A Survey Study Of Nutritional Awareness And Health Status Among Students In Jammu And Kashmir State

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Abstract: chemicals in food which our body needs are called nutrients. The food we eat directly affects our health. A proper diet helps in prevention of certain illnesses and also helps in recovery from diseases and injuries. An inadequate or improper diet increases the risk of different diseases. Eating a balanced diet is the right way to have all the nutrients that our body needs.100 samples were selected from south Kashmir of jammu and Kashmir. Self made questionnaire was used. The questionnaire was base on the life style and having its aim to assess the health status of the individuals. Through this questionnaire we assessed the eight variables like. Health related fitness, avoiding chemical dependency, stress management, personal hygiene/health, disease prevention, personal safety, environmental health and protection. There was five point rating scale. Self made questionnaire was used. This questionnaire contains 20 questions, Each question contains 3 options of 5 marks each. This questionnaire should be filled with in 5 minutes. The Scoring is done according to the responses of the subjects. Results shows that Health related fitness, 27% students were found under excellent category, 41% students were found under good category and 32% students were found under needs improvements category. Avoiding chemical dependency, under this variable 30% students were found under excellent category, 33% students were found under good category and 37% students were found under needs improvements category. Stress Management, Under this variable 13% students were found under excellent category, 43% students were found under good category and 44% students were found under needs improvements category.

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Introduction

Nutrition is the science that deals with food and its uses by the body. Like other living things we need food to live. Food provides material that our body needs to build up and repair its tissues and to regulate the functions of its organs and systems. To keep our body cells running properly they must be supplied with correct amount food having required chemicals in ratio of the food. The chemicals in food which our body needs are called nutrients. The food we eat directly affects our health. A proper diet helps in prevention of certain illnesses and also helps in recovery from diseases and injuries. An inadequate or improper diet increases the risk of different diseases. Eating a balanced diet is the right way to have all the nutrients that our body needs.

Balanced Diet: The balanced diet is the intake of appropriate types and adequate amounts of foods and drinks to supply nutrition and energy for the maintenance of body cells, tissues and organs and to support normal growth and development. A balanced diet is that which contains the proper amounts of each nutrient. There are hundred nutrients in the food. These nutrients are mainly grouped into six classes namely carbohydrates, proteins, fats, vitamins,

minerals and water. The nutrients, carbohydrates, proteins and fats supplies energy.

Reviews

Alaofe et al., (2009) conducted a study on the impact of a nutrition education program combined with an increase in bioavailable dietary iron to treat iron-deficiency anemia has never been studied in adolescent girls. The sample consisted of 34 control boarding-school girls aged 12 to 17 years from Benin. The study design consisting of 4 weeks of nutrition education combined with an increase in the content and bioavailability of dietary iron for 22 weeks was implemented in the intervention school. The study revealed that the nutrition knowledge and intakes of nutrients, including dietary iron, absorbable iron, and vitamin C, were significantly higher after the intervention. Whereas the prevalence of anemia and iron-deficiency anemia was significantly lower in the intervention period. They have suggested that a multidietary strategy aiming to improve available dietary iron can reduce iron-deficiency anemia in adolescent girls.

Kaur et al., (2007) conducted a study on impact of nutrition education on nutrient adequacy of adolescent girls. The sample of the study was 60 adolescent girls in the age group of 13-19 years.

Nutrition education was imparted to the subjects after assessing their basic nutrition knowledge. Nutrition education improved their mean nutrition knowledge scores significantly. Significant increase in average daily intake of all the nutrients was found among all the adolescent subjects. The study revealed that the nutrition education is an effective measure to bring about the favorable and significant change in adolescent nutrient intake.

Hilary et al., (2003) conducted a formative research with 26 women and 16 adolescent girls to develop an education intervention through community kitchens in Lima, to increase their dietary iron intake and improve their dietary iron intake and improve their iron status. They have suggested that the feasible ways of achieving a nutritious diet by promoting local heme iron sources and the consumption of beans with a vitamin C source foods were amongst those considered to be nutritious and were best buys for iron content. The use of animal source foods in the community kitchen menus increased during the intervention.

Methodology

Sample size- 100 students will be selected for this study.

Sample Area- 100 students from various school of south Kashmir. Who serve as subjects for this study. Age of the subjects range from 15-18 years with mean age of 16.50.

Sampling technique- Random sampling technique will be used for the study.

Tools

Personal Data Sheet

Personal data sheet was prepared by the investigator to collect the information regarding demographic, personal and performance profile of the students.

Description of questionnaires

The questionnaire was given to the students of Schools of south Kashmir of jammu and kashmir. Containing thirty two questions.

Self made questionnaire was used. The questionnaire was base on the life style and having its aim to assess the health status of the individuals. Through this questionnaire we assessed the eight variables like. Health related fitness, avoiding chemical dependency, stress management, personal hygiene/health, disease prevention, personal safety, environmental health and protection. There was five point rating scale.

Scoring

The Scoring was done according to the responses of the subjects.

1. Excellent (E): If a subject secure seventeen or more marks under each factor. This shows that subjects were aware of the importance of this category to their health status. He has been put his knowledge to work for him by practicing good habits.

- 2. Good (G): If a subject secure between thirteen to sixteen marks under each factor. This shows that his practices in this area were good, but there was room for improvement.
- 3. Needs Improvement (NI): If a subject secure between four to twelve marks under each factor. This shows that he had take serious and unnecessary risks with his health. Most likely he needed additional information and help in deciding how to successfully make the changes in his desire.

There was five point rating scale –

There was live point	rating scare
1. Always -	5 points
2. Nearly always -	4 points
3. Often -	3 points
4. Seldom -	2 points
5. Never -	1 point

Thus the lowest score was four and highest score was twenty in each factor.

Nutrition Awareness

Self made questionnaire was used. This questionnaire contains 20 questions. Each question contains 3 options of 5 marks each. This questionnaire should be filled with in 5 minutes. The Scoring is done according to the responses of the subjects.

0	-33%	Need improvement	
3	4-66%	Good (medium knowledge)	
6	7-100%	Excellent	

Statistical Procedure

Descriptive statistics (Percentage and pie diagram) was used to describe nutritional awareness and health status of students (male and female) of Schools of south kashmir.

Result

The questionnaires were based on the Nutrition awareness and Health status. There were 52 questions and these questions study nine variables which were nutrition, health related fitness, avoiding chemical dependency, stress management, personal hygiene/health, disease prevention, emotional well being, personal safety, environmental health and protection.

Health Related Fitness:

Health related fitness is the "ability of the body to carry out every day activities without excessive fatigue and with enough energy left over for emergencies". This means that, as well as performing our normal daily tasks, we can also perform additional physical activities including sports. There is what we call "components of Health Related Fitness" and if there is a good balance between the developments of all of these, then we can say that a good level of Health Related Fitness has been reached. There are

five health related components of fitness. These are Cardiovascular Endurance, Muscular Strength, Flexibility, Muscular Endurance, and Body Composition.

The following questions related to the variable are as follows:

- 1. I participate in vigorous aerobic activity for 20 minutes on three or more days per week, and I accumulate at least 30 minutes of moderate intensity physical activity on a minimum of three additional days per week.
- 2. I participate in strength training exercises, using a minimum of eight different exercises, two or more days per week.
- I perform flexibility exercises a minimum of three days per week.
- 4. I maintain recommended body weight (includes avoidance of excessive body fat, excessive thinness, or frequent fluctuations in body weight).

Under this variable 27% students were found under excellent category, 41% students were found under good category and 32% students were found under needs improvements category.

Avoiding chemical dependency:

Avoiding chemical dependency is a psychological and sometimes physical, need to use alcohol or other drugs that doesn't go away even when using them cause's negative consequences. It is a primary, chronic disease with genetic, psychosocial, and environmental factors that influence its development and manifestations. The disease is often progressive and fatal.

The following questions related to the variable are as follows.

- 1. I do not smoke cigarettes or use tobacco in any other form.
- 2. I avoid alcoholic beverages. If I drink, I do so in moderation (one daily drink for women and two for men), and I do not combine alcohol with other drugs.
- 3. I avoid addictive drugs or needles that have been used by others.
- 4. I use prescription drugs and over-the-counter drugs sparingly, only when needed, and I follow all directions for their proper use.

Under this variable 30% students were found under excellent category, 33% students were found under good category and 37% students were found under needs improvements category.

Stress Management:

Stress management is a condition or feeling experienced when a person perceives that demands exceed the personal and social resources the individual is able to mobilize. People feel little stress when they have the time, experience and resources to manage a situation. They feel great stress when they think they can't handle the demands put upon them. Stress is

therefore a negative experience and it is not an inevitable consequence of an event: It depends a lot on people's perceptions of a situation and their real ability to cope with it.

The following questions related to the variable are as follows.

- 1. I readily recognize when I am under excessive tension and stress (distress).
- 2. I am able to perform effective stress management techniques.
- 3. I have a close friends and relatives that I can discuss personal problems with and approach for help when needed, and with whom I can express my feelings freely.
- 4. I spend most of my daily leisure time in wholesome recreational activities.

Under this variable 13% students were found under excellent category, 43% students were found under good category and 44% students were found under needs improvements category.

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References

- Kamala-Raj 2011 Nutritional Status and Knowledge of Hill Women on Anaemia: Effect of Various Socio-demographic Factors, Shweta Upadhyay, A. R. Kumar, Rita Singh Raghuvanshi and B. B. Singh*College of Home Science, *College of Agriculture, G. B. Pant University of Agriculture & Technology, P.O. Pantnagar 263145, Uttarakhand, India 33(1) 29-34
- 2. Villa, C. R. (2011) Health effects of mixed fruit and vegetable concentrates: a systematic review of the clinical in terventions. Sour Department of Nutritional Sciences, Faculty of Medicine, University of Toronto, 30 (5)2-5.
- 3. Ansgar et al (2011) The German Young Olympic Athletes' Lifestyle and Health Management Study (GOAL Study): design of a mixed-method study. BMC PUBLICHEALTH,11,410-419.
- Kamala-Raj (2010) Diet and Nutritional Status of Women in India, K. Mallikharjuna Rao, N. Balakrishna, N. Arlappa, Sour. A. Laxmaiah and G.N.V. Brahmam National Institute of Nutrition, (Indian Council of Medical Research), Jamai-Osmania, Andhra Pradesh, India, Jou. Hum Ecol, 29(3)165-170.
- Shukla Alok, Singh CS, Begonia Papiya (2010)
 A Survey on the Occupational health Status of

- Gardeners in Bhopal, Department of Pharmacology, Radharaman College of Pharmacy, 35(4) 487–490.
- 6. Gupta and Kocher (2009) Role Of Nutrition Education In Improving The Nutritional Awareness Among Adolescent Girls, The Internet Journal of Nutrition and Wellness7:1.
- Gandhi N.K, Soni N.K, (2008) Assessment of Health status and Health seeking factor Female school Teachers Raipur, City, Sour. Dept. Of Community Medicine, Pt. J. N. M. Medical College, Raipur.
- 8. Okita Sachiko et al (2005) awareness among female university students of the effect of dietary behaviour on environmental load reduction. Journal of Cookery Science of Japan 38(5) (243-253).
- 9. Jayanta Bhattacharya, Janet Currie and Steven Haider (2004), Food insecurity and Nutritional outcomes in children and adults, Journal of Health economics, 23(2)839–862.
- 10. Elangovan and Shanmugan (2002), Immunization and Nutritional status among

- children aged under five in a major district in India, Department of Statistics, Annamalai University.30(3)102-105.
- 11. Girma, Woldemariam and Timotiows Genebo (2002), Determinants of Nutritional Status of Women and Children in Ethiopia. Calverton, Maryland, USA: ORC Macro.
- 12. Robert et al (1989) Health Locus of Control and Participation in Physical Activity. American Journal of Health Promotion.41 (4) 32-37.
- 13. Garrison P.B (1981) "Change in health knowledge, self-esteem and health values among adolescents in an experimental health science course." Jou. Dissertation abstracts international 42 (5)10-19.
- Gupta, Arun R. and Singh kapoor, (1981)
 "Health awareness among adolescents as a
 dependent function of age, family income and
 size." Indian educational review 17 (October
 1981:9). Health Aff (Millwood). 2011.30(11)98 106

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