



Nutritional knowledge, attitude and practice and its impact on health among female workers in apparel industry in Bangalore

Nisargapriya TS

Research Scholar, Department of Studies and Research in Social Work, Tumkur University, Tumkur, Karnataka, India

Abstract

Malnutrition is a common health problem among women throughout the world especially among the low economic groups. The present study was carried out in Creative garment industry Bangalore designed to find out the health and nutritional status of female workers. Nature of the study is descriptive, hence descriptive research design was adopted, with help of simple random sampling technique. For the convenience of the study 50 respondents were selected as sample size. Both primary and secondary method of data collection were adopted, self-prepared Interview schedule was administered to collect the primary data. The analysis was carried out by applying simply statistical percentage calculation method. The result found that, there is a lack of knowledge on nutrition and its consumption practices. Consumption of fruits and vegetable salads was very low among them. There is lack of nutritional information sources. Milk products consumption and junk food consumption was moderate. Tea/coffee was highly consumed by almost all women. Severe body pain was felt by the workers during the work, 50 percent of the women were moderately malnutrition. There is a slightly chance of increased health risk among these women. Therefore it can be conclude that there is a great need of social work intervention for promoting health and nutritional awareness.

Keywords: malnutrition, female workers, nutrition

Introduction

Women with poor health and nutrition are more likely to give birth to unhealthy babies. With poor health they are also less likely to be able to provide food and adequate care to their children. While malnutrition is prevalent among all segments of the population, poor nutrition among women is much more as it begins at infancy and continues throughout their life. Nutrition is very much essential for better health. Women need more nutritious food in every stage of development like puberty, pregnant and lactation time old age etc., they are most vulnerable physically due to less nutritional intake. Because of women's reproductive role women need more nutrition (Md.Riaduzzaman, 2017) [7].

Especially, women who work in garments industry, (over 85% female workers) suffer from malnutrition, ill health, reproductive health problem and various community diseases, which they cannot address with low income. Pregnant female workers suffer from malnutrition and anemia along with other serious complication (Fatema Tania, 2014) [3]. This situation makes the workers very vulnerable to different kinds of health-related problems (Md.Golam Hasnaian, 2014) [6].

The current study was systematically planned and executed to know the knowledge, attitude, and practice of nutrition among working women and its impact on their nutritional health at Creative Garments Bangalore.

Review of Literature

The low educational levels and poor economic status of female garment workers make them much more vulnerable to illnesses, and the study showed that they have high morbidity, poor nutrition, and poor healthcare-seeking behavior, so

policy makers and owners should take notice and proactively provide sufficient incentives and awareness programs to help correct the healthcare and economic conditions their workers face (Md.Golam Hasnaian, 2014) [6].

Readymade Garment (RMG) Sector in Bangladesh has been playing a vital role in creating employment opportunity for the rural marginal people for the last two decades. At present 5,100 garment factories are operating in this country and 3.6 million workers are working there in which more than 80 percent of them are female. From the beginning it is largely apparent that the health status of the female garment workers is not well enough to do their work properly. Keeping this in mind, the study was conducted to find out the health status of the female workers. In this study, 200 female workers of Bangladesh were interviewed to identify the major diseases they experienced. The study reveals that the majority of the female workers in the garment sector suffer from the diseases like problems in bones, abortion complexity, dermatitis, back pain, eye stain, pruritus, malnutrition, respiratory problems, hepatitis (Jandice), gastric pain, fatigue, fever, abdomen pain, common cold, and helminthiasis. The policy makers and other concern bodies should take necessary measures to ensure good health of the garment workers. It will help female workers to be more productive and their contribution to the country will be enhanced health Status of the Female workers in the Garment Sector of Bangladesh (Shaheen ahmed, 2014) [10].

Paul- Majumder conducted a study on the physical and mental health status of garment workers and how problem affect labour productivity, competitiveness of the garment industry in the world market and the working life of the workers, particularly of female workers. It showed that various illnesses

and diseases were widespread among the garment workers. A large number of workers were found to continue their work even they were suffering from various diseases and illness. Though the garment workers were very young they suffered from anemia, female diseases, dysentery, etc (Paul-Majumder, 2003) [8].

Rational of the study

Adequate and proper nutrition is the foundation stone for a good human life and to achieve a status of wellbeing. Nutrition and health are the two faces of the same coin. Nutrition, if not adequate can cause hindrance in the person's ability to reach his true potentials. To maintain good health, ingesting a diet containing all the essential nutrients in the right amount is very important and required but unfortunately it is most neglected part of health among women working in garments. The poor living conditions, low income levels and lack of nutritional knowledge lead to malnutrition. There are studies conducted on the problems of women employees but, there are no specific studies have been done to look at the dynamics of nutrition and health at garments industries of Bangalore district. Bangalore is the hub for garments industry where female garment workers are the key workers in this sector. Regrettably, they are paid very little; in fact, their pay is lowest. This circumstance makes the workers more vulnerable to different kinds of health-related problems, especially malnutrition. Therefore the current study is focused on finding out the knowledge, attitude and practice of nutrition among working women and also to determine their nutritional status, and various kinds of health-related problems. The study, also suggest the social work intervention to address the health problem among the female worker in the garments industries.

Objectives of the Study

1. To know about the socio and economic condition of the respondents.
2. To analyse the knowledge, attitude, and practice of Nutrition among working women at creative garments.
3. To assess the nutritional health status of women working in garments

Research Methodology

The present study was carried out in Creative Garments Bangalore. "Descriptive Research Design was adopted by applying 'Simple random sampling method. Among 550 women employees 50 women employees were selected as sample size during the year 2016-2017. Both primary and secondary method of data collection was adopted. Primary data was collected with help of structured questionnaire followed interview. The questionnaire was prepared in considering the information about health and nutritional profile, diet habits along with socio-demographic characteristics and anthropometric measures (BMI) according the calculation of Indian council of Medical Research (ICMR, 1981) [4]. The field work (data collection) was conducted from January to May 2017 in Creative Garments Bangalore. The

respondents were selected consecutively on their consent to participate in the study. The interview scheduled was administered, to collect the primary data by the respondents. The collected data was processed and analyzed by using simple statistical percentage method.

Results and Discussion

The collected data were entered into the statistical software and presented here as a frequency table.

Table 1: Socio-Economic condition of the respondents

Sl. No	Particulars	Variables	Frequency	Percentage
1	Age	18 to 25	23	46%
		26 to 30	13	26%
		31 to 40	11	22%
		41 above	3	6%
2	Marital status	Married	39	78%
		Unmarried	11	22%
3	Educational Qualification	Illiterate	3	6%
		Primary education	17	34%
		High school	19	38%
		PUC	9	18%
		Degree	2	4%
4	Monthly Salary	Below 5000	4	8%
		6000 to 10000	38	76%
		11000 to 15000	4	8%
		16000 and Above	4	8%

The above table indicates the respondents Socio-economic status, majority 46 per cent the respondents under the age group of 18 to 25 remaining 26 per cent of the respondent were belong to the age group of 26 to 30 years and 22 per cent of the respondents were aged about 31 to 40 years and per cent of the respondents were 41 to above years. The majority 46 per cent of the respondents were at the age of 18 to 30 years. Majority 78 per cent (39) the respondents were married followed by 22 per cent (11) unmarried. The majority 4 per cent of the women are married, they have to manage the work in both the company as well as in their home.

The Majority 38 per cent (19) of the respondents completed up to "high school" education and 34 per cent (17) of the respondents were educated up to "primary level" and 18 per cent (9) of the respondents were had "P.U.C" and 6 per cent (3) of the respondents were "illiterate" and 4 per cent (2) of the respondents were completed education up to graduation, the majority of the respondents have average school education. Most of the women education is below matriculation. Majority 80 percentage of the respondents were drawing the salary between 6000 to 10000, followed 8% of the respondents were drawing below 5000 rupees, and 8 percentage of the respondents receiving 11000 to 15000 rupees and remaining 8% of the respondents were getting 16000 rupees and above as salary. It was analyzed that majority of them were receiving average 6000 to 10000 rupees as a salary. It was clearly understood that, the income of the respondents is low. Due to their low educational qualifications they not able to occupy the higher positions in the company.

Table 2: Source of drinking water.

Sl. No	Drinking water	Frequency	Percentage
1	Street tap	12	24%
2	Own tap	20	40%
3	Mineral water	15	30%
4	Others	3	6%
Total		50	100%

The above table reveals the source of Drinking water, which has played vital role in health of the women. Majority 40 per cent (20) of the respondents had individual tap connection. And 30 per cent (15) of the respondents were using mineral water which they have to pay 30 rupees per can it contains 20

liter of water. Usually fifteen cans of water they buy in a month. And 24 per cent (12) of the respondents were using street tap, and 6 per cent (3) of the respondents were using other source of water the majority of the 40 per cent (20) of the respondents use own tap.

Table 3: Shows the Respondents Knowledge attitude and practice towards the Nutritional Health

Sl. No	Particulars	Variables	Frequency	Percentage
1	Type of Diet	Vegetarian	30	60%
		Non- vegetarian	12	24%
		Vegetarian+ egg	8	16%
2	Dietary restriction	Yes	16	32%
		No	34	68%
3	Skipping breakfast	No	18	36%
		Yes	32	64%
4	Consumption of Vegetables as Salad.	Always	27	54%
		Sometimes	20	40%
		Never	3	6%
5	Washing vegetables after Cutting	Always	47	94%
		Sometimes	3	6%
6	Use of Iodized Salt	Always	25	50%
		Sometimes	17	34%
		Never	8	16%
7	Skip One Meal Per Day	Never	2	4%
		Sometimes	13	26%
		Often	14	28%
		Always	21	42%
8	Eating Fruits	Sometimes	25	50%
		Often	9	38%
		Always	6	12%
9	Consumption of Dairy Products	Sometimes	20	40%
		Often	13	26%
		Always	17	34%
10	Frequency of eating Fast Food	Never	16	32%
		Sometimes	18	36%
		Often	15	30%
		Always	1	2%

The above table depicts the knowledge, attitude and practice of respondents towards the nutritional health. The majority 60 per cent (30) of the respondents is vegetarian and 24 per cent (12) of the respondents were non- vegetarian. And 16 per cent (8) of the respondents are vegetarian + egg. The majority 60 per cent (30) of the respondents were vegetarian. Majority 68 per cent (34) of the respondents were not practicing dietary restriction on daily food. Rests 32 per cent of the respondents are practicing dietary restrictions. Skipping food and consuming less is the was common among them due to psycho social problems. Developing healthy food practices is evidential to keep good health. Best practice nutrition consumptions of ensures good health by preventing food borne illness, because working women has to take care of their health condition also. Majority 64 percent of the respondents

skip morning breakfast. And 36 percent of the respondents never miss their breakfast. Due to heavy work and to reach the organization many women miss the breakfast. It directly affects the daily performance gradually, because, eating breakfast every day helps to maintain concentration in work. A good breakfast should be able to provide a third of the total daily energy requirement. A typical breakfast includes a cereal (for example, rice, and bread,) protein-rich food such as egg, a glass of milk and vitamin C rich fruit e.g. orange, and papaya. Majority 54 per cent (27) of the respondents frequently eats and 40 per cent (20) of the respondents “Sometimes” and rest 6 per cent of the respondents never eat vegetables as salad. Consumption of raw vegetable as salads which contains lot of nutrients which helps to maintain healthy body, comparing to cooked. The majority 94 per cent

of the respondents always wash the vegetable after cutting the vegetables. This practice depletes the nutrients in vegetables. Majority 50 per cent (25) of the respondents were “always” and 34 per cent (17) of the respondents “sometime” and 12 per cent (6) of the respondent “no” and 4 per cent (2) of the respondents ‘use of iodized salt in cooking. The study observed that, most of them use iodized salt on special occasions like when they have guests or relatives. On normal days they use low cost salt. Women who consumes low iodized salt and food the chances of getting thyroid problem is high. Majority 42 per cent (21) of the respondent’s opinion always and 28 per cent (14) of the respondents “often” and 26 per cent of the respondents skips ‘sometimes’ and 4 per cent (2) of the respondents never skip meal in a day. Due to lack of time during the morning they could not able to have breakfast, they rush towards getting bus and reaching to industry. Skipping morning food will lead to gastritis and decrease the daily work performance of the individual. Eating fruits and vegetables as part of overall health may reduce risk of heart disease, obesity and protect against certain types of cancers. Fruits provide nutrients and maintenance of healthy body. Majority 50 per cent (25) of the respondents consume fruits ‘sometimes’, while 38 per cent (19) of the respondents consume fruits ‘often’ and 12 per cent (6) of them told that they always consumes fruits. Consuming fruit and vegetables is imperative not only for vitamins and minerals, but also phytonutrients, which are useful chemicals, found only in fruit and vegetables. They are significant in prevent and fight against diseases. 40 per cent (20) of the respondents consumes dairy products ‘sometimes’, 26 per cent (13) of the respondents opined of the respondents ‘often’ consumes dairy products. Rest 34 per cent (17) of the respondents always consumes dairy products. Majority 36 per cent of the respondents eat fast-food such as panipuri, gobi manchurian, noodles etc.2-3 times in a week. 32 per cent of respondents never consume fast food which are available at road side. 30 per cent of the respondents often consumes fast food 4-5 days per week. Remaining 2 per cent of the respondents consume always fast food. The above analysis it was found, majority respondents frequently consume fast food, which has a direct impact on overall health fast food is not necessarily bad, these foods are often high in calories little lacks nutritional value. Sometimes, it may lead to obesity problem.

Table 4: Shows the respondents type of work

Sl. No	Type of work	Frequency	Percentage
1	Standing	16	32%
2	Sitting	27	54%
3	Walking	6	12%
4	Carrying And Lifting Weight	1	2%
5	Others	0	0%
	Total	50	100%

The majority 54 per cent (27) of the respondents engage in sitting work, followed by 32 per cent (16) of the respondents engaged in walking. Only 2 per cent (1) of the respondents carrying and lifting weight. The majority 54 per cent of the respondents engage in sedentary work such as sitting and stitching. Little physical exercise is imperative to keep their health in good condition.

Table 5: Access to of Nutritional information.

Sl. No	Nutritional Information	Frequency	Percentage
1	No	26	56%
2	Yes	24	44%
	Total	50	100%

The majority 56 per cent of the respondents do not have access to any nutritional information. Rest 44 per cent of the respondents gets nutritional information from different sources. Many of them said, they got nutritional information from their children’s books while helping the children to finish home work. It was observed that majority of the respondents knowledge on nutrition is very limited. Most of the time food myths were considered as nutrition knowledge this directly lead to negative impact on their health.

Table 6: Malnutrition Status

Sl. No	Nutritional Status	Frequency	Percentage
1	Severely Malnourished	2	4%
2	Moderately Malnourished	1	2%
3	Mild Malnourished	21	42%
4	Normal	26	52%
	Total	50	100

The nutritional status of the respondents were classified according to Body mass index. Majority 52 per cent of the respondents were normal, 42 per cent of the respondents were suffer from mild malnourishment, 4 per cent of the respondents were moderate malnourished. And rest 4 per cent the respondents were severely malnourished. Malnutrition directly affects on the health condition and day today activities of women, which may hinder the capacity.

Table 7: Health problems

Sl. No	Health Problems	Always		Often		Never		Total F	Total P
		F	P	F	P	F	P		
1	Problems In Bones	33	66%	17	34%	0	0%	50	100%
2	Back Pain	35	70%	15	30%	0	0%	50	100%
3	Eye Strain	17	34%	33	66%	0	0%	50	100%
4	Respiratory Problem	3	6%	47	94%	0	0%	50	100%
5	Gastric Problem	9	18%	41	82%	0	0%	50	100%
6	Fatigue	1	2%	49	98%	0	0%	50	100%
7	Abdomen Problem	8	16%	42	84%	0	0%	50	100%

Majority 66 per cent of the women respondents revealed that they always experience pain in bones, 17 per cent of the respondent often feel pain in bones. None of them were free from the bone pain. Majority 70 per cent of the women respondents suffer from back pain ‘Always’. And rest 30 per cent of the respondents ‘often’ feels back pain during their work. Majority 66 per cent of the respondents reported ‘not having’ eye strain. Rest 34 per cent of the respondents revealed that they feel eye strain. Majority 92 per cent of the respondents were expressed that they ‘often’ feel respiratory problem. Rest 6 per cent of the respondents always feel respiratory problem. Majority 82 per cent of the respondents were gastric problem. Often feel rest 18 per cent of the respondents were always feel gastric problem. Majority 84 per cent of the respondents were often suffer from abdomen pain, fever, fatigue rest 16 per cent of the respondents always suffer

from abdomen pain, fever, fatigue. It indicates that majority of the respondents were health status is need to be enhanced

Suggestions

- Majority half of the respondents were malnourished due to lack of nutrition knowledge, and affordability of the nutrition food. Therefore the company may give workshop and training programmes on health especially on nutritional health by adopting social work methods.
- Improved quality food should be provided to the employees to the increase their nutritional status with reasonable rate in canteen. If possible organization should provide breakfast and lunch for reasonable rate.
- Awareness programs on nutritional and Nutrition education should be given to the employees as a part of welfare measures.

Conclusion

From the above analyses, it was found that majority half of the respondents were not aware about malnutrition. They need special training and education on nutrition and its consumption practices should be made available to women. As per the observation respondents were not have the knowledge on food groups and it functions. There is lack of nutritional information sources. Therefore it can be conclude that there is a great need of social work intervention to promote health and nutritional awareness.

Reference

1. Barma SR. A Comparative Study of Health and Nutritional Status among Housewives and Working Women of North Bengal. *International Journal of Behavioral Social and Movement Science*. 2013; 2:35.
2. Das N. *Dalit Minority and Caste Politics in India* First Edition ed. Centrum Press New Delhi, India, 2013.
3. Fatema Tania N. Health Hazards of Garments Sector in Bangladesh: The Case Studies of Rana Plaza. *Malasian Journal of Medical and Biological Research*, 2014, 1(3).
4. ICMR. *Recommended dietary intakes for Indians*. Indian Council of Medical Research. New Delhi, 1981.
5. KP. Park's *Textbook of preventive and social medicine*. Banarsidas Bhanot Publishers, 2005.
6. Md.Golam Hasnaian, MA. *Morbidity Patterns, Nutritonal Status and Health case-seeking behaviour of Female garment workers in Bangaldesh*. *Electronic physician*. 2014; 6(2):801-807.
7. Riaduzzaman Md. *Health and Nutritional Status of Female Garment Workers in Bangladesh: A critical Analysis*. *International Journal of Research in Humanities and Social Studies*. 2017; 4(3):19-29.
8. Paul-Majumder P. *Health Status of the garment workers in Bangladesh*. Dhaka, 2003.
9. Sadana SN. *Caste Religion and Malnutrition Linkages*. *Economic Political Weekly*, 2011, 46(50).
10. Shaheen Ahmed AM. *Health Status of the Female Workers in the Garment Sector of Bangladesh*. *Journal of the faculty of economics and adminstrative sciences*. 2014; 4(1):43-58.