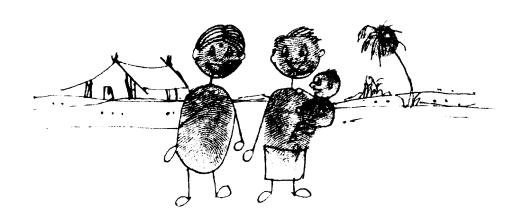
Health And Nutrilion



Food We Eat-1

OBJECTIVE

To help learners analyse their food intake and its adequacy for good health

Ask the participants the following questions

What do you usually eat ?

Bring samples of food items, which are locally available, which are required for energy, for building up and maintaining our body, and for protecting us from illness. (We may give examples like locally available cereals, pulses, fruits and vegetables that are inexpensive)

When the participants respond to the question on their daily food, list them down. Take out from the food samples brought, those items which the participants consume.

Once this is done, tell them about







FOODS THAT GIVE ENERGY

Cereals and grains rice, ragi, jowar (type of mullets), wheat, maize, potatoes, sweet potatoes, tapioca, bananas

FOODS THAT GIVE EXTRA ENERGY oil, butter, ghee, jaggery, sugar, hoiey

FOODS THAT ARE BODY BUILDING Pulses tur dhal, beans, bengal gram dhal, black gram dhal, green gram dhal, groundnuts, milk, curds, eggs, meat, fish

FOODS THAT PROTECT THE BODY FROM ILLNESS

dark green leafy vegetables drumstick, amranth, spinach, fenugreek and corn-ander leaves, dark yellow vegetables, tomatoes, fruits: papayas, amla (goose berry), orange, mango, lemon; meat, eggs, fish, chicken, jaggery, tamarind, ragi (a millet), and seaweed.



Arrange the four food groups. Ask the learners to take a look at these and compare them with what they eat — whether all the four food groups are represented in what their family eats. If some are missing, identify them. How often do they miss these foods?

The food intake may show more of staple foods, that is Group 1 and less of protein

foods rich in vitamins and

Ask the following questions

Are we eating right ?

How many of us are eating right?

s all may ot be eating right

If none of us eats right, what could be the reason ?

Help them discuss and come out with the causes of malnutrition (not eating right).



Reasons could be

- lack of knowledge of nutritious foods;
- low or irregular income of the family;
- high food prices;
- spending on foods and drinks which are harmful/buying wrong foods;
- non-availability of essential food items in the market;
- trouble in selling their produce =
 food or handicrafts;
- faulty habits in feeding children;
- certain taboos, long-held beliefs;
- intra-family feeding practices

Carry on the discussion further

- What actions can be taken to improve nutrition?
- What are the actions that could be taken on our own ?
- What are some of the actions that we need to take with the help of other agencies such as the government?

Actions that may be possible by people themselves

- organising nutrition Centres
- improving storage facilities
- growing nutritious fruits and vegetables in home gardens where possible or even as community gardens where possible.

Food We Eat-2

OBJECTIVES

- To help the learners analyse the difference in food intake of male and female members of the family
- 2. To plan some action to share food according to requirements

Ask the learners the following questions

- What is our practice in taking food?
- Do **men** and women eat together ?
 - What are our expectations from women, especially about preparing and serving food?
- Whose tastes, in general, prevails when deciding what to cook -- men's or women's ?
- Who serves food women or men ?
- Can women eat before men do ?
- When the quantity of food is less, who (men/women) get the larger share of the food?
- Are children given their due share ?
 - What are the beliefs/customs in this connection ?



It is the normal practice in the Indian homes for women to serve the available food to elder male members first, then children and others and then if anything

Discuss further with the following questions

- What do you normally eat ?
- What did you eat yesterday?
- What does your husband/wife eat normally?
- What do(es) your son(s) eat ?
- What do(es) your daughter(s) eat ?
- What does your father-in-law eat ? What does your mother-in-law eat ? What does your brother-in-law/sister-in-law eat ?

Put down the responses in two columns

Men/male children

Women/female children

- Are there any differences in the variety and quantity of food consumed by male and female members in a family ?
- If yes, why do we have differences ?
- What do we think about activities and food requirements ?

- What are the beliefs regarding feeding children ?
- What are the beliefs regarding feeding pregnant women ?

The findings, most probably, may show differences in intake of food between male and female members in a household. The more vigorous and strenuous the activity, the more is the food that is needed. Similarly, growing children need more food.

Discuss further with the following questions

- What are the activities of men ?
- What are the activities of women ?

What are the activities of boys ?

What are the activities of girls ?

Who does strenuous work ? Do women perform work as strenuous as that of men ?

List the various activities of men/boys, women/girls, e.g.

Men/boys Women/girls

Fishing Marketing

Repairing nets Preservation of fish

Marketing fish Cooking

Feeding the family
Looking after the

children

Ask further questions

- Should we really differentiate between men and women in the intake of food ?
- Do women need less food than men ?
- What should we do about it ?
- What should men do ?
- What should women do ?
 - . Men should get to know what is really available for women
 - . Recognising women's needs
 - . Sharing the available food according to the requirements $% \left(1\right) =\left(1\right) \left(1\right)$
 - . Special stress is to be laid on food needs of growing children
 - . Children should be introduced to weaning foods from the fourth month onwards

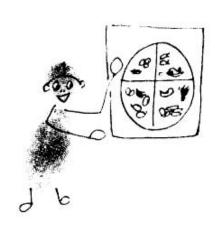




How Should We Eat?

OBJECTIVE

To help learners identify deficiency diseases and know the food requirements for prevention of the diseases



Prepare a food chart with pictures of the four groups of foods - foods that give energy, foods that give extra energy, foods that are body building, foods that protect the body from illness. Show learners the chart and ask them to identify what they eat daily. Or ask them to identify the ingredients of their daily food intake.

Ask them to observe how their daily food intake is distributed under the four groups

Show them the pictures/cases of deficiency diseases and ask them to identify the characteristics of the diseases.

Characteristics

MARASMUS (CALORIE DEFICIENCY)

- very much underweight
- very thin
- always hungry
- pot belly
- face of an old nian



KWASHIORKAR (PROTIEN DEFECIENCY)

- swollen hands and feet
- thin upper arm
- colour loss in hair and skin
- sores and peeling skin
- miserable looking
- swollen moon' face
- stopped growing



- cannot see in the dark
- white of the eye loses its sheen and begins to wrinkle
- cornea becomes dry and dull
- pale and transparent skin
- pale insides of eyelids
- pale gums
- shiny smooth tongue
- pale finger nails
- weakness and fatigue
- swollen face and feet
- rapid heart beat.
- shortness of breath
- feel like eating mud, dirt, chalk, etc.

VITAMIN E DEFICIENCY

- sores or cracks at the corners of the mouth
- skin dry and cracked

VITAMIN C DEFICIENCY

- bleeding gums
- red, swollen, painful gums that bleed easily



At the end of earn presentation or at the conduct a discussion with the questions that follow:

- What is the disease called in the local dialect
- What, according to the people in the area, are the causes of each one of the diseases ?
- What are the practices of people in curing or preventing each of the diseases?

A comparison of the learners food intake and the intake avoid food deficiency diseases may be brought home to them quantity-quantity)

i	Calorie	eat energy foods and energy foods in suffi- cient quantity;
?	Protein deficiency	foods that build the body
?	? ? deficiency	<pre>eat dark green leafy vegetables, yellow or red vegetables, milk eggs</pre>
iv	Anaemia -	ragi, green leafy vegetables, (drumstick leaves), jaggery, fish
V	Vitamin C deficiency	beans, dark green leafs vegetables, lemons,

The animator may help the learners understand that they can fight deficiency diseases by eating differently with what they can easily get in their village.

tomatoes, seasonal ?

In their menu it is necessary they should have

- i dark green leafy vegetables;
- ii milk, fish, (eggs, meat, when they can)
- iii jaggery, (brown suoar);
- iv seasonal fruits
- V seasonal vegetables:

Pregnancy

OBJE CTIVES

- For learners to understand the importance of the health of mother and child
- 2. For learners to be aware of the importance of pre-natal care
- 3. To help learners know about the care needed by pregnant women

Ask learners these questions

- . Do you think that pregnant mothers need special care ?
- What are some of the problems pregnant women face ?



Common problems in pregnancy are

- Nausea or vomiting morning sickness during the second or third month of pregnancy
- Burning or pain in the pit of the stomach or chest
- Swelling of the feet
- Low back pain
- Paleness and weakness (Anaemia and mal nutrition)
- Swollen veins
- Constipation

Continue the discussion by asking

- How can one deal with these problems ?
- What do you (women) do to tackle triese problems ?

The animator could go to a health clinic and gather information about this, so that the correct answers could be given.

Some of the general answers are given below

<u>Nausea and vomiting</u>: It helps to eat something dry before getting up; eat small amounts of food several times a day, avoid greasy foods

Burning or pain in stomach or chest : Small amounts of food at a time; sucking hard candy; sleeping with chest and head lifted up.

<u>Low back pain</u>: Can be helped by exercise; keeping the back straight.

Anemia and malnutrition: The pregnant women undergoes a lot of physiological changes and, hence, needs foods that help body-building, to build up the baby, foods that protect her from illness. She should eat beans, fish, groundnuts, chicken, milk, eggs, meat and dark green leafy vegetables. She needs iron pills with folic acid and vitamin C, especially when she cannot get enough food.

Swollen veins This is due to the weight of the baby pressing on the veins in the mother's legs. By putting the legs up as often as possible, this could be taken care of.

<u>Constipation</u> Drinking plenty of water. Eating food with lot of fibre, like fruits, bran. Getting plenty of exercise.

<u>Rest</u>: Pregnant women need more rest than other women.

Continue the discussion with the following question

Is there any other care that needs to be taken ?

Other care needed are

Generally it is better to avoid taking any medicines unless absolutely necessary.

Pregnant women should get immunised against tetanus. If the vaccination is given in the first month of pregnancy then it should be repeated in the 6th, 7th and the 8th months.

If a pregnant woman has had vaccination before, a booster in the 7th month is sufficient.

<u>Checking weight gain</u> There should be a 8 - 10 kg weight increase during the nine months of pregnancy

Keeping hygiene: Bathing regularly and keeping clean.

Our Family

OBJECTIVE

To help learners look at the family resources, family needs and desires in relation to the concept of a 'planned family'

Start the discussion by saying: "Today let us discuss about the 'family'. What comes to your mind when we think of 'family'? Ask the learners to respond to the question quickly and write their responses down on the board.

The answers may include the following nice place, warm, noisy, food, children, fighting, husband, wife, worry, illness, father mother, parents, rest, sleep, grand parents, marriage, etc.

Lead discussion to bring out 'rneanng' of Family by the members of the group. Go on to ask

Who are the members's of your family?

- · How many of them earn ?
- What is the contribution each member makes to the family?
- How many are dependent on others (for food, shelter, etc.)?
- Who share the major burdens in your family
- Would you consider your family too large/small?
 What is the advantage of having a bin family or a smal | family?







The answers on the advantages of big and small families may include the following

Big family

- warm feeling and fun seen ity through each of the members taking care of one another
- in many people to help
 in work/occupation,
 thus increase in
 income

Small fam ily

- manageable not much food a
- less noise
 argument (probably among children)
- · less food to cook
- less work
 fits in a small
 house better

The discussion should bring out the point that each family has its own preference depending on its situation.

Continue discussion with these questions

Did we plan the size of our present family?

IS it possible for one to plan the size of the family according to ones desire ?

What would be the difficulty ?



Some of the traditional views that go against small family

- · early marriage
 - parents' wish
- children are god's gift
- male children are preferred to female children
- infant mortality
- big family is a status symbol _ more working members in the family children give security

The animator can continue discussion by asking what a 'planned family' can probably bring about ?

Some of the possible responses are

- improved health
- improved education
- improved health of women
- availability of adequate resources better food and clothing
- better achievement of goals in life reduced infant mortality

better understanding between busband and wife





Planned Family

OBJECTIVE

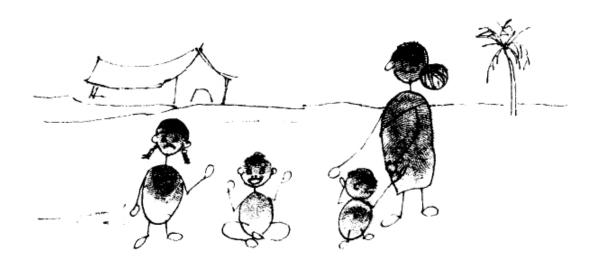
For learners to critically look at problems which may arise from an 'unplanned family'

This lesson should be preceded by the lesson 'OUR FAMILY'

Read out the story of 'Prema' given below to learners

ISTORY

Prenia the first daughter of Munuswamy and Manonmani, married Sunder at the age of 15 against her parents' wishes. The objection of the parents was that Sunder did not have a steady job and also that he belonged to another caste. It is now 3 years since Prema got married. She had her first child, a girl, within a year of her marriage. She gave the baby artificial feeds from birth and the child became malnourished by the time she was 4 months old. She conceived within 6 months of the birth of the first one. The second child was breast fed for 3 months and later fed on artificial feeds. Soon after the



birth of the second child, the first daughter was sent to Prema mother, as Prema found it difficult to manage both the children. But the child was not well taken care of there and its health worsened. Prema had her third child in the next year. Both the: first and the second child were severly malnourished by then. The second child died at the aye of one because of malnutrition, and diarrhoea. Prema's husband deserted her after her third child was born. Now she works as a maid to earn her living. Prema was hesitant to undertake family planning measures even though she knew all about them. She felt insecure and that her husband would not take care of her. She thought that the children were her only future.

Read **slowly and stop** or reread if the learners ask. When finished with the story ask these questions

- How do you feel about the story?
- What were Prema's problems ?
- What caused her problems ?
- What do you think could have saved the family from those problems ?

The discussion should have brought out these important points

- Prema probably married too young, when she and Sunder were not ready. He did not have a job, she was not physically and mentally mature.
- She and her husband had children too early when they were not mentally and financially ready.
- She had too many children in too short a time. She could not, therefore, take good care of them. She had to send away the first one who was not, therefore, well taken care of.
- Her own health was poor because of too many pregnancies, too close to one another, too much work, etc.

What could have saved her from all these problems ?

The answers would probably include:

- She could have waited until the job was firm so that she could have been sure of having enough resources to take care of her family.
- She could have probably used some family planning measures to prevent her from having children until she was ready.
- She could also have adequately spaced the children so that they could have had enough food (breast feeding and supplementary food) and attention needed to grow up healthy and strong.

continue discussion by asking the learners to think about the previous discussion on "family" and the story of Prema and ask :

Do you see the relationship of Prema's story and the idea of a 'planned family?'

What do we mean by a planned family?

The discussion should gradually bring out some of these points :

- . the number of children should be according to the need to fulfill the task the family sets out to do;
- . the number of children should be within what the parents can afford -- for food, clothing, education;
- . children should be so spaced that the health of mother and child are not affected;
- . the balance between the available resources and needs of all members of the family should be maintained.
- . marriage should take place when the couple is physically and mentally ready for it.

Health Clinic

OEJECTIVES

- 1. To help learners be aware of the importance of health in the community
- help learners realise that the health services organized by the government are for their welfare and that they are delivered to them free of cost

Present this true story

Malar, a girl **cf** 12, was limping along the village street. Seetha, who was a newcomer to the village (she was visiting her relative in the village for a few days), met her and was concerned and asked her what WaS wrong with her. Malay said that a sharp thorn pricked her on the right foot the day before and her foot was swollen and she was finding it difficult to put her foot down. Hence the limp. not you go to Guns, the health worker, residing in the village?" asked Seetha. Molar quickly said, "We do not have the money to give her." "Does she charge you for examining and treating the foot?" "Yes, she does. to have at least two to three rupees." "Yesterday, Ramakka, your neighbour, delivered a baby. She was there. Do you think she would have charged them?" Molar replied, "Yes, she charged them Rs 50. Otherwise, she would not have attended." At that time Kathayi came along and enquired about what was going on. She narrated her experience in the Primary Health Centre, where she went to get her daughter deliver her baby. She had to nay everyone around. It cost her more than Rs 100. Seethe asked, "Everyone's experience seems to be to pay for the medical services given at the PHC level or at the Don't you know that the services are free? village level. The health workers are there to look after your health and that of the village community?"





Raise the following questions for the learners to discuss:

- . Do you seek medical help from health workers ?
- . How frequently do you go to them ?
- . Do you think what happened to Malar and Ramakka happens to all ?

What have been some of your other experiences at the health clinic ?

The learners could be asked to role-play here the various kinds of experiences they have had at the health clinic

Do you know the responsibility of the health personnel in the PHC and of the health workers at the village level ?

Responsibility of the health personnel : A primary Health Centre (PHC) is meant for the population (about 100,000) of a block. The health worker is for a population of 5,000 and his/her job is to help people :

- 1. To prevent diseases through promotion of nutrition education and immunization programmes ;
- To help carry out deliveries in the village look after pre-natal and post-natel mothers;
- 3. To prevent illness through helping people maintain personal and environmental cleanliness;
- To treat illness which are mild and to refer to the doctor those illnesses that require special attention.

The doctor in the PHC and his staff, the pharmacist the nurses, the laboratory technician, the health inspector, the block extension educator, are there to serve the people in prevention of diseases, treatment and cure of illness and promotion of better health care in the community. The services are free to all people. Pepple need not be afraid of asking for medical help as and when it is needed.

- Do you know your rights in relation to the health services available in PHCs and at the village level ?
- . What can we do to ensure that the medical services are made available to us ?

You could organise meetings of the village health committees and invite doctors of the PHC or the Health Supervisor/worker to come and talk to the villagers.

. Use these opportunities to get such programmes as health check-up, immunization, etc., done.

Request house visits by health workers.

