

Diet and Nutritional Status of Tribal Population in ITDA Project Areas of Khammam District, Andhra Pradesh

A. Laxmaiah, K. Mallikharjuna Rao, R. Hari Kumar, N. Arlappa, K. Venkaiah and G.N.V. Brahmam

National Institute of Nutrition, Indian Council of Medical Research, Jamai-Osmania, (P.O.), Hyderabad 500 007, Andhra Pradesh, India

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ABSTRACT Tribal populations are socio-economically disadvantaged compared to other population groups. They have different health problems owing to the variability in their geographical, socio-economic development and cultural characteristics. At the request of the project officer, a cross sectional survey was carried out to assess the diet and nutritional status of tribal population in ITDA, Bhadrachalam in Khammam district of Andhra Pradesh. A total of eight hundred households in twenty villages from five *Mandals*, were covered for survey. The study revealed that a majority of the households were living in *kutchas* houses. The major occupation of the head of the HH in a majority of the HHs was either agricultural labour or other labour. About 72% of the men and 88% of their women counterparts were illiterate. In general at household level, the average consumption of all the foods except cereals and millets were below the recommended level. The average intake of all the nutrients was lower than the RDA as well as the figures reported in NNMB tribal survey. The extent of deficit was highest with respect to vitamin A (83%), followed by riboflavin (64%), iron (59%), and total fat (47%). Protein calorie adequacy status revealed that about half of the HHs (52%) were consuming adequate amounts of both protein and energy, while about 21% were consuming inadequate amounts of both the nutrients. The prevalence of undernutrition (<Median –2SD of weight for age) among 1-5 years children were lower (65.4%) than that reported for the Tribes in the State of Andhra Pradesh (68.8%). Among the adolescents (12-17 years), about 45% of boys and 21% of girls were undernourished. The prevalence of Chronic Energy Deficiency (CED) among adults was about 51%. Breast-feeding practices revealed that majority of the mothers initiated breast-feeding within 24hrs of delivery. About 76% of the children started receiving the complementary feeding from the age of 4-6 months. About 93% of children (12-24 months) were fully immunized and 90% received at least one dose of massive dose vitamin A during previous one year. However the study indicates the need to control the micro nutrient deficiencies through dietary diversification by promoting home gardening. Since the prevalence of morbidity was higher in this population, effort should be made to improve the environmental sanitation and personal hygiene.