

## A STUDY TO ASSESS SOCIO-DEMOGRAPHIC VARIABLES OF MOTHERS REGARDING CAUSES AND PREVENTION OF CALCIUM AND VITAMIN D DEFICIENCY DISORDERS IN CHILDREN BETWEEN RURAL AND URBAN AREAS OF DISTRICT HOSHIARPUR (PUNJAB)

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### ABSTRACT

Vitamin D is in maximum instances made in the pores of the skin with the useful resource of publicity to daylight. That is a top-notch component because most of the food consists of no or little eating regimen d truly. Food regimen D comprises oily fish, cod-liver oil, egg yolk, and liver. The precept motion of nutrients D is to help calcium and phosphorus in our diet, get absorbed into the gut. A quantitative research approach was used for the current study. A non-experimental comparative research design was employed for this study. The present study was conducted in selected rural and urban areas of the district of Hoshiarpur, Punjab. The target population of this study was the Mothers of children between the ages of 10 yrs. in selected rural areas. The study's sample size was comprised of 150 Mothers of children between the age of 10 yrs. A purposive sampling technique was used. The results show that According to age of the mother, in rural area maximum 49(32.7%) mothers were of 26-30 years, According to education of mothers, reveals that in rural area maximum 103(68.7%) was mothers had secondary education, According to Occupation of mothers, reveals that in rural area maximum 127 (84.7%) mothers were house wife, According to Religion of mother reveals that in rural area 134(89%) mothers were belong to Sikh families, According to type of family, maximum 137(91.3%) mothers were from nuclear family, According to Monthly Income, reveals that 51(34.0%) mothers had <10,000 monthly income, According to Assistance to parents, reveal that maximum 128(85.3%) were grandparents, According to Source of information, reveal that maximum 139(92.7%) mothers get information from mass media, According to Marital status, reveal that in rural area the maximum 136(90.7%) were married, According to age of children, in rural area maximum 47 (31.3%) children from 8-10 year.

**Key Words:** Component, regimen, cod-liver, phosphorus.

### ABOUT AUTHORS:



Ms. Sukhwinder Kaur is Ph.D. Scholar at Himalayan University, Itanagar, Arunachal Pradesh, India. He has published papers in various National and International Journals.



Author Dr. Parampal Kaur Cheema is an active researcher with many publications in his name. She has attended and organized various National and International conferences and has given extensive lectures.

**INTRODUCTION**

Children are the most valuable possessions of mankind and a unique gift to the world, WHO has loads of capability inside and can be a superb useful resource of the state if raised and molded in a wonderful manner. The dad and mom scenario is extremely good for the fitness of a developing little one. Physically a toddler is related to highbrow and social improvement. Maximum of the children have now not been included over years and they stay as a hard and fast that is now maximum willing, based totally and least effective in India. Nutrients d is a vital or fat-soluble vitamin this is crucial for particular health. Like other nutrients we do get diet d from food. (Vidya R 2004)

Vitamins D is in maximum instances made in pores of skin with the useful resource of publicity to daylight. That is a top-notch component due to the fact; maximum of the food consists of no or little eating regimen d truly. Components that include food regimen D encompass oily fish, cod-liver oil, egg yolk, liver. The precept motion of nutrients D is to help calcium and phosphorus in our diet, get absorbed into the gut. Calcium and phosphorus are important to hold the bones healthy and sturdy. (Institute of Medicine, food and nutrition Board 2010)

Calcium is a mineral that is critical for plenty of factors of health, together with the health of bones, teeth, and everyday coronary heart rhythm. Calcium is likewise required for muscle contractions and relaxation, hormone features and nerve stimulation, and blood stress display. Calcium wants to be ingested every day and determined successfully which allows you to keep the most beneficial health. Ingredients that obviously include calcium include dairy products and, inexperienced leafy greens, seafood, dried beans, and nuts. Immoderate dietary calcium consumption is essential for toddlers, youngsters, and teenagers. Therefore food plan D is wanted for ordinary boom and development in addition to the preservation of the skeleton device. Furthermore, it has a crucial position in a non- skeleton-associated physiological manner. (David M Higgins MS et al 2012).

**TITLE**

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**OBJECTIVES**

To assess socio-demographic variables of mothers regarding causes and prevention of calcium and vitamin d deficiency disorders in children between rural and urban areas

**REVIEW OF LITERATURE**

Anuradha Khadilkar et al. (2018) completed a flow-sectional study to assess the level of vitamin D among children in rural and semi-rural areas of Pune. The study sample was 474 children. The results found that, the similarity between boys and girls with no significant differences found in age, height, weight, BMI, and anthropometric Z-scores. The mean serum 25(OH) D concentration for the children was  $58.5 \pm 10.3$  nmol/L and found similar concentrations between the genders. In children 19% sunlight exposure was <2 hours, 51% between 2 hours and 2.5 hours, and 30% of more than 2.5 hours. The diets of the children were deficient in calcium and had low calcium to phosphorus ratio was 0.4:1. The conclusion that, the children did not consume any dietary source of Vitamin D.

Shanti Regmi, Ananda Prasad Regmi, et al. (2017) conducted a retrospective study to assess the incidence of calcium and vitamin D deficiency among youngsters in CMC. Study sample size was 108 youngsters ordinary .74.1% (80) patients had 25(OH) D ranges decrease than 30 ng/ml with 27.8% having extreme deficiency (< 10 ng/ml), 28.7% deficiency (10-19 ng/ml) and 17.6% insufficiency (20-29 ng/ml) class. The prevalence became positioned better in ladies (95.2%), despite the truth that the difference in prevalence among sexes became now not statistically remarkable (P –costzero.243). it was concluded that an excessive prevalence of low eating regimen D reputation (deficiency/insufficiency) located most of the pediatric population (all pediatric age businesses) indicates a need for similarly national degree have a observe to find out the actual prevalence of this nutritional deficiency.

Basatemur E, Sutcliffe A (2015) done a capacity have a look at to estimate the superiority of hypocalcemic seizures secondary to VDD in youngsters inside the UK and Ireland, and describe the demographic and medical features of times amongst children aged 0-15 years. results found out that 91 showed or probably instances had been said, equating to a mean annual occurrence of 3.49 in step with million children age zero-15 years (ninety 5% CI: 2. eighty-one-4.26). occurrence grows to be extensively more in character person adult males in evaluation to girls, in infants compared to older kids, and in children of South Asian or Black ethnicity in comparison to children from white ethnic backgrounds. for that reason a look at concludes that current-day implementation of public health insurance in the UK is not a success in preventing youngsters from developing certainly one of the acute manifestations of VDD.

Tahani Khalil (2014) completed an epidemiological study to observe rickets among children (under 12 months) in Saudi Arabia. The study sample size was 114 children. The outcomes of this study showed that the prevalence of rickets was 35% and all rachitic babies have been breastfed in contrast with 17.3 % in non-rachitic infants. The study concluded that rickets became quite existing among Saudi kids.

#### METHODOLOGY

A quantitative research approach was used for the current study. A non-experimental comparative research design was employed for this study. The present study was conducted in selected rural and urban areas of the district of Hoshiarpur, Punjab. The target population of this study was the Mothers of children between the ages of 10 yrs. in selected rural areas. The study's sample size was comprised of 150 Mothers of children between the age of 10 yrs. A purposive sampling technique was used.

#### RESULTS

##### Frequency and Percentage Distribution of Sample characteristics N=300

Demographic Variables	Rural(150)		Urban(150)		df	x
	N	%	N	%		
<b>1) Age Of Mother</b>						
a) <20	32	21.3	12	8.0	3	19.119*
b) 21-25	43	28.7	29	19.3		
c) 26-30	49	32.7	63	21.0		
d) >31	26	17.3	46	15.3		
<b>2) Education Of Mother</b>						
a) Illiterate	21	14.0	7	4.7	4	10.791*
b) Secondary	103	68.7	103	68.7		
c) Sen-Secondary	19	12.7	27	18.0		
d) Graduate	6	4.0	9	6.0		
e) Post-Graduate	1	0.7	4	2.7		
<b>3) Occupation Of Mother</b>						
a) House Wife	127	84.7	69	46.0	3	56.158*
b) Labourer	18	12.0	34	22.7		
c) Service	3	2.0	21	14.0		
d) Self-Employed	2	1.3	26	17.3		
<b>4) Religion of Mother</b>						
a) Sikh	134	89.3	113	75.3	3	17.042*
b) Hindu	16	10.7	23	15.3		
c) Muslim	0	0	11	7.3		
d) Christian	0	0	3	2.0		
<b>5) Type of Family</b>						
a) Nuclear	137	91.3	116	77.3	1	11.126*
b) Joint	13	8.7	34	22.7		
<b>6) Monthly Income</b>						
a) <10,000	51	34.0	28	18.7	3	12.565*
b) 10,000-15,000	33	22.0	55	36.7		
c) 15,001-20,000	37	24.7	41	27.3		
d) >20,001	29	19.3	26	17.3		
<b>7) Assistance to Parents</b>						
a) No Assistance	12	8.0	47	31.3	3	53.244*
b) Grand Parents	128	85.3	69	46.0		
c) Siblings	10	6.7	27	18.0		
d) Servant/Ayah	0	0	7	4.7		
<b>8) Source of Information</b>						
a) Print Media	9	6.0	16	10.7	2	3.619 <sup>NS</sup>
b) Mass Media	139	92.7	129	86.0		
c) Health Personal	2	1.3	5	3.3		

9) Marital Status						2	14.132*
a) Married	136	90.7	112	74.7			
b) Divorced	8	5.3	16	10.7			
c) Widow	6	4.0	22	14.7			
10) Age of Children						3	17.815*
a) <1 Year	29	19.3	10	6.7			
b) 2-4 Year	37	24.7	51	34.0			
c) 5-7 Year	37	24.7	56	37.3			
d) 8-10 Year	47	31.3	33	22.0			

The results show that According to age of the mother, in rural area maximum 49(32.7%) mothers were of 26-30 years, According to education of mothers, reveals that in rural area maximum 103(68.7%) was mothers had secondary education, According to Occupation of mothers, reveals that in rural area maximum 127 (84.7%) mothers were house wife, According to Religion of mother reveals that in rural area 134(89%) mothers were belong to Sikh families, According to type of family, maximum 137(91.3%) mothers were from nuclear family, According to Monthly Income, reveals that 51(34.0%) mothers had <10,000 monthly income, According to Assistance to parents, reveal that maximum 128(85.3%) were grandparents, According to Source of information, reveal that maximum 139(92.7%) mothers get information from mass media, According to Marital status, reveal that in rural area the maximum 136(90.7%) were married, According to age of children, in rural area maximum 47 (31.3%) children from 8-10 year.

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