"To Study complete physical fitness of Children Age Group 5-7Yrs Through Pranvyayam as Preventive Measure—Positively Link To Global Warming"

Dr Shilpa Desai (Author)

Ph.D., Health Psychologist , Wellness Expert America's world's best youth soccer club Rush Academy Managing Director:: C-4 integrated wellness Pvt Ltd Consultant Developing Organic Recipes for Eco Farm (India) Naturopath (N. D.) E Mail : greenremedes@gmail.com

Dr Drashty Desai (Co-author) Director of C4 Integrated Wellness Pvt Ltd Licensed Physiotherapist Email ID- drashtyd@gmail.com

The IPCC (intergovernmental panel on climate change) poises that most climate change since 1950 is human induced and will have far reacting environmental and health effect. The cumulative and interacting psychosocial effect of climate change is likely to be profound.

Children are definitely as our future generation who expected live healthily and happily while they are exposed to newly developing or worsening environment hazards in the future. Children may be especially vulnerable sub population because of their developing physiological and psychological anticipated long term exposure.

Advocacy of research is to raise awareness that climate change is a fundamental threaten to human health especially our children. The purpose of the study is to research among children age group 5-7 years i.e. Early childhood and onset of later childhood development. During this phase they are on the verge of highest growth potential in both aspects of development i.e. psychological and physiological. During this phase their lifestyle is mostly influenced by self –induced awareness. Dependence and observation skill through guidance and training can make fundamental improvisation to immerg individual identity. Underlying factor are playing major role in Early childhood development.

- ➢ family environment
- Education institution
- Peer group dependence
- Childhood impact of health
- ➢ social and environmental influences
- ▶ habit and interest conflict leads to wrong life style

For the present study researcher has chosen 300 children age group 5-12 yrs from m.k.e.s English medium school, malad (w) train them with discipline healthy life style through –mind and body parameter,

.MIND PARMETER – Pranyama - Lom-Vilom and Pran-- Vyayam Pranayama

BODY-PARAMETER—Form Of Exercise—Suryanamashkar

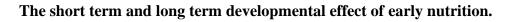
Diet Plan

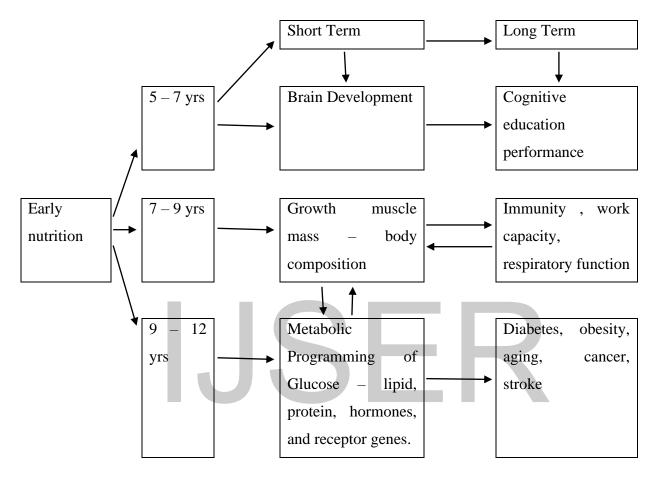
Recommended diet plan according to their vitality and metabolism. Parental training as well organised to educate them at the interval of 30 days total period intervention was of 60 days. Case study And to give complete mind and body aspects taken Mental Health Inventary (M.H.I) RATING SCALE – IV check list norms and clinical interpretation by Dr. A.K Srivastava and Jagdish based on which they were included into the study will be used as research method for present study and instruction of conduction of experimental and observational case study report will be prepared.

KEY-WORDS: children, global warming, life style, metabolism, vital force, diet.

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Vasudhaiv Kutumbakam





So 5-7 i.e. early child hood is so important and crucial for further development as during this development phase brain development is at most prime.

SUMMARY

Introduction

The present study aimed at finding out the effect of 'Naturopathy' on Physiological & Psychological factor on Respiratory system of children age group 5 – 12 years, when environment is not so friendly. A Physiological aspect has been measured by Body parameter like Age, Height, Weight, BMR, BMI. Vital parameter being measured by using laboratory instrument; Oxymeter test (O2), Fingertip Begin 2B FDA 510(k), Spirometer test (EFEV), Hudson cc/sec, Peak flow meter test (PFEV), Personal Best Full range peak flow meter(60-810 L/min) ,Psychological parameter by selecting tool constructed by Jadgish & A. K Srivastava, i.e. Mental health inventory, which integrate the personality, autonomy group oriented attitudes and environmental mastery.

For the statistical analysis, appropriate descriptive statistics and 2-tailed for the pre-post correlation test have been used for data analysis.

Statement of Research Problem.

Researcher proposes the problem which is related to psycho-physiological aspects and its effects on respiratory system among children through Naturopathy. The title of the problem is

"To Study complete Life-Style For Children Age Group 5-7 Yrs Through Naturopathy as Preventive Measure—Positively Link To Global Warming"

Introduction

Respiration is key factor for an individual to live. O_2 & CO_2 are two keys which allow individual breath, when present environment in the entire factor of life, i.e. researcher can say life style of a human is deteriorating then our present generation is affecting the most, as they have to acquire on fitness & immunity by working on vitality.

The present study therefore is an attempt to explore the efficiency of 'Naturopathy' as therapy in intervention for children age group 5 - 7 years. Researcher has tried to answer, To sustain in life when all the research are working to save earth, Are we trying enough for our children to live healthily and happily? Still when we have favourable condition and system to merge children bodily environment with future climatic conditions, what is the best life style and why we are not implementing during their developmental stage?

When we talk about vitality then nature is the only option we have, i.e. preventive measure been taken by Nature cure. For decades, medication has helped to treat & reduce the symptoms of diseases. Though during treatment seems to offer a quick fix, it is only a short term limited solution to a complex multifaceted problem. Medication only cover, some symptoms & does not actually get to the root of the problem. After the drug is discontinued the symptoms tend to re – appear & vitality is well deteriorated. Drug therapy is effective over prolonged use however; this comes with its share of side effects.

There has been an incessant search for progressively more effective remedies for physical & psychological ailments & the world of remedies is seeking reprieve in alternative systems of therapy. This chapter elaborate on physiological & psychological aspect of respiratory system & effect on children age group 5 - 7 years. It describes its symptomatology, etiologic, physiology &

psychological disorder associated with respira7ory function and their efficacy with present climate & suggested life- style for children as preventive measure which can be described as psychophysiological aspect. A Physiological aspect has been measured by Body parameter like Age, Height, Weight, BMR, BMI. Vital parameter being measured by using laboratory instrument; Oxymeter test (O₂), Fingertip Begin 2B FDA 510(k), Spirometer test (EFEV), Hudson cc/sec, Peak flow meter test (PFEV) Personal Best Full range peak flow meter (60-810 L/min) ,Psychological parameter by selecting tool constructed by Dr.Jadgish & A K Srivastava, i.e. Mental health inventory, which integrate the personality, autonomy group oriented attitudes and environmental mastery.

This study is to provide reliable information on pulmonary function which would aid the diagnostic process and students follow up. The researcher's motive is to introduce preventive strategy to reduce the impact of global climate change on children's health. The intervention methods employed in the study are also outlived in brief. The discussion is ensured by the statement of the problem, the significance of the present research & the hypothesis which have been derived from the objectives of the study.

<u>Naturopathy as intervention on physiological and psychological inter-relation : Theoretical</u> <u>Underpinning.</u>

This chapter will explain various dimensions of the physiological and psychological aspect and its effect on respiratory system through naturopathy on early childhood, later childhood and puberty. This stage is regarded as the stage of rapid physical and mental development. This chapter is structured with view that it will shape the understanding and the need of inculcating naturopathic life style as a preventive measure.

The nutritional status of children does not directly reflect the socio economic status of the family and social well being of the community but also the efficiency of the health care system and the influence of the surrounding environment.

In UNESCO it is recorded that in India one fifth of the population consist of children between 5 -7 years THAT IS LATER CHILDHOOD, which includes the primary school age. School age is considered as a dynamic period of growth and development because children undergo physical, mental, emotional and social changes. In other words the foundation of good health and sound mind are laid during the school age period. Hence the present study were formulated with the objective to assess and find the major socio – economical co-relations of nutritional statistics and lifestyle in school age children.

How all these factors are related and links to each other: (description):

Factor selected by researcher are with complete concept to reach to complete goal of well-being of children. Select factor are children age group 5 -12 yrs are with three major factors, i.e. Physiopsychological parameter, nutritional and environmental factor. Human carry genes & take birth with default mechanism, but development stage allows them to bring changes & improve health. Height, weight, BMI, BMR, this are the basic development keys to analyse & design further investigation. For developmental growth period for children age 5 - 12 yrs require amount of energy as per their expenditure, so body composition is directly connected to nutrition. To achieve complete health only body or mind can't worked& left alone, another physical parameter BMI, BMR, i.e. body composition is very crucial factor for children to pass as a healthy child. Body composition is interrelated or directly related to stimulant of brain & nutrition intake.

The preamble of WHO's charter define health as a state of complete physical, mental & social wellbeing. Not merely the absence of disease or infirmity. Thus health is a broader concept including

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physical, social & mental health. Childhood seen as foundation for individual development both physiologically & psychologically & is taken to define life time. Childhood is an, milestone for physical vitality & personality along with mental growth.

The eminent evolutionary biologist & theorist E. O. Wilson, in the Prolong of his book, he defines, Biophilia as "the inhale tendency" to focus on life & life like process. So life of any living thing is inter related as per this theory. Researcher has connected physiological psychological & inter related with environment and how our natural love for life helps sustain life.

Life Process starts with birth. Birth of an human respire to live & respiration i.e. breath is directly connected to environment, i.e. O₂& Co₂. Researcher has taken up present condition & its effect on children as they grow, if their physical parameter is not as per development then their mental growth also get affected & this way researcher has connected life process which researcher has described by diagram.

Survey of Literature:

The second chapter review of literature helps the researcher in deciding the direction of the research. A collective body of works done by earlier scientists is technically called the literature (A K Singh 2004). Researcher thought that any scientific investigations starts with a review of literature. It is primary stage towards research. The researcher attempts a close or an in-depth revealing of the review of literature. The research is mostly problem oriented whether it is Psychological, Sociological or Philosophical. Not merely the research, but the review of literature is also the major source to alter, include & exclude which and what form the research done earlier in the same area. Awareness for knowledge of such research prevents unnecessary repetition of documentation of the same thing. Likewise, constantly flourishing developing research also revises and remoulds the documentation according the demand of time. In this way, review of literature helpful for identifying variable relevant for research avoidance of repetition.

Synthesis of prior work, determining meaning differences & relationship among Physiological & Psychological variable keeping this view in mind researcher has carefully studied the literature & review of researchers related to the urban students of M. K. E. S. English School, Mumbai.

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Introduction;

"RIGHT TO LIVE ""

Living healthy is our right, lets live.

Life style and effect on > early child hood

Lifestyle is milestone for our generation, in all the aspects of physiological and psychological development.

INTERVENTION: natural diet -as per body parameter

Physical Exercise—Suryanamskar

Pran-vyayam

Observation:: Physiological : according their age children body parameter were found low.

Psychological: according teacher Note;; Behavioural Problem



Objective :::

To study Association of life style and physical development of children.

To study effect of natural living habits on children of age group 5-7 yrs.

To study implementation of natural life style in school schedule

To study effect of involvement of school and parents together on children.

Hypothesis ::

During early stage of children yoga practices would have been great influence on their future complete fitness.

Children physiological and psychological development would be depend on family and educational institutional.

Development of children would be depend on life style provided by parents.

Recommended life style would be working as preventive strategy for our generation.

Research methodology::

4 Variables:

IV -Independent Variable:

- 1 Body Parameter:
- 2 Diet Parameter:

Age, Wt, Ht, BMR, BMI

Herbal therapy,

Diet therapy

3 Respiratory Parameter:

Oximetry test (SPO₂)

Spirometry test

Peak flow meter test

4 CBC (Complete Blood Count):

Hemoglobin (Oxygen Carrier)

DV -Dependant variable:

Psychological and Physiological factor

- 1. Genetic factor
- 2. Adjustment
- 3. Personality
- 4. Home environment
- 5. Climate

Research Design (Pre and post):

For the statistical analysis, appropriate statistics for pre-post experimental co-relation the comparison paired 2 - tailed t test have been used for data analysis. The summary of the thesis is presented in chapter-wise format.

| Group | Test | Treatment | Test |
|------------|------|-----------|------|
| Experiment | Pre | Yes | Post |

Experimental design \longrightarrow X₁ O X₂ Treatment given \checkmark

Pre-test--- - Post test

Pair 't' statistics - with description for gain score treatment.

| Subject:: Children age g | roup on > early child hood 5-7 yrs |
|--------------------------|---|
| Sample size:: | n = 300 |
| Source of subject : | The sample for the study consist of 300 children, from Mumbai |
| city, M.K.E.S | English School located at Malad (w), these Boys and Girls were from age |
| group 5-12 Yrs. | |
| Ethical consideration:: | the study protocol was explained to parent and their sign consent |
| was obtained. | |

DESIGN INTERVENTIO::

After procuring permission from the Head of Principals of the M.K.E.S. English School, Malad (W), Mumbai, included in the study. The basic principle information about class and no. of the student obtained from class teacher and then the perspective parents of the target population.

The entire process was explained to the parents and time frame of intervention was 90 working days after whom their consent was obtained.

The three part of the procedure were as follows,

Pre-test - Intervention - Post-test.

Hence the design could be classified as pre-test – post-test experimental group design.

Diet Parameter:

| Diet Parameter: | |
|--------------------|---|
| Proposed Natural D | Diet Prescribed to the Sample to follow: |
| Eating Pattern: | Pro.Vit Baby Diet. Age group {5-12 yrs} |
| Dietary Advice: | 40 days |
| Water Intake: | 6 glass (small) water / 2 glass (warm) |
| Advice: | Wheat 500gm, Soyabeen 100gm, Methi 10 gm. |
| | Sheera: 1 Spoon Wheat, 1 Spoon Nachni, |
| | Jaggeri: 1 Spoon Ghee |
| Morning: | hydrotherapy1 gl W.W [200 ml] |
| | 1 gl N.W R.T |
| Water: | Tulsi + Ajvain + Mint [balance water-100 ml] |
| Raw Juice: | Carrot + Amla + fresh Turmeric [100 ml] |
| | 1 Almond + 1/2 Walnut +flour of wheat, soya, nachni, rajgeera |
| | Sheera – 1 Spoon |
| Fruit: | 1 Anjir + Milk [50ml] |
| Afternoon Lunch: | 1 Small Roti + Veg. + Dal + Rice + Salad (1 Tomato Slice) |
| Water: | 1 Small glass + lemon (warm) |
| Advice: | Hydrotherapy1 glw.w [200 ml] |
| | 1 gln.w |

| Evening Snacks: | Rawa + Nachni - Upma |
|------------------------|------------------------------|
| Fruits: | 2 Strawberry + Milk |
| Juice: | Apple Juice [100 ml] |
| Advice: | hydrotherapy1 glw.w [200 ml] |
| | 1 gln.w |
| Night: | |
| Soup: | Drumstick + RawPalak leaves |
| | Tomato+ basil leaves |

t' test for pre-post correlation of MHI for the age group 5 -7 yrs.

| | _ | | | | _ | | |
|---------|------|--------|----|-----------|-------------|------|------------------|
| | | Mean | N | Std. | Correlation | t | Sig. |
| | | | | Deviation | | | Sig. 2-tailed |
| | | | | | | | |
| MHI 5–7 | Pre | 132.64 | 28 | 12.08217 | .337 | 005 | 025 |
| yrs. | Post | 132.89 | 28 | 7.60708 | .337 | .095 | .925 |
| | | | | | | | |
| | Post | 132.89 | 28 | 7.60708 | | | |



Pre-post Mean difference of MHI for age group 5 - 7 yrs

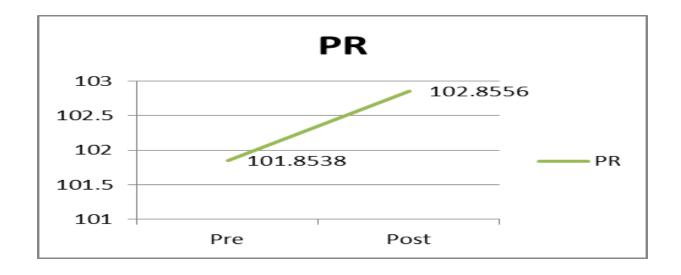
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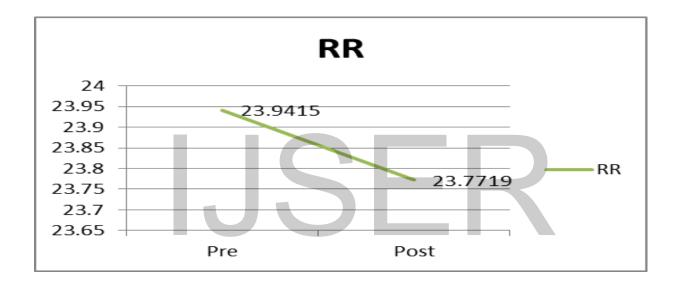
| | Test | Mean | N | Std. Deviation | Co - relation | Т | Significance (2 – tailed) |
|-----|------|-----------|-----|-------------------|------------------|--------|-------------------------------|
| | Pre | 104.9623 | 103 | 7.74587 | 0.858 | 15.394 | .01 |
| | Post | 110.9340 | 106 | 7.02142 | | | |
| Ht | | | | | | | |
| | Pre | 17.0745 | 106 | 3.42301 | 0.915 | 6.929 | .01 |
| | Post | 18.0217 | 106 | 3.42183 | | | |
| Wt | | | | | | | |
| | Pre | 1036.3579 | 106 | 44.06111 | 0.933 | 12.755 | .01 |
| | Post | 1056.1998 | 106 | 43.02615 | | | |
| BMR | | | | | | | |
| | Pre | 15.4976 | 106 | 2.46300 | 0.743 | 5.416 | .01 |
| | Post | 14.6191 | 106 | 2.10342 | | | |
| BMI | | | | | | | |
| | Pre | 10.7283 | 12 | 1.64226 | 0.424 | 3.981 | .01 |
| | Post | 12.3958 | 12 | 0.90260 | | | |
| Hb. | | | | | | | |
| | Pre | 23.3905 | 105 | 3.15465 | 0.309 | 0.676 | .01 |
| | Post | 23.1905 | 105 | 1.40120 | | | |
| RR | | | | | | | |
| | Pre | 104.4340 | 106 | 11.48914 | 0.258 | 0.403 | .01 |
| | Post | 105.0000 | 106 | 12.20382 | | | |
| PR | | | | | | | |
| | Pre | 3.2660 | 106 | 1.50908 | 0.591 | 2.122 | .01 |
| | Post | 2.9613 | 106 | 1.73230 | | | |
| PI | | | | | | | |

| | Pre | 97.3679 | 106 | 3.02159 | 0.100 | 2.643 | .01 |
|------------------|-------|-----------|-----|----------|-------|--------|-----|
| | Post | 98.2358 | 106 | 1.84933 | | | |
| 0 | 1 050 | 90.2330 | 100 | 1.01955 | | | |
| Oxy | | | | | | | |
| | Pre | 105.1698 | 106 | 33.70332 | 0.651 | 8.166 | .01 |
| | Post | 129.1415 | 106 | 38.05296 | | | |
| FEV_1 | | | | | | | |
| | Pre | 108.09582 | 105 | 33.82919 | 0.641 | 7.932 | .01 |
| | Post | 131.9143 | 105 | 38.23211 | | | |
| FEV ₂ | | | | | | | |
| | Pre | 106.2857 | 105 | 34.14497 | 0.697 | 8.978 | .01 |
| | Post | 132.0000 | 105 | 39.96152 | | | |
| FEV ₃ | | | | | | | |
| _ | Pre | 11.0000 | 106 | 23.26821 | 0.435 | 3.037 | .01 |
| | Post | 19.7264 | 106 | 30.99018 | | | |
| IFV ₁ | | | | _ | | | |
| | Pre | 4.0326 | 92 | 1.01040 | 0.247 | 23.244 | .01 |
| | Post | 10.6196 | 92 | 2.78474 | | | |
| IFV ₂ | | | | | | | |
| | Pre | 4.0761 | 92 | 1.18816 | 0.109 | 21.183 | .01 |
| | | | | | | | |
| IFV ₃ | | | | | | | |

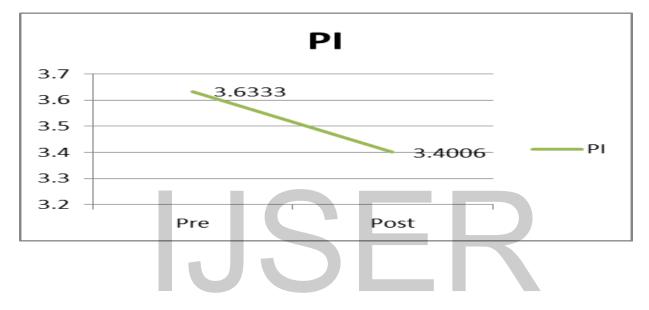
Pre-post Mean difference of MHI for age group 5 –

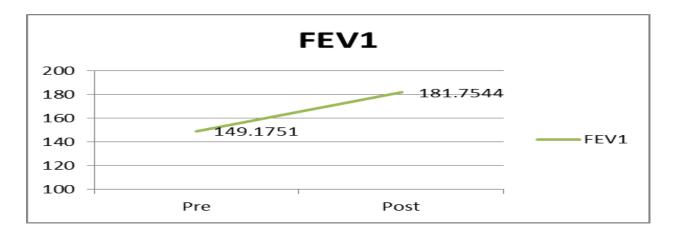
7 yrs

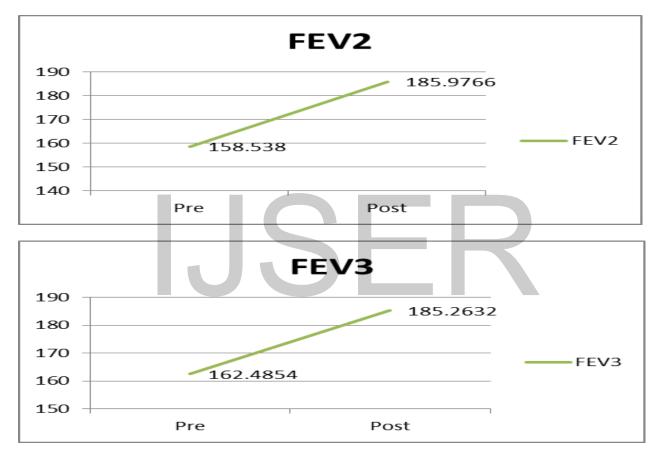


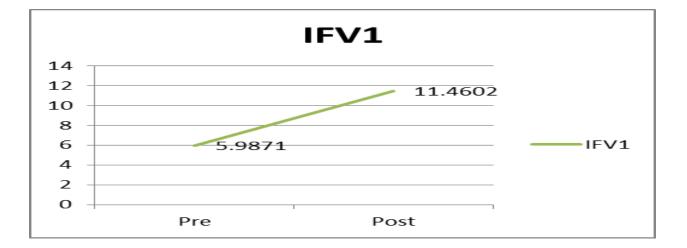


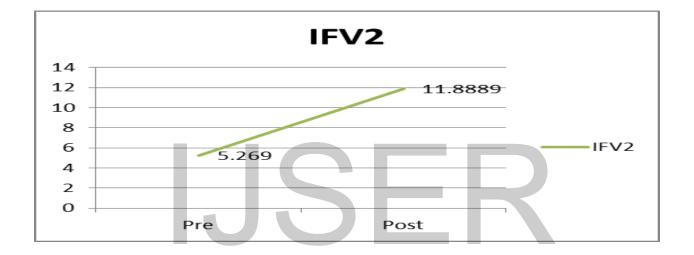


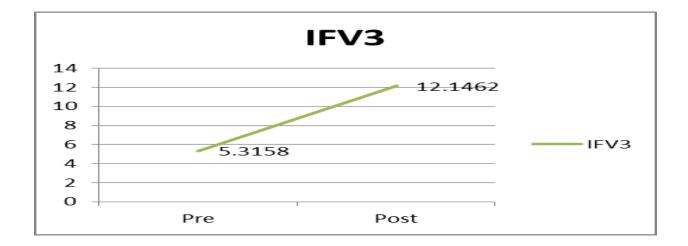












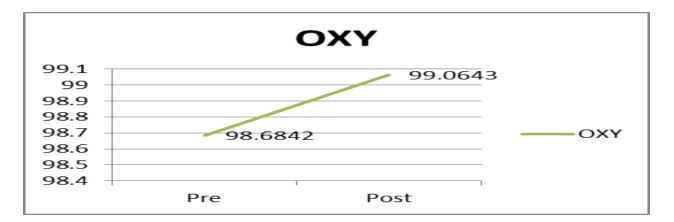


Table – Confirmatory attendance of Psychological Pre- post data.

| Section | Class | Total Student | Confirmatory Pre – Post data |
|-----------------------|-----------|---------------|---------------------------------|
| | Sr. Kg. A | 46 | NA |
| Primary Age 5–7Yrs | Sr. Kg. B | 30 | NA |
| Age 5 - 7 Hs | Std 1A | 40 | 8 |
| | Std 1B | 41 | 6 |
| | | | 14 |
| | | | |

Total no. of Student - 575,

Confirmatory Pre-Post Data - 304.

Numbers of student attempt pre-post psychological test at confirmatory stage were 304.

Table - Confirmatory Pre-Post CBC data.

| Section | Class | Total no. of Student | Total confirmatory data collected |
|--------------------------|---------------------|----------------------|-----------------------------------|
| Primary Age 5 - 7 Yrs | Sr. Kg to Std. 1 | 157 | 12 |
| | | | |

Total No. Of Student

Confirmatory Pre-Post CBC (complete blood count) Data 12

Number of student attempt CBC (complete blood count) at confirmatory stage and submitted pre-post CBC (complete blood count) report were 90.

| 1.18 | Table – Confirmatory Physiological – Psychological CBC data |
|------|---|
|------|---|

| Section | Class | Total no. of Student | Total Physiological data collected | | Total Psychological data collected |
|--------------------------|------------------------|----------------------------|---------------------------------------|------------------------------------|--|
| | | | With CBC Parameter | Total attempt body parameter | |
| Primary Age 5 - 7 Yrs | Sr. Kg to Std. 1 | 157 | 12 | 104 | 14 |

Total Physiological Attempt By The Student (Age 5 - 7 Yr) - 157 Received Data - 104

1.19 Table – Confirmatory detailed CBC Pre-post data.

| Class | Roll no. | Name of students | Pre CBC | Post CBC |
|---------|----------|-------------------|---------|----------|
| Sr Kg B | 14 | Saba | 12.20 | 12.11 |
| Std I A | 2 | Chobey Purva | 10.00 | 12.00 |
| | 6 | Mondhe Rashmi | 10.20 | 12.40 |
| | 12 | Shah Bhanya | 10.20 | 12.80 |
| | 24 | Deurushekar Parth | 12.70 | 13.70 |
| | 27 | Siddhesh | 9.00 | 12.50 |
| | 39 | Waghela Hansh | 11.10 | 12.80 |
| Std I B | 30 | Amanullah | 12.30 | 11.60 |
| | 1 | Bhagat Salu | 10.30 | 11.30 |
| | 11 | Shah Khyati | 13.40 | 13.50 |
| | 31 | Moksh Patel | 8.00 | 10.70 |
| | 37 | Singh Piyush | 9.30 | 13.30 |

Haemoglobin Level In An Individual Would Be A Parameter Of An Individual Life –Style.

AGE GROUP 5-7 YRS:

Graph 65. Pre-post Mean difference of HB for age group 5 – 7 years.

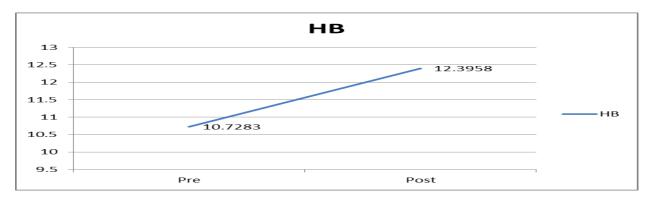


Table 107. t' test for pre-post correlation of HB for the age group 5 –7 yrs.

| | Test | Mean | Ν | Std. | Co - relation | Т | Significance |
|-----|------|---------|----|-----------|---------------|-------|--------------|
| | | | | Deviation | | | (2-tailed) |
| | | _ | _ | | | | |
| | Pre | 10.7283 | 12 | 1.64226 | 0.424 | 3.981 | 0.01 |
| Hb. | Post | 12.3958 | 12 | 0.90260 | | | |

It is observed that the **pre test** of average **10.7283** and standard deviation is **1.64226** as well as **post test** mean **12.3958** and standard deviation 1.90260. the correlation value is **.474** and obtained **t** is **3.981.**Which is significant on **.01** level and interpret that our intervention is helpful student to improvise their vital capacity by elevating haemoglobin level and improvising child respiratory function.

at our intervention is helpful student to improvise their oxygen carrying capacity at cell level as per their requirement of age growth.

<u>Literature review::::</u>

Xu Z, Etzel RA, Su H, Huang C, et.al, (2012) Children are vulnerable to temperature extremes. This paper aimed to review the literature regarding the relationship between ambient temperature and children's health and to propose future research directions. A literature search was conducted in February 2012 using the databases including Pub Med, Pro Quest, Science Direct, Scopus and Web of Science

Identify the most sensitive temperature exposure and health outcomes to quantify the impact of temperature extremes on children; elucidate the possible modifiers of the temperature and children's health relationship; and project children's disease burden under different climate change scenarios

Psychological Therapy and Nutritional Therapy as a part of intervention in Asthmatic and Non-Asthmatic adolescent by **Patricia LeaodaSilva**, **MarcoTulio de Mello,et.al (2012).** Interdisciplinary Therapy Improves Biomarkers Profile and Lung Function in Asthmatic Obese Adolescents.

This research proves importance and need of interdisciplinary expertise in schools for children to improvise their life-style. Present study has shown very strong and effective as researcher complete concept has involved not only children but parents, teacher and staff as well this kind of environment create positive psychological effect on approach.

Timothy D. Nelson*, PHD, Eric R. Benson, MA, and Chad D. Jensen, MA University of Kansas, Clinical Child Psychology Program (2012),Negative Attitudes Toward Physical Activity: Measurement and Role in Predicting Physical Activity Levels Among Preadolescents

The results suggest that negative attitudes toward physical activity can be reliably measured and may be an important target for intervention efforts to increase physical activity among children and adolescents. Whereas Researcher research has introduced interest based innovative exercise as physical activity.

(Gayford, 2009; Girlguiding UK, 2010; Ipsos Mori/DEA, 2008; Nicholls and Lee, 2006; Ofsted, 2009; vinspired, 2009; Wilson and Snell,(2010). As children and young people spend much of their time at school, this is an important sphere of their life to explore. Furthermore, the former government's emphasis on making all schools sustainable seems to have resulted in a focus on the effectiveness and impact of 'learning for sustainability'.

THE EFFECTS OF SURYANAMASKAR ON CARDIO VASCULAR AND RESPIRATORY PARAMETERS IN SCHOOL STUDENTS

SasiKumar, Sivapriya, ShyamalaThirumeni Tutor,(2011) Department of Physiology, Tagore Medical College & Hospital, India

PEFR and FVC increased significantly and RR, HR and diastolic blood pressure decreased significantly after the practice of suryanamaskar. Conclusion by researcher has showed. The beneficial effects of suryanamaskar can be applied to all schools to improve the physical health and sports activities of the students.

FB Ortega, JR Ruiz, MJ Castillo and M Sjo (2010) from Department of Physiology, School of Medicine, University of Granada, Granada, Spain and Unit for Preventive Nutrition, Sweden .This review aims to summarize the latest developments with regard to physical fitness and several health outcomes in young people.

Diego G Peroni, Beatrice Bonomo, et.al (2012) How changes in nutrition have influenced the development of allergic diseases in childhood research on importance of nutrition in childhood has been carried out in Italy.

Research carried out by team of UNICEF in **2012** for report research on health status gender wise. Adolescent females are more prone to nutritional difficulties than adolescent males. In early childhood (0–4 years),

Naturopathy as a preventive measure and always a choice of life science and bio chemistry and microbiologist researcher, in USA study carried out by **Catherine E. Ulbricht, Dawn Costa,** (2012) they examine Natural products for treatment on preventing influenza. Botanicals, minerals, and other substances produced by organisms found by Natural standard Research collaboration researcher – not only hold historical significance in various medical traditions, but they also form the basis of many modern-day drugs. Natural products are often used for primary disease prevention and treatment – or as adjuncts to conventional therapies.

Result and discussion::::

As per final report & recommendation of malnutrition monitoring committee (MMC) 2009-2012 of Maharashtra, there must be a more to home based care to prevent malnutrition. This research could be one of the solutions to prevent malnutrition. With demanding work schedules and volatile environmental changes, it's hardly shocking that lifestyle ailments continue to be world's most lethal killer.

As per this result researcher suggest that we get entire community in school as teacher, parents and our future that's our children. We must focus to school and their academic based health programme.

Despite of number of schemes and programmes and large expenditure for nutrition, the impact has not been proportionate. Beneficiaries do not utilise the scheme optimally hence do not receive the benefits. So such school based programme would increase the beneficiaries. There is a need for increasing concerns transparency & monitoring of allocated funds. Responsibility to be fixed & communicated clearly.

Result showed a solution to present & future problem of our children's basic survival through grass root level interventional programme. Result has shown that global warming can be positive when human efforts more in right direction of nature.

The researcher's purpose to declare intervention result to make the children & parents ready to live life-style suitable to the conditions & so parents keep on motivating their children to follow their life-style in future. And prepare their health to merge with post condition of unpredictable environment.

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