

## **Evaluation of a Mid-Day Meal Program for Primary School Children in the State of Chhattisgarh**

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**ABSTRACT** Malnutrition is widely prevalent among Indian children as well as in other developing countries. Malnutrition affects physical as well as mental growth and also prevents a child developing into a fully functional adult. The Mid Day Meal (MDM) program was launched on 15<sup>th</sup> August 1995. It was based on one meal provided to the children, who are attending elementary school (primary school). This program was started with an objective of universalizing of education by enrolment, attendance and nutritional status. Several states in our country are running this program fully or partially. In Chhattisgarh, this program was started in July 2001. The present work was carried out on 400 children studying in Government primary schools of Raipur city. Out of 400 students, 271 were girls and 129 were boys. All the subjects were analyzed for nutritional status (weight, height); haemoglobin estimation was done by cyanmethemoglobin method to find out the anaemic status. The clinical examination was carried out as an indicator of deficiency symptoms of diseases. Other parameters like enrolment, attendance, and cost analysis were also examined to analyze the impact of program. The mean weight of experimental group was increase by  $20 \pm 5.17$  kg to  $22.87 \pm 5.02$  kg (14.34 percent increase), whereas the mean height increased by  $117.77 \pm 12.64$  to  $119.01 \pm 12$  cm (6.48 percent). The mean haemoglobin level was increased by 6.49gm/dl to 11.11gm/dl. The mean weight of experimental girls (56) was increased by 19.76 kg to 22.74 kg. In the present study 42.5 percent students had dull and dry hair, 53.25 percent had teeth carries where as 32.25 percent had dull and dry eyes. The enrolment of students was increased 2548 to 2793 (9.62 percent). 55 percent (220) children had attendance more than 90 percent. The result of the work shows improvement in nutritional status and haemoglobin level. Major advantage of the program was improved enrolment and attendance, which is the most beneficial aspect. In the second phase of the study one school was selected for nutrition education. One months' consecutive training was organized for the children to eat their meal hygienically. The children were encouraged to develop habits like (cleaning hands before meals, use of clean utensils, avoiding wastage of food, etc.). The result shows positive impact but it required continuous monitoring and guidance. Centralise kitchen made good response for school authority as well as students. The overall results are good but some untouched area required much attention for the success of this program.