Maternal Nutrition & Dietary Awareness in Rural India – Need For Strong Community Supportive Mechanisms

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Abstract: This paper examines the issues relating to maternal nutrition & dietary awareness needs of rural women. Maternal nutrition & health issues are inter-twined in rural India. Rural pregnant women are facing the issues of nutrition & nourishment. The lack awareness & social economic constraints are the main hindrances towards maternal nutrition. This lack of awareness is a significant issue as the maternal deaths are increasing even after governmental schemes & NGOs supportive role. The limitations caused by societal, economic & environmental factors are making women surrender to unforeseen fatalities. There is a need to create adequate health care availability to all levels of rural Indians. The fact that the risk of malnutrition in women spans a life cycle & preventing maternal mal nutrition requires interventions at all stages of growth & development The nutritional status of one generation of women affects the nutritional wellbeing of the children. Thus the intergenerational impact continues to haunt for generations. Multi sectoral Nutrition strategy 2014-2025 seeks to reduce mal nutrition in women with focused strategies. All these need promotion of gender equality & the empowerment of women and girl children with strong nutrition supportive programs. A responsive Community can create awareness on consuming micronutrient rich diet during adolescence & during pregnancy promotes optimal mental & physical development of girl children as well as pregnant women. Maternal Malnutrition is causing negative impact on socio economic development of nation too. There is a need for a strong community supportive mechanism towards dealing with maternal nutrition & dietary awareness issues.

Keywords: Rural India, Maternal nutrition, dietary awareness, community supportive mechanisms, challenges

I. Introduction

Global health index released by WHO 2015 reports that in India maternity deaths are owing to lack of nutrition awareness. India is still suffering from mal nutrition & hunger issues. It is evidenced that malnutrition or nutrition relate health issues arise because of poor sanitation & poor hygiene awareness. An estimated 600 million children are suffering from poor sanitation. More than 775thousand new born children die each year & nearly 50 thousand women die from pregnancy related causes.

Maternal Nutrition Components need to include

1. Calcium
2. Vitamin a
3. Vitamin d
4. Folic
5. Iron
6. Protein
7. Energy filled food

Rural women suffer from
1. Anemia is the key cause for maternal deaths in rural India. It is seen through medical researches that Anemia raises the risk of premature birth of children & birth of less weight children. Sometimes Anemia leads to fatalities including neo natal deaths. In adult woman Anemia also causes fatigue lowered productivity & body aging. The Anemia & its adverse effects cause greater damage to physical growth & brain health. In India 79% of the children in the age bracket of 1-3 are underweight.
2. Energy deficiency-primarily occasioned by poor availability of food but also conditioned by anorexia and stress of infections plus the high requirements of physical labour.
3. Iron-deficiency anemia-coupled with foliated deficiency in some areas. Again the main cause is too low an intake of foods containing iron / folate, exacerbated by the increased needs of pregnancy. In hostile environments there is the added burden of reduced absorption, defective haemopoeisis, and increased blood loss.
4. **Vitamin A deficiency**- ocasioned by low intake. As carotene is the main source for Third World mothers, vegetable consumption habits and seasonal availability are crucial. The most striking adverse effects are usually seen in the offspring of deficient mothers after the infants are weaned.

5. **Iodine deficiency**- leading to endemic goitre occurs in areas where the iodine content of the soil, water, and plants is low, especially in the presence of goitrogens, and where foods from outside the area are not consumed. Adverse effects on the mental performance of the offspring is a main concern.

6. **Deficiency of other micro-nutrients**, such as thiamine, niacin, and zinc, may still occur in certain areas.

**Role of Community mechanisms**- There is a need for application of long term & short term initiatives towards maternal nutrition & the role of community becomes very important. Community can be very handy towards creating awareness on increasing

1. ability to assess maternal nutrition status
2. ability to assess the nutrition requirement during pregnancy
3. ability to assess the need for dietary supplements during pregnancy
4. ability to assess mechanisms towards improving family diet
5. ability to assess time for supplementary feeding
6. ability to assess milk support

Community can involve awareness training session for the needy & support awareness on nutrition & dietary requirements.

There is a need to make national policy ensuring poorest & marginalized communities food security. It is the responsibility of the government to look into the fact that every poor family gets adequate entitlement to food. Government can support local governments to introduce appropriate technology to reduce the mother’s workload during pregnancy. There is a need to create adequate health care availability to each poor family. The fact that the risk of malnutrition in women spans a life cycle & preventing maternal malnutrition requires interventions at all stages of growth & development. The nutritional status of one generation of women affects the nutritional wellbeing of the children. Thus the intergenerational impact continues to haunt for generations. Multi-sectoral Nutrition strategy 2014-2025 seeks to reduce malnutrition in women with focused strategies. All these need promotion of gender equality & the empowerment of women and girl children with strong nutrition supportive programs. A responsive Community can create awareness on consuming micronutrient rich diet during adolescence & during pregnancy promotes optimal mental & physical development of girl children as well as pregnant women.

**II. Conclusion**

Thus Maternal nutrition & dietary awareness especially in rural India calls for strong community supportive mechanisms with long term impact on health care provision policies. All stake holders of the society have to feel the responsibility towards improving dietary & nutrition knowledge to women. Besides there is a strong need to deal with societal & environmental constraints which are reflecting negatively on women health awareness. Rural women need support towards equality, equal opportunities, impartial approach & unprejudiced
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attitude of the society. Only these acts will help her to gain confident personality & sustainable future. Anemia is the key cause for maternal deaths in rural India. It is seen through medical researches that Anemia raises the risk of premature birth of children & birth of less weight children. Sometimes Anemia leads to fatalities including neo natal deaths. In adult woman Anemia also causes fatigue lowered productivity & body aging. The Anemia & its adverse effects cause greater damage to physical growth & brain health. In India 79% of the children in the age bracket of 1-3 are underweight.

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