

Draft of Manuscript Presented at the Service-Learning Conference Organized by CHRIST University, Bengaluru.

Community-Based Assessment and Awareness on Malnutrition in Nidamanuru Village: A Service Learning Approach

P. Bhavani Head, Department of Food Science and Technology,

Maris Stella College, Vijayawada

Abstract

Malnutrition remains a critical public health challenge in rural India, affecting vulnerable populations such as children, pregnant women, and lactating mothers. This service-learning project was conducted in Nidamanuru village, NTR District, Andhra Pradesh, to assess the prevalence and causes of malnutrition and to implement awareness-based interventions. The study involved household surveys, nutrition education sessions, food demonstrations, and community engagement activities such as skits. The findings revealed poor dietary diversity, lack of awareness, and underutilization of government schemes. The project successfully enhanced community awareness and promoted positive behavioral changes. This study highlights the importance of experiential learning in addressing real-world health issues while building student competencies in communication, research, and community engagement.

Keywords

Malnutrition, Service Learning, Rural Health, Nutrition Awareness, Community Engagement, ICDS

1. Introduction

Malnutrition is a multifaceted problem that includes undernutrition, micronutrient deficiencies, and imbalanced dietary intake. In India, rural populations are particularly vulnerable due to socio-economic constraints, limited access to healthcare, and lack of awareness regarding balanced nutrition.

Service learning integrates academic knowledge with community service, allowing students to apply theoretical concepts in real-life situations. This project was undertaken in Nidamanuru village to assess malnutrition and provide sustainable, community-based solutions through awareness and education.

2. Objectives

2.1 Learning Objectives

- To understand the causes and effects of malnutrition in rural settings
- To gain experience in conducting surveys and field research
- To improve skills in community engagement and health education

- To plan and implement awareness programs effectively
- To collaborate with local institutions and apply classroom knowledge

2.2 Learning Outcomes

- Developed understanding of rural nutrition challenges
- Gained experience in organizing awareness campaigns
- Improved communication and teamwork skills
- Learned to adapt health education to different literacy levels
- Contributed to solving a public health issue

3. Study Area: Nidamanuru Village

Nidamanuru is a semi-urban village located in the NTR district of Andhra Pradesh, near Vijayawada. The population primarily depends on agriculture, daily-wage labor, and small businesses.

The village has basic facilities such as schools, Anganwadi centers, and health sub-centers. However, inconsistent utilization of these services and lack of awareness contribute to nutritional issues, particularly among children and women.

4. Methodology

4.1 Study Design

A descriptive community-based study was conducted using surveys, observations, and interactive sessions.

4.2 Sample Size

Over 50 households were surveyed.

4.3 Data Collection Tools

- Structured questionnaire
- Direct observation
- Interviews with mothers and caregivers

4.4 Areas Assessed

- Dietary patterns
- Nutritional knowledge
- Maternal and child health practices
- Awareness of government schemes
- Hygiene and sanitation practices

5. Community Service Activities

5.1 Household Surveys

Collected data on food habits, income, and awareness levels to identify risk groups.

5.2 Awareness Programs

Conducted sessions in schools and Anganwadi centers focusing on:

- Balanced diet
- Hygiene practices
- Malnutrition symptoms

5.3 Food Demonstrations

Demonstrated preparation of low-cost nutritious meals using local ingredients.

5.4 Counseling Sessions

Provided personalized dietary advice to mothers and caregivers.

5.5 Collaboration

Worked with Anganwadi workers, ASHA workers, and local leaders.

5.6 Educational Materials

Distributed pamphlets and posters in Telugu.

6. Key Findings

- Predominant consumption of carbohydrate-rich diets (mainly rice)
- Low intake of protein and micronutrient-rich foods
- Poor awareness of balanced diet concepts
- Limited utilization of Anganwadi and health services
- Presence of food taboos during pregnancy and childhood
- Hygiene-related issues contributing to infections

7. Problems Identified

1. Poor nutritional knowledge
2. Limited dietary diversity
3. Child undernutrition
4. Lack of awareness of government schemes
5. Infrequent healthcare utilization
6. Cultural food taboos

7. Economic constraints
8. Poor hygiene and sanitation
9. Limited decision-making power among women

8. Intervention: Skit Performance

Title: *Aaharame Arogyam (Food is Health)*

A skit was performed to spread awareness in an engaging manner. It depicted a family suffering due to poor nutrition and the positive changes brought by adopting a balanced diet and utilizing health services.

Impact

- Improved understanding among villagers
- High engagement and participation
- Effective communication for low-literacy groups

9. Impact of the Project

- Increased awareness about nutrition and hygiene
- Improved interest in Anganwadi services
- Behavioral changes in food choices
- Positive response from mothers and caregivers

10. Challenges Faced

- Initial reluctance of villagers
- Deep-rooted cultural beliefs
- Limited participation of men
- Time constraints

11. Recommendations

Short-Term

- Conduct regular awareness sessions
- Organize health check-up camps
- Promote Anganwadi services

Long-Term

- Encourage kitchen gardening
- Strengthen nutrition programs
- Train local volunteers
- Promote government scheme utilization
- Address food myths and taboos

12. Conclusion

The service-learning project in Nidamanuru village provided valuable insights into rural malnutrition and demonstrated the effectiveness of community-based interventions. Through awareness programs, surveys, and participatory activities, the project contributed to improving knowledge and promoting healthier practices.

Sustainable change requires continuous engagement, collaboration with local institutions, and empowerment of the community. Service learning proved to be an effective approach in bridging academic knowledge with real-world impact.

References

1. World Health Organization (WHO). (2020). *Malnutrition*. Retrieved from <https://www.who.int>
2. Ministry of Women and Child Development, Government of India. (2018). *Integrated Child Development Services (ICDS)*
3. National Family Health Survey (NFHS-5), India Report (2019–21)
4. UNICEF. (2019). *The State of the World's Children Report*
5. FAO. (2013). *Guidelines for Measuring Household and Individual Dietary Diversity*
6. Poshan Abhiyaan, Government of India. (2018). *National Nutrition Mission*
7. K. Park. (2017). *Park's Textbook of Preventive and Social Medicine*