

ABSTRACT

India is a peninsula surrounded by water bodies on the three sides that embeds a vast coastline with a good potential for marine fishing. Marine fishing caters livelihood to 14.5 million people in India, with 3477 fishing villages and 818.5 thousand artisanal fisherfolk relying on it. But 60.6 per cent of the fisherfolk families are categorized under the below poverty line. Andhra Pradesh has 97.3 per cent of the marine families under the poverty line with low income, extreme poverty, low literacy, poor food security and health care, isolation from mainstream population, social and economic backwardness and high exposure to natural calamities. This study focused on artisanal fisherfolk children (6-8 years) of eight coastal villages near Kakinada of East Godavari District, Andhra Pradesh. Applying the purposive sampling method, 15,658 households were surveyed, out of which 8451 fisherfolk families were selected. A thousand children aged 6-8 years were screened for VAD and IDA. Among them, 234 children who showed mild to severe clinical symptoms of VAD and IDA were chosen for the study. The intervention with 100gm of boiled orange-fleshed sweet potato and nutrition education was carried for six months. The anthropometrical, biochemical, clinical and dietary survey revealed that the prevalence of VAD and IDA is above the cut off points suggested by WHO and ICMR standards which makes it a public health issue among the fisherfolk children. The intervention of boiled orange-fleshed sweet potato and nutrition education brought about the relevant impact on the children's anthropometric measurements, serum retinol and haemoglobin levels compared to the controlled group.