retrospectively. Of the total sample, 2619 girls (84% of those studied) remembered the exact month of its occurrence. Mean ages at menarche in the observed populations varied from 12 years 6 months (Georgian girls of Tbilisi City investigated in 1975/76), to 15 years 2 months (Kirghizian girls from high-altitude regions of the Pamir mountains investigated in 1968/69).

Seasonality in age at menarche showed two peaks of higher frequency across the year. This was less pronounced in January and far more developed during summer months, between June and August. A large amount of heterogeneity was revealed between groups living in north and south regions, in urban and rural environments and at low and high altitudes. Possible reasons for these differences will be discussed.

Nutritional status and season for children aged 0 to 36 months in rural Senegal
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As part of a longitudinal study of nutritional determinants and growth, 105 Senegalese children were followed fortnightly for 18 months. The study, conducted between December 1988 and August 1990 in the region of Diourbel, Senegal, included three cohorts of 35 children (average ages at recruitment 10 days, 12 months and 24 months). Weight and morbidity data were collected every 2 weeks and height was measured once a month. Morbidity data were based on mothers' observations for each 2-week period. Weight for height indices for all children present for the entirety of the study ranged from 0·0 to −1·15 Z-score (NCHS reference population). For the two cohorts with a mixed diet (12 and 24 months), weight for height indices varied in a similar way, as a function of season. Average indices for the two cohorts dropped (0·8 Z-score) from −0·4 Z-score during the dry season (October to May) to −1·2 Z-score during the rainy season (June to September). For the youngest, mainly breastfed, cohorts, no seasonal variations in weight for height indices were recorded. Morbidity, even specific (fever, diarrhoea, cough), did not vary seasonally. It averaged 0–3 days per child per month.

In conclusion, the nutritional status of children aged 12–36 months is markedly affected by season. The lowered nutritional status during the rainy season may be explained by two concomitant factors: first, food supplies are more limited during this period; and second, mothers, busy tending their fields, are less attentive to their children's needs.

Seasonality of births, deaths and marriages in rural eighteenth- and nineteenth-century Polish communities
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Seasonality of births, deaths and marriages were estimated from records in the parish registers of Polish Roman Catholic communities from various sectors of partitioned Poland and from the oldest Polish parish in the USA. Statistically significant seasonal differences of natality, mortality and entry into marriage during a year were found. These differences were dependent on regional and sociocultural factors.