

ABSTRACT

A survey was undertaken to investigate the nutritional status of students at the University of the West Indies, Mona. The sample, confined to students under 26 years old, was stratified by sex, nationality and year of entry. From January to May 1984 the weight and height of 703 students were measured. The Quetelet, or Body Mass Index, (Wt.Ht^{-2}), was used to classify them as either underweight, 'normal' or overweight. Blood samples were obtained, via finger-prick, from 238 students and haemoglobin estimated using the cyanomethaemoglobin procedure (72).

A mail questionnaire was used to collect socio-demographic data and information pertaining to eating habits, physical activity, and expenditure, the constraints, and suggestions for improving their diets. Body measurements and haemoglobin levels were analysed by tenure at the UWI, socio-demographic characteristics and eating habits.

38% were classified as underweight, 55% were 'normal' with 7% overweight. There were significantly more underweight females (48%) than males (28%). Weight-for-height of the students was below the NCHS (81) 50th centile. However, the Jamaican students were taller and heavier than age-matched Jamaicans of 1959. There were more underweight Jamaican students (39%) than from the other countries. The anthropometric measurements of students living at, and away from home were similar, however females at home had higher haemoglobin levels ($p < 0.01$) than those living elsewhere. All the men, and 87% of the women had 'normal' haemoglobin levels.

The anthropometric measurements of first and third year students were similar, but more first years (41%) were underweight. 229 students (55%) returned the questionnaires. There was a significant association between nutritional status and parents' income group. While sources of funds varied, most students received financial assistance from their parents. 45% ate less food and 57% have a less varied diet since coming to the UWI.

Lack of money and poor quality cafeteria food were among the constraints to improving their diets. Many expressed the need for nutrition counselling. Detailed dietary and biochemical investigations, together with nutrition surveillance by the health services are recommended.

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My God Bless You All

Leahie H.