

A Study of Nutritional Awareness and Attitude of Adolescent Girls towards Nutrition

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ABSTRACT

The period of transformation between childhood and adulthood is the Adolescence period. It is a window of opportunity for the improvement of nutritional status and correcting poor nutritional practices. This is about the same period puberty sets in, typically between the ages of 10 and 13 years in girls. Adolescence is characterized by the growth spurt, a period in which growth is very fast. During this time, the body's nutritional needs are affected by the physical developments, while changes in one's lifestyle may affect eating habits and food choices. Good nutrition is therefore very important for the proper growth and development and the prevention of any health problems in adolescents in the future. Thus, in the present study, an attempt was made to study the awareness level and attitude of the adolescent girls towards nutrition. Self-made questionnaire was used to assess the level of awareness and attitude of adolescent girls towards nutrition. The focused group discussion was used to find out the attitude of the adolescent girls towards nutrition. The survey method of research was used in the study. One hundred adolescent girls of 13 to 15 years of age were selected through simple random sampling technique. The study was conducted in Almora district, Uttarakhand, India. The results showed a low level of awareness regarding nutrition amongst adolescent girls, and most of the girls thought that expensive foods are nutritious. Respondents complained that gender differences were there in the family in terms of the quality of food intake.

Keywords: Adolescents, Attitude, Nutrition.

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INTRODUCTION

The age group between 10–19 years which is called adolescence is the period of life when there is a rapid physical, social and psychological growth as well as sexual maturity. A part of the very important section of our society is formed by adolescent girls as they are the potential mothers and homemakers in the future. These girls also perform various other roles in the family and the community. The transitional period of dramatic physical growth and development is the adolescent period. The characteristic of this period is rapid and sequential physical and mental changes that transform a small child into a young adult girl. In this age, an adolescent experiments for his adult identity and transition, from the total socioeconomic dependence to relative independence. Adjusting with their physical growth, development and their surroundings too is a new challenge with the adolescents. At times these unexpected changes may lead to a feeling of awkwardness. In India, a large number of an adolescent girl, get married at below the age of 20. It may also be a time period to shape and consolidate healthy eating and lifestyle behaviors, thereby preventing or postponing the onset of nutrition-related chronic diseases in adulthood (Kaur et al., 2007). Unfortunately, in India, there is no period of adolescence as they budge from childhood to adulthood and soon become pregnant. The adolescent girls who are the impending mothers and homemakers of the future continue to face the suppression of nutritional deficiency. Usually, in developing countries, most of the nutrition schemes have been focusing on children and women, thus neglecting the adolescents. If the focus is shifted on the nutritional needs of adolescents, it could be an important step towards breaking the vicious cycle of malnutrition, chronic diseases, and poverty. Epidemiological evidence from both the developed and developing countries indicates that there is a link between fetal undernutrition and increased risk of various chronic during adulthood (Adolescent Nutrition, WHO, 2006). The girls of the adolescent period are tomorrow's adult population, and their health and wellbeing are

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crucial. Tremendous changes occur in the body during this period due to the influence of hormones, and with profound growth, there is increased demands for energy, proteins, vitamins, and minerals in the Adolescence period (Easwaran and Poorani, 1991). However, the interest in the health of adolescents is relatively recent, and a focus on nutrition is even recent except for adolescent— pregnancy. The future economic development of poorer countries rests in large part on the prospects of having an increasing proportion of future adults who are educated, healthy, and economically productive (Discussion Papers, WHO, 2005). One of the main nutritional deficiencies in female adolescent is iron deficiency anemia. By learning about the nutritional status of adolescents strategies can be planned for combating macro and micro deficiencies of future citizens, including future mothers (Netravati et al., 2014). In India, nutrition of women is neglected as a result of which macro and micronutrients deficiencies have become prevalent (Prema, 2009). Not much literature is available on adolescent's knowledge about nutrition. Therefore, in the present study, was undertaken to study the awareness level of nutrition and attitude of the adolescent girls towards nutrition.

Objectives

- To study the family background of the adolescent girls.
- Studying the knowledge level of the adolescent girls regarding nutrition

- Studying the attitude of adolescent girls towards nutrition.

Delimitations

- The present study is restricted to the Almora district of Uttarakhand.
- The study was conducted on adolescent girls of 13–15 years.
- Government schools of Almora District were taken for the study

METHODOLOGY

Survey method is employed to collect the data. A survey is a research method in which subjects respond to a series of statements or questions in a questionnaire or an interview. Surveys target some population, which are the people who are the focus of research. Because populations are usually quite large, the researcher will target a sample, which is a part of a population that represents the whole. Questionnaires and interviews are the most common types of surveys. A questionnaire is a series of written statements or questions. With an interview, the researcher personally asks subjects a series of questions and gives participants the freedom to respond as they wish. Both questionnaires and interviews can include open-ended questions (allowing the subjects to respond freely), or close-ended questions (including a selection of fixed responses). The population of the present study consists of secondary school students.

Sample

Sampling is a process used in statistical analysis in which a predetermined number of observations are taken from a larger population. Simple random sampling was used to select the students and collect the data from them. Simple random sampling is the basic sampling technique where we select a group of subjects (a sample) for study from a larger group (a population). Each individual is chosen entirely by chance and each member of the population has an equal chance of being included in the sample. A total of 100 samples were selected randomly from the government schools of Almora District of Uttarakhand, India.

Procedure

The sample of 100 students was selected by way of simple random sampling by giving equal weight to a rural and urban area. The statistical technique used is a percentage analysis of the responses from the sample. Selfmade questionnaire was used to collect data.

Analysis and Interpretation of Data

Table 1.1 presents the distribution of the sample as per the socio-economic background. The sample consisted of 100 adolescent girls aged between 13–15 years. Majority of the sample, 70% belonged to the joint families. The financial status of the students seems to be low as the majority of the students have monthly family income up to five thousand (5000) rupees.

So far, the educational level of parents of the sample was concerned, most of the student's parents are found to be illiterate or less educated. Majority of the students were found to get health-related information from family, school, hospital, and friends.

It is found that 40% of adolescent girls given correct responses to all the items of knowledge related to a balanced diet (Table 1.2). It seems that negligible students (4%) are having correct knowledge of nutritional deficiency diseases. Thirty (30) percent of students were having correct knowledge related to sources of nutrients. This finding is consistent with the result of a study conducted on diet, nutritional status and food-related traditions of Oraon tribes

Table 1.1: Distribution of students as per the background variables (N = 100)

S. no.	Background variables	Percentage
1	<i>Family type</i>	
	(a) Nuclear Family	30
	(b) Joint Family	70
2	<i>Family income</i>	
	(a) Upto 5000 Rs	60
	(b) 5001–10000 Rs	30
	(c) 10001–15000 Rs	10
	(d) Above 15000 Rs	–
3	<i>Educational qualification of parents</i>	
	(a) Illiterate	32.4
	(b) Up to elementary level	20.8
	(c) High School	28.4
	(d) Intermediate	11.6
	(e) Others	4.9
4	<i>Sources of health-related information</i>	
	(a) Family	62.4
	(b) School	48.4
	(c) Electronic media	28.6
	(d) Print media	24.2
	(e) Friends	28.8
	(f) Hospital	42.2
	(g) Poster and pamphlet	4.8
	(h) All the above	0.2

of New Mal (West Bengal). The women's (aged between 15–45) knowledge of proper diet was found to be severely deficient (Mittal and Srivastava, 2006).

This finding may be attributed to the fact that the poor educational background of the parents might have influenced a range of exposure and thus cause students to perform in a given manner.

Table 1.3 shows that only 12% of girls were found to have scored above 70% marks while 44.2% of girls scored between 51% and 70% and 43.8% of girls scored below 50 percent. Majority of the students scored between 51% and 70% marks. Very less number of students could score above 70 percent.

Findings

- It is revealed through this study that the majority of the students are having low economic status (Table 1.1).
- Majority of the students are from the joint family background (Table 1.1).
- Most of the parents of the respondents are less educated or illiterate (Table 1.1).

It is surprising to note that the majority of the students reported that they get health-related information through the family. The other sources of information reported by the respondents are school, hospital, and friends. (Table 1.1)

- It is surprising to note that the respondents are less aware of the balanced diet. Only 40.4% had correct knowledge of a balanced diet (Table 1.2).



Table 1.2: Responses of students about knowledge related to nutrition

Dimension	Percentage analysis		
	Correct knowledge	Partial knowledge	No knowledge
Knowledge related to a balanced diet	202 (40.4%)	287 (57.4%)	11 (2.2%)
Knowledge related to sources of nutrients	154 (30.8%)	339 (67.8%)	07 (1.4%)
Knowledge related to nutritional deficiency diseases	24 (4.8%)	418 (83.6%)	58 (11.6%)
Knowledge related to malnutrition and overnutrition	172 (34.4%)	302 (60.4%)	26 (5.2%)

Table 1.3: Percentage of attitude of adolescent girls towards nutrition

N	Less than 50%	51–70%	Above 70%
100	219 (43.8%)	221 (44.2%)	60 (12.0%)

- In the present study, it was found that only 30.8% of respondents had correct Knowledge related to sources of nutrients (Table 1.2).
- Correct knowledge related to nutritional deficiency diseases was found amongst 4.8% respondents only (Table 1.2). Similar findings were also reported by a study conducted by S. Bharti and Shalini (2013) where the respondents were less aware of anemia.
- Correct knowledge related to malnutrition and overnutrition was found only amongst 34.4% respondents (Table 1.2).
- It is revealed through this study that the majority of the students are having a negative attitude towards good eating habits, balanced diet, and habit of exercising (Table 1.3).
- It was found that meals of respondents were predominantly cereal based and lacked food like fruits and vegetables. Similar findings were reported in a study conducted by Dahiya and Kapoor (1992).

CONCLUSION

Findings of the study suggest that adolescents girls who are in a very crucial stage of development need special attention for the development of healthy homes and society as they are found to have limited knowledge regarding nutrition. Health and nutrition are the prime concerns of human existence. Most of the students are having a negative attitude toward healthy eating habits and physical exercises. It is important to encourage students to have a positive attitude towards nutrition. The pervading poverty has made constant indulgence of the people of the region under study in economic pursuits for earning their livelihood and pushed back

education and health-related priorities to secondary preference. Thus young girls need more and more attention of policy makers and planners for educating them by giving comprehensive knowledge of nutrition. Our patriarchal social norms, culture, customs, values, and stigma about sexuality and gender give a little exposure to women in general and to adolescent girls in particular, to explore the outer world. Majority of the students accepted this fact that detailed information on nutrition knowledge should be provided in schools. Information alone is not enough but should be linked to accessible user-friendly services. Parents or guardians should be made aware of the importance of adolescence nutrition.

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