CHAPTER 9
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SUMMARY
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Positive health of a child encompasses both physical as well as mental health. Childhood is a period of active growth in terms of both physical and mental development. As the concept of growth having multifactorial influence is widely accepted, this work was undertaken to study the relationship of mental development with various other factors like physical parameters, socio-economic status, parent's status etc.

The present work has therefore been undertaken to study in detail the physical as well as mental development of Government and Government aided primary school children between the age group of 6-11 years of Raipur city.

The present thesis, entitled "A study of physical and mental development of primary school children in relation to nutrition and related factors with respect to Raipur city." has been completely incorporated in the following chapters.
CHAPTER I, GENERAL INTRODUCTION. General Introduction deals with a brief survey of the works which has been carried out in this field and the importance of primary school age group with reference to positive health.

CHAPTER II, MATERIALS AND METHODS. Materials and Methods deals with the description of techniques of selection of subjects, selection of sample, selection of area, environmental characteristics, assessment of nutritional status in which (general clinical examination, anthropometry (height, weight and arm circumference), haemoglobin estimation, diet survey were carried out mental test and statistical tests employed during the present study are described.
CHAPTER III, CLINICAL ASSESSMENT. Clinical assessment of the primary school children between the age group of 6-11 years, includes examination of physical signs associated with the state of malnutrition. The presence or absence of deficiency symptoms on face, eyes, hair, nails, tongue, teeth, gums, skin and lips were recorded. Common ailments were checked during home and school visits.

The general examination of children in the age group of 6-11 years, revealed that more than 50% were normal. Main clinical deficiency signs seen were dental caries and pale eyes, in about 35 to 40% of children. Other deficiency symptoms observed in few cases were cheilosis, xerosis, mottled enamel and spongy and bleeding gums.

There are obviously signs of deficiency of riboflavin, vitamin A and essential fatty acids and vitamin-C respectively. The occurrence of these deficiency signs was very low indeed and more surprising was the fact, that no case of night blindness was detected.

CHAPTER IV, ANTHROPOMETRIC MEASUREMENTS. Anthropometric measurements pertains to the measurements of variations of the physical dimensions and composition of the human body at different age levels and degree of
nutritions. Although the general appearance in majority was almost normal, anthropometric measurements of a large section were lower than NCHS standard, but they were closer to ICMR standards. This probably reflects the nutritional status since about 50% boys and 80% girls were below standard.

CHAPTER V BIOCHEMICAL ANALYSIS. Biochemical examination includes haemoglobin estimation of the subjects. The result revealed that 50% or more children had low haemoglobin level.

CHAPTER VI, SOCIO-ECONOMIC STATUS. Socio-economic data shows that most of the children belonged to low socio-economic status, with unsatisfactory educational level of parents. What is more important is the fact that, around 50% mothers were illiterate and most of the remaining had only primary level of education. Mother's role in bringing up children cannot be over emphasized. This illiteracy results in ignorance, which leads to wrong feeding practices, poor nutrition as well as living conditions and so on, all of which affect the child's growth.

CHAPTER VII, DIET-SURVEY. The low income accompanied by wide spread illiteracy is reflected in their dietary intake. It is likely that the income plays a major role since this determines the purchasing
capacity. Except green leafy vegetables, the intake of all other dietary essentials was lower than R.D.A. With rice as the staple food and pulses being used occasionally due to its cost, the protein source gets limited, thus the overall dietary pattern shows a degree of unsatisfactory status. Cooking methods also further add to the problem. It is therefore necessary that proper nutrition education relevant to low socio-economic group is essential. It is necessary to formulate diet plan taking into account the financial constraints.

CHAPTER VIII INTELLECTUAL ASSESSMENT. All the subjects were assessed for their intelligence, the correlation between the level of mental development and the various factors, discussed earlier became quite evident. About 35% children fall in average category and about 40% in dull average category. The result revealed that the level of intelligence has a direct relation with socio-economic condition, anthropometric parameters and nutritional intake.

Thus during this crucial period of physical and mental development, it is necessary that, proper nutrition is supplied to children. Nutritional inadequacy at this stage brings long lasting lacunas and becomes a life long impediment. Improving the economic status of the parents is only part of solution. This
must come along with education. Nutritional education is important to solve this problem which will remove ignorance and with removal of ignorance many of the ills can be overcome within financial constraints.

CHAPTER IX, THE SUMMARY. Summary incorporates the findings obtained during the present study and the conclusion drawn.

CHAPTER X, THE BIBLIOGRAPHY. Bibliography embodies the references mentioned in the entire text for the thesis.