# Impact of Nutri-psycho Counseling on Adjustment Level of Obese School Going Children

ANUSHREE R. KHAIRE<sup>1\*</sup> AND R.M. KAMBLE<sup>2</sup>

<sup>1</sup>Assistant Professor and <sup>2</sup>Associate Professor

<sup>1</sup>Department of Human Development, P.R.E.S.s Women's College of Home Science and BCA Loni, Tal. Rahata, Dist. Ahmednagar (M.S.) India <sup>2</sup>Department of Home Science, Govt. Vidarbha Humanities and Science Institute, Amravati (M.S.) India

## ABSTRACT

Impact of nutri-psycho counseling on adjustment of obese school going children was assessed in Pune, Nashik and Ahmednagar districts of Western Maharashtra. For this study, 180 obese school going children were selected, from which 90 boys and 90 were girls and 60 from each selected district in 6- 16 age group. The adjustment of selected children was assessed by using 'Adjustment Inventory for School Students' (AISS) recommended by A.K.P. Sinha and R.P. Singh. It was found that, the adjustment in relation with emotional, social, and educational was found increased after NP counseling.

Key Words : Obese children, Adjustment, Nutri-psycho counseling

## **INTRODUCTION**

Obesity is a universal problem having different ramifications national, regional and local. The pace at which the obesity epidemic is threatening the world's children and adolescents has raised immediate public health concern. Scholars have studied obesity and overweight in their own perspective. "The term overweight rather than obese is often used in children as it is less stigmatizing." (Bessesen, 2008). Due to availability of square food and affinity of parents the school children are provided more nutritious food than they require, which leads to complex situation of obesity.

Globally, an estimated 43 million preschool children (under age 5) were overweight or obese in 2010, a 60 per cent increase since 1990 which is a serious problem. The problem is affecting various countries not only in rich but also developing and economically backward countries. By understanding their sheer numbers, places, it reveals that the greatest burden lies on the developing countries of Asia and Africa. Of the world's 43 million overweight and obese preschoolers, 35 million live in developing countries (Ramchandran *et al.*, 2002). By 2020, if the current epidemic continues unabated, 9 per cent of all preschoolers will be overweight or obese – nearly 60 million children (de Onis and Blossner, 2010).

In the last few decades children have become less active due to easy access to technological advances. A positive relation has been observed between lack of activity e.g. Time spent on watching television (Dietz and Gortmaker; 1985) or playing computer games impact on an increase in adiposity in the school age children.

Social, psychological and metabolic factors all contribute to the prevalence of overweight. It carries a social stigma and often children are made a figure of fun and are though responsible for their condition. A feeling of personnel shame frequently occurs as a result of such condemnation and rejection particularly in the adolescent who is overweight. Those involved in management should not imply overweight patients are self-indulgent or lack of will power.

Negative outcomes from being overweight during

How to cite this Article: Khaire, Anushree R. and Kamble, R.M. (2019). Impact of Nutri-psycho Counseling on Adjustment Level of Obese School Going Children. *Internat. J. Appl. Soc. Sci.*, 6 (1&2): 11-14.

childhood include being at higher risk number of chronic and acute conditions as well as negative social and psychological outcomes (Lee, 2009 and Sullivan, 2004) states that these are a great deal of evidence that emotional health underpins at least part of the trend towards obesity. Like adults, children often rely on food fixes to deal with emotions. They may eat more often when they are feeling sad, stresses or bored and they are more likely to do so, if this pattern was demonstrated to them through their parents.

## METHODOLOGY

An exploratory research has been conducted in three districts such as Pune, Ahmednagar and Nasik of Western Maharashtra. Total 600 (obese) children among obese children having age between 7 to 12 years including male and female were selected by (purposive) simple random sampling method. About 200 obese children were randomly selected from each district. Out of 600 obese children 224 were male and 376 were female. From this samples, only 60 children from each district were taken from study, in which 30 male and 30 females were there. The obese children were selected by calculating BMI through school information of height and weight of children with prior permission of principal. The adjustment level of obese children was assessed by 'Adjustment Inventory for School Students' (AISS) recommended by A.K.P. Sinha and R.P. Singh. The inventory contains 60 items, 20 items in each area of adjustment. The areas of adjustment are Emotional, Social and Educational. The scoring is done by indicative responses as per given in

manual. The collected data were pooled, tabulated and analysed statistically.

#### **RESULTS AND DISCUSSION**

The self-esteem of obese children was assessed by 'Adjustment Inventory for School Students' (AISS) recommended by A.K.P. Sinha and R.P. Singh. The impact of nutri-psycho counseling was assessed on children's adjustment of obese children. Their rating assessment after nutritional and psychological counseling was compared with their ratings before NP counseling.

Impact of nutri-psycho counseling on adjustment behavior of selected school going obese boys is shown in Table 1. The adjustment behavior of children is categorized in emotional, social and educational aspects. It is observed from table that emotional adjustment is increased non-significantly at good level. But on average level it was found significantly increased from 60.0 to 74.4 per cent. Unsatisfactory and very unsatisfactory levels were significantly decreased *i.e.* from 18.9 to 8.9 and 7.8 to 1.1 per cent, respectively.

Regarding social adjustment of obese boys that there is significant increase in good and average levels after NP counseling *i.e.* 10.0 to 14.4 and from 62.2 to 70.0 per cent, respectively. Whereas for unsatisfactory level there is significant decrease from 24.4 to 15.6.

It is also seen in educational adjustment found nonsignificantly increase at good level. The average level was increased significantly *i.e.* from 44.4 to 57.8 per cent. There is significant decrease noted in unsatisfactory and very unsatisfactory level *i.e.* from 25.6 to 21.1 and

| Table 1 : Impact of 'NP' Counseling on Adjustment behavior of selected school going obese boys |                     |           |      |           |      |                   |  |
|--|---------------------|-----------|------|-----------|------|-------------------|--|
|  | Level               |           |      |           |      |                   |  |
| Areas of adjustment  |                     | Before    | ,    | After     |      | 'Z' values        |  |
|  |                     | Frequency | %    | Frequency | %    |                   |  |
| Emotional  | Good                | 12        | 13.3 | 14        | 15.6 | $(1.40)^{NS}$     |  |
|  | Average             | 54        | 60.0 | 67        | 74.4 | (3.38)**          |  |
|  | Unsatisfactory      | 17        | 18.9 | 08        | 8.9  | -(3.20)**         |  |
|  | Very unsatisfactory | 07        | 7.8  | 01        | 1.1  | -(2.71)*          |  |
| Social   | Good                | 09        | 10.0 | 13        | 14.4 | (2.60)*           |  |
|  | Average             | 56        | 62.2 | 63        | 70.0 | (2.75)*           |  |
|  | Unsatisfactory      | 22        | 24.4 | 14        | 15.6 | -(2.41)*          |  |
|  | Very unsatisfactory | 03        | 3.3  | 00        |      |                   |  |
| Educational  | Good                | 13        | 14.4 | 14        | 15.6 | $(0.14)^{\rm NS}$ |  |
|  | Average             | 40        | 44.4 | 52        | 57.8 | (3.11)**          |  |
|  | Unsatisfactory      | 23        | 25.6 | 19        | 21.1 | -(2.39)*          |  |
|  | Very unsatisfactory | 14        | 15.6 | 05        | 5.6  | -(2.46)*          |  |

\*Significant at 5% level; \*\*Significant at 1% level; NS non-significant

Internat. J. Appl. Soc. Sci. | Jan. & Feb., 2019 | 6 (1&2)

from 15.6 to 5.6 per cent, respectively.

The Table 2 reveals the information regarding average statistical analysis of adjustment behavior of selected school going obese boys. It is observed that the mean before and mean after nutri-psycho counseling for emotional, social and educational adjustment were found significantly difference. Hence, it is concluded that the NP counseling helped to improve the psychological status of obese boys significantly.

Impact of NP counseling on adjustment behavior of selected obese girls can be seen from the data presented in Table 3.

It is observed that from Table 3 that emotional adjustment is increased significantly at good level *i.e.* from 25.6 to 30.0. On an average level, it found significantly increased from 58.9 to 65.6 per cent. Unsatisfactory and very unsatisfactory levels were

significantly decreased *i.e.* from 12.2 to 4.4 and from 3.3 to 0 per cent, respectively.

Regarding social adjustment of obese girls that there is significant increase in good and average levels after NP counseling *i.e.* from 23.3 to 25.6 and from 65.6 to 68.9 per cent, respectively. Whereas for unsatisfactory level, there is significant decrease from 7.8 to 5.6.

It is also seen in educational adjustment that the significant increase at good level is found (from 21.1 to 23.3). The average level was increased significantly *i.e.* from 50.0 to 57.8 per cent. There is significant decrease found in unsatisfactory and very unsatisfactory level *i.e.* from 20.0 to 13.3 and from 8.9 to 5.6 per cent, respectively.

The Table 4 reveals the information regarding average statistical analysis of adjustment behavior of selected school going obese girls. It is observed that the

| Table 2 : Average statistical analysis of adjustment behavior of selected school going obese boys |                |               |       |           |                       |           |             |  |
|---|----------------|---------------|-------|-----------|-----------------------|-----------|-------------|--|
| Parameter   | Mean<br>Before | Mean<br>After | Z cal | 'p' value | Level of significance | Result    | Conclusion  |  |
| Emotional   | 1.789          | 2.044         | 2.627 | 0.0086    | 0.05                  | Reject H0 | Significant |  |
| Social  | 1.789          | 1.99          | 2.079 | 0.0376    | 0.05                  | Reject H0 | Significant |  |
| Educational   | 1.578          | 1.83          | 2.713 | 0.0067    | 0.05                  | Reject H0 | Significant |  |

|                     |                     |           | 'Z'  |           |      |          |
|---------------------|---------------------|-----------|------|-----------|------|----------|
| Areas of adjustment | Level               | Before    | 2    | After     |      | Values   |
|                     |                     | Frequency | %    | Frequency | %    |          |
| Emotional           | Good                | 23        | 25.6 | 27        | 30.0 | (2.43)*  |
|                     | Average             | 53        | 58.9 | 59        | 65.6 | (2.55)*  |
|                     | Unsatisfactory      | 11        | 12.2 | 04        | 4.4  | -(2.36)* |
|                     | Very unsatisfactory | 03        | 3.3  | 00        |      |          |
| Social              | Good                | 21        | 23.3 | 23        | 25.6 | (2.31)*  |
|                     | Average             | 59        | 65.6 | 62        | 68.9 | -(2.26)* |
|                     | Unsatisfactory      | 07        | 7.8  | 05        | 5.6  | -(2.30)* |
|                     | Very unsatisfactory | 03        | 3.3  | 00        |      |          |
| Educational         | Good                | 19        | 21.1 | 21        | 23.3 | (2.35)*  |
|                     | Average             | 45        | 50.0 | 52        | 57.8 | (2.48)*  |
|                     | Unsatisfactory      | 18        | 20.0 | 12        | 13.3 | -(2.25)* |
|                     | Very unsatisfactory | 08        | 8.9  | 05        | 5.6  | -(2.31)* |

\*Significant at 5% level

| Table 4 : Average statistical analysis of adjustment behavior of selected school going obese girls |                |               |       |           |                       |           |                 |  |
|--|----------------|---------------|-------|-----------|-----------------------|-----------|-----------------|--|
| Parameter  | Mean<br>Before | Mean<br>After | Z cal | 'p' value | Level of significance | Result    | Conclusion      |  |
| Emotional  | 2.067          | 2.255         | 1.84  | 0.065     | 0.05                  | Accept H0 | Not Significant |  |
| Social   | 2.089          | 2.2           | 1.091 | 0.274     | 0.05                  | Accept H0 | Not Significant |  |
| Educational  | 1.833          | 1.98          | 1.58  | 0.114     | 0.05                  | Accept H0 | Not Significant |  |

Internat. J. Appl. Soc. Sci. | Jan. & Feb., 2019 | 6 (1&2)

mean before and mean after nutri-psycho counseling for emotional, social and educational adjustment were found significantly difference. Hence, it is concluded that the NP counseling helped to improve the psychological status of obese girls significantly.

It can be concluded that NP counseling has found very positive impact on adjustment behavior of selected school going obese children. There was no significant difference was noticed in the impact of NP counseling on adjustment behavior between obese boys and girls.

#### **Conclusion:**

Moreover the impact of NP counseling was also found significantly positive in the improvement of psychological status in relation with adjustment behavior. More significant NP counseling impact on psychological status was found in obese girls than boys.

#### REFERENCES

Bessesen, D.H. (2008), Update on obesity.

- Ramchandran, A., Snehalatha, C., Vinitha, R., Thayyil, M. et al. (2002). "Prevalence of overweight in urban India an adolescent school children." *Diabetes Res. & Clinical Practice*, 57(3): 185-190.
- De Onis, M. and Blossner, M. (2000). Prevalence and trends of overweight among preschool children in developing countries. *Am. J. Clin. Nurt.*, **72** : 1032-1039.
- Dietz and Gortmaker (1985). Do we fatten our children at the television set? Obesity and television viewing in children and adolescents. *Pediatrics*, **75**(5):807-812.
- Lee, Y.S.(2009).Consequences of childhood obesity. *Annuals Academy Medicine, Singapore,* **38** : 75-77.
- Sinha, A.K.P. and Singh, R.P. (). Adjustment Inventory for School Students'.
- Sullivan, K. (2004). How to help your Overweight Child. London : Rodale.

\*\*\*\*