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Assessment of Nutritional status of Average Intake of Carbohydrates of Rural children in Latur District: A Geographical Analysis.

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Abstract

For the present research work in the Latur district of Maharashtra state is selected as a study region. It lies between $17^{\circ} 52^1$ and $77^{\circ} 18^1$ East Longitudes. The study region area as 7372 sq.km. which contribute (2.40 % of state's area) with 10 Tahsils, 923 villages, 5 Urban centers. According to census 2011 Latur district has population 2455543 in 2011. The population density of Latur district is 343 per Sq.Km. The present paper tries to study to understand the average intake of fat in Latur district.

Keyword : RDA (Recommended Dietary intake), Carbohydrates.

Introduction :

The term carbohydrate refers to a large family of organic compounds essentially made of their elements i.e. carbon, hydrogen and oxygen. Sugar which we commonly use in our house is a carbohydrate made up of two basic units i.e. one unit of glucose and one unit of fructose on the other hand, a starch molecule is very large. It is made up of several basic units of glucose linked together. These chains of glucose can be straight or branched. Examples of foods rich in starch are rice, wheate, maize and tapioca.

Fibre, like starch, is made up of a number of basic units. The term fibre includes several substances. Cellulose is one example. It is a substance made up of several glucose units.

All these types of carbohydrates i.e. sugars, starches and fibre can also be classified as available and non-available carbohydrates. Carbohydrates like sugars and straches are digestible in the human digestive tract and hence can be made available to the body for its functioning. These carbohydrates are termed as available carbohydrates. Cellulose and certain other large carbohydrate molecules that cannot be digested in the human digestive tract are collectively refferred to as fibre or non-availalbe carbohydrates.

Aims and Objectives:

- 1) To study the food and Nutritional status of rural centres in the study region.
- 2) To find out per head Daily average intake of carbohydrates of the rural children in the study area.

Data Base :

The above objectives are to be tested by collecting primary data and applying quantitative techniques. District Health officers of the district were approached for the required secondary information to supplement first hand information.

Methodology:

This primary data are intended to unveil the physiological, environmental, economic and social aspects of health in the study area. The data thus collected were analyzed according to dietary constituents involved in each food stuff. Later on every constituent obtained from all foods per head intake of constituent was found out for each PHC. The actual intake of constituent consumed by standard unit requirement, from this comparison on the level of adequacy and deficiency of particular constituent were determined. The data thus obtained were represented with the help of maps.

Table No. 1.1

P.H.C. wise per Head Daily Average Intake of carbohydrate of the Rural children in study Area 2013. (Based on sample)

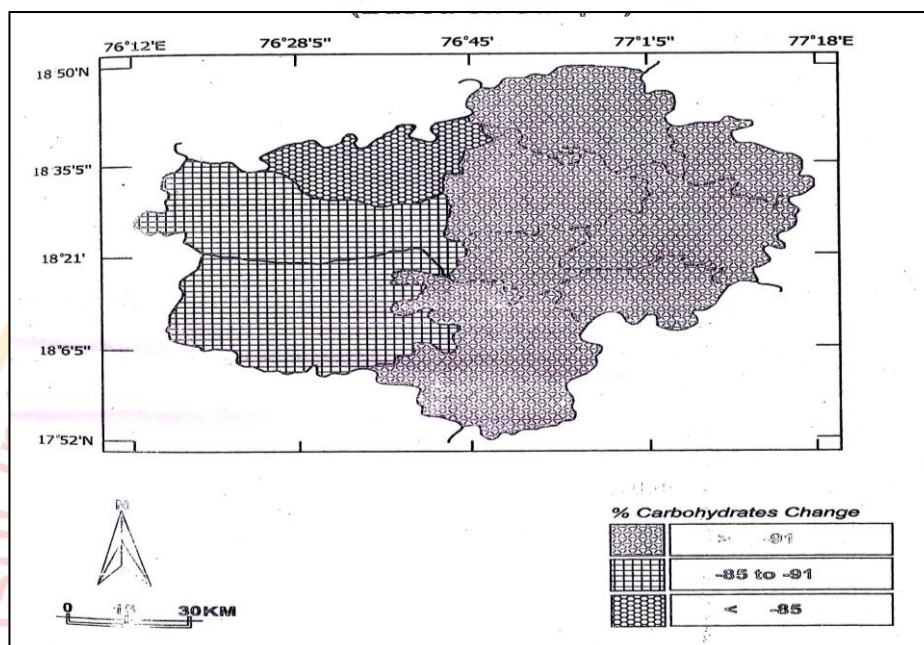
Sr.No.	Tahsils	P.H.C.	carbohydrate (g.m.)			
			Average Intake	RDA	Surplus / Deficit	% Change
1.	Latur	Bhatangali	77.60	600	- 522.4	- 87.06
2.	Renapur	Pangaon	119.11	600	- 480.82	- 80.13
3.	Ahmadpur	Hadolti	24.99	600	- 575.01	- 95.83
4.	Chakur	Chapoli	46.72	600	- 553.28	- 92.21
5.	Jalkot	Atnoor	43.72	600	- 556.28	- 92.71
6.	Shirur(A)	Shirur A.	41.42	600	- 558.58	- 93.09
7.	Ausa	Lamjana	76.24	600	- 523.76	- 87.29
8.	Nilanga	Kasar (S)	47.33	600	- 552.67	- 92.11
9.	Deoni	Walandi	30.36	600	- 569.64	- 94.94
10.	Udgir	Nalgir	31.65	600	- 568.35	- 94.72

Source: Computed by Researcher

The above table shows PHC wise per head daily average consumption of carbohydrates of rural children in the study area in 2013. The table reveals that 600 grams of carbohydrates is a RDA but the situation is worst in the study area as every tahsil has registered a negative intake, and conditions are really pathetic. Tahsils like Ahmadpur, Chakur, Jalkot, Shirur Anantpal, Nilanga, Deoni and Udgir have more than minus 90 percent intake. Fig No. 1.1 shows the carbohydrate intake of rural children in Latur District in 2013.

LATUR DISTRICT

**P. H. C. Wise per Head Daily Average Intake of
Carbohydrate of the Rural Children 2013
(Based on Sample)**



1.1

Conclusion:

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.

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