towards Marriage of Adolescents in a Tribal ICDS Block of Himachal Pradesh

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Adolescence is an important phase of child growth and development. While pursuing different child development services,

the adolescent phase has generally been totally neglected. Healthy adolescents apart from developing into healthy adults and parents can also play a key role in social and health education of their younger siblings and uneducated parents. Since there is paucity of information in general(1) and none from Himachal Pradesh on rural adolescent children, the present study was undertaken to evaluate the nutritional and educational status, social awareness and attitudes towards marriage and child bearing in adolescents (11-18 years) of a tribal ICDS block.

Material and Methods

The three villages, Rispa, Namgia and Shilling situated at a height of 10,000 to 11,000 feet above sea level were surveyed by a team of doctors from Pediatrics Department, Indira Gandhi Medical College, Shimla in June, 1991. The sampling design, frame and methodology of the study

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and questionnaire was provided by the Central Technical Committee of ICDS, New Delhi. The team of doctors were trained with the proforma before undertaking the study. The nutritional status was assessed by measuring left midarm circumference. Fiftieth percentile of NCHS standard was used as reference to grade more than 80% of expected as normal, 70-79% as Grade I, 60-69%, as Grade II and less than 60% as Grade III malnutrition. The adolescents were interviewed about their educational status, family and social activities, social goals, intrafamily or village status in differential of female/male care, awareness about marriage and child bearing and child development programmes being implemented in the community.

Results

Out of 607 total population of these villages, there were 171 adolescents in the age group of 11-18 years. Of these, only 112 adolescents were available for the interview and examination. The results are depicted in *Tables I & II*.

Nutritional Status: Seventy five per cent

of the adolescent population had normal nutritional status and the rest had Grade I (20.5%) and Grade II (4.5%) malnutrition, respectively (*Table I*).

Educational Status: It was interesting to note that the literacy status of the adolescents in this population was very high, *i.e.*, 98%; only 2 females were illiterate. Only 14.8% adolescents who had left studies did so before reaching the middle standard. More than 80% were pursuing their studies at different levels (*Table I*).

Family Activities: Both sexes shared all the family activities almost equally except for cooking and looking after young children in which females outnumbered males (*Table II*).

Social Activities: These included playing, marketing, attending festivals and visits to temples and community centre to listen to radio or watch television. Going to festivals and temples were the favourite of both males and females.

Social Goals: 42.8% males and 46.5% females wanted to be professionals like

TABLE I—Nutritional and Educational Status

Grade of nutrition	Boys (n=63)	Girls (n=49)	Total (n=112)
Normal	47 (42)	37 (33)	84 (75)
Grade I	15 (13.3)	8 (7.2)	23 (20.5)
Grade II	1 (0.9)	4 (3.0)	5 (4.5)
<i>Educational status</i>			
No schooling	0	2 (1.8)	2 (1.8)
Continuing education	56 (50)	37 (33)	93 (83)
Dropout	7 (6.3)	10 (8.9)	17 (15.2)

*Figures in parentheses are percentages of total.

TABLE II—Sexwise Distribution of Family Activity

Family activity	Female	Male	Total
1. Caring for young children	30 (61.2)	24 (38.9)	54 (48.2)
2. Cooking food	28 (57.1)	23 (36.5)	51 (45.5)
3. Fetching water	18 (36.7)	16 (25.4)	34 (31.0)
4. Washing clothes	17 (34.7)	23 (36.5)	40 (35.7)
5. Field farming	48 (97.9)	63 (100.0)	111 (99.1)
6. Caring animals	17 (34.7)	27 (42.9)	44 (39.3)
7. Cutting grass	18 (36.7)	23 (36.5)	41 (36.6)
8. Weaving	18 (36.7)	22 (34.9)	40 (35.7)
9. Washing clothes of landlords	17 (34.69)	0	17 (15.2)
Total	49 (100.0)	63 (100.0)	112 (100.0)

* Figures in the parentheses are percentages.

doctors, engineers and Indian Administrative Officers. The next most common desire mentioned by girls and boys was a good house lady (40.9%) and best farmers (25.4%), respectively. Military services was desired by 17.5% males and other Government services found favour with 8.9% of the adolescents.

Male-Female Care: All the respondents felt that there was no sex discrimination in getting care at family and community level.

Awareness and Attitude Towards Marriage and Child Bearing: Fifty two adolescents (30 females and 22 males) answered this part of the questionnaire. All boys and girls were of the opinion that no one should marry before 18 years of age irrespective of sex. Majority favoured males to marry after 20 years of age, or more and females after 18 years of age. Majority of girls preferred the age of 20 years or more at first child birth while the males were equally divided

in favor of it before and after 20 years of age. Eighty per cent of adolescents preferred 2 and none, single or more than three children per couple. Similarly, majority (78.9%) felt that the gap between two children should be 2 to 3 years, 21.1% girls in particular were in favor of it being more than 3 years. None of the respondents wanted it to be less than a year. Here again most of the respondents favored good antenatal care to pregnant ladies and delivery to be conducted by trained personnel like doctors, nurses or trained Dais. Awareness about development programmes for children in the community like ICDS, Balwadis, etc. was also adequate. Two third of the adolescents were aware about the year 1990 being declared as the year of the girl child.

Discussion

It is gratifying that adolescents in this remote tribal area had good health and excellent literacy status. The school drop out

rate of 15% from class first to matriculation, and numbers without schooling (1.8%) are lower in comparison to that reported in the singular, similar study from Rohtak (Haryana) with corresponding figures of 18% and 8%, respectively(1). It is also noteworthy that they are actively involved in many useful household activities, of which cooking and care of young children at home in particular can be utilized to promote the health and nutrition of their younger siblings. Some studies(2,3) in the past have pointed out lack of adequate and proper knowledge of infant feeding in mothers and even health personnel in the tribal area. About 45% of respondents had aspirations for professional careers like Indian Administrative Service (IAS), Doctors and Engineering, which is not unexpected by looking at the high socio-economic status of these professionals. Another important incentive for the tribals to aspire for these coveted professions is reservation for them by the Government for admission and promotion. One fourth (25%) of boys and 40% of girls chose to be best farmers and good house ladies, respectively. The aspirations for similar professions was much lower in the Rohtak study(1) where 34.6% girls and 48.3% boys wished to be teachers and police men, respectively.

Strikingly all adolescents thought that there was no sex discrimination in care at family or community level which was reported by 25% girls and 14% boys in the study quoted above(1). Awareness and attitude towards the marriage, child bearing maternal and child health services was high, which may be related to good educational status. Majority of males and females favored 20 years or more as the age of marriage and first child birth and none below 18 years. It is an interesting finding in a country where the average age of girls at marriage according to the Registrar

General's data of 1981 was 16.7 years(4). Two third of adolescents knew about the "Year of the Girl Child-1990", which may be due to its celebration organized in some of the Anganwadis.

It is inferred from this study that adolescents had good health and educational status, participated in the household chores like caring for children and cooking, had high career aspirations and were rightly aware about some of the maternal and child health aspects. They had right attitudes about medico social aspects of marriage and child bearing. These can be strengthened further and the knowledge of adolescents can be used as an important tool in furthering the cause of "Child Survival and Safe Motherhood" programme envisaged by the ministry of Health and Family Welfare.

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