

Condition of Children in Urban Slum Area

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Abstract

The present study is an attempt to explore the condition of children in urban slum area of Nai Basti near city railway station of Meerut City. For the purpose of study 50 households were selected out of which from each house one child has been selected as sample by purposive sampling technique. The study reveals that in the slum, majority of the children are male, Hindu, belongs to SC category and belongs to nuclear family. More than half (54%) of the children belong to medium size family, and half (50%) of the children whose parents are daily wage worker, whereas 48% of the children's parents earn Rs 6001-9000 per month. In the study area of research, majority of the children go to the school for education. Although majority of the children have vaccinated, still 54% of the children are malnutrition, and their health status is also bad.

Keywords: Children, Education, Health Status, Malnutrition, Slum.

Introduction

Slums are those residential areas where dwellings are in any respect unfit for human habitation by reasons of dilapidation, overcrowding, faulty arrangements and designs of such buildings, narrowness or faulty arrangement of streets, lack of ventilation, light, sanitation facilities or any combination of these factors which are detrimental to safety, health and morals. A slum is characterized by lack of durable housing, insufficient living area, lack of access to clean water, inadequate sanitation and insecure tenure (Handbook of urban statistics 2019, pp: 3). As per UN Habitat a slum is characterized by lack of durable housing, insufficient living area, lack of access to clean water, inadequate sanitation and insecure tenure (Census 2011).

The increasing concentration of the urban population in slum areas is generally equated with increasing urban poverty. It is felt that slums represent the worst of urban poverty and inequality. Slums have the highest concentrations of poor people and the worst shelter and environmental conditions. (Gupta Kamla, Arnold Fred, and Lhungdim H., 2009)

Increased urbanization is the main cause for the faster growth of slum population. The developing countries are finding difficulty to face this situation effectively. Disparities among slums exist owing to various factors. This has led to varying degrees of health burden on the slum children. Child health conditions in slums with inadequate services are worse in comparison to relatively better served slums. Identification, mapping and assessment of all slums is important for locating the hitherto missed out slums and focusing on the neediest slums. (Agarwal S. & Taneja S., 2005)

Most of the families of slums are poor and have little or no education, entire environment of these slums is nasty and crowded, Population density is very high. Their family members share same room and room size is also very small. Several families use same bath and toilet. In most cases, there is no separate bathing place for male and female. Toilets are dirty and unhygienic. (Khan Md. Arif Uddin, et al., 2015)

Review of Literature

In this study researcher presents a brief review of literature for realise the problems of the slums.

Hatekar Neeraj and Rode Sanjay (2003) measure the incidence of malnourishment among under-five children in slums in Mumbai and compare it to the incidence in Jawhar tehsil of Thane district. They found that most women could not have afforded to take time off, neither would they have had the facilities to breastfeed children. Severe malnourishment is found to be higher in Mumbai than in Jawhar. The urban data point to a greater incidence of stunting among boys than girls, though in the rural sample, such a difference is not apparent.



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It was found that the incidence of undernourishment when measured as weight for age is much higher than the incidence of stunting. Overall, the incidence of weight for age malnourishment was 28.70 per cent for the whole urban sample for boys and 30.27 per cent of the whole urban sample for girls. This is very close to the incidence among tribal children in Jawhar, which was 27.64 per cent for boys and 30.43 per cent for girls. It was also observed that conditions of child health care, maternal nutrition, access to clean drinking water and other amenities as well as access to adequate food are no better in urban slums in comparison to backward pockets of remote tribal villages. It was found that the coincidence of the three measures (stunted, wasted and underweight) is similar among urban and rural boys. However, urban girls are significantly better off compared to rural girls as far as the coincidence of all three indicators is concerned.

Singh J., et al., (2006) conducted a study to elicit the health status and extent of health related problems of adolescent girls in slums of Lucknow City. The study revealed that mean height and weight of adolescent girls in all age groups were less than ICMR standards, which shows the malnutrition in these girls. More than half i.e. 56% girls were anaemic. Similarly, majority of the girls suffered from one or more illness. In the slum areas of Lucknow, due to some sub-optimal environmental factors like diet, morbidity burden, socioeconomic status etc. have resulted in poor physical growth of girls. Researchers suggested that there is need to eliminating these negative environmental factors, for the upliftment of the girls' nutritional status so as to formulate healthy mothers of new millennium.

Malik Sarmila, et al., (2002) highlights the socio-economic determinants and working environmental conditions of child labourers in a slum area of Kolkata. The study revealed that most of child labourers belonged to the age group of 10-14 years. Average age of child labourers was found to be 12.2. Mean age of starting work was found to be 9.8 and mean birth order was 1.7. It is observed that 18% of the children had never attended school. It is found that 56% of fathers and 80% of mothers of working children were illiterate. But parental abandonment has not been found as much important in the present study. Most (85.3%) of the child workers had originated from nuclear families with mean size of family being 5.7. Considering the remuneration of the child workers, it was found that 17.3% were not paid any wages and 30.7% were paid Rs. 100 or less per month. Average remuneration of a child labourer was observed as Rs. 164.30 per month in the present study. The average earning of a garage worker observed as Rs. 117 per month. In spite of spending a bulk of their income to support their family, it was found that 43.3 % of working children could contribute only 10% of their family income. The study revealed that 66% of the child workers had to work for more than 6 hours a day. The average duration of work found as 6.53 days per week. It was observed that 16.7% of the working children did not get any rest during work. The financial support in medical care

was only available to 49.3% of child workers. It was also observed that 76% of working children were quite satisfied with their working conditions. It was also observed that the deplorable working environment of the children where 18% had to work totally exposed to sun and rain and 11.3% had to work partly under open air. Many of them worked in ill ventilated working places with inadequate light and no drinking water and latrine facility.

Jogdand Sandip S., Naik Jayshree D., (2013) studied to elicit the pattern of behavioral problems among children of age between 6 to 18 years residing in urban slum and their association with various socio-demographic factors. The study reveals that prevalent behavior problem in children was educational difficulties; male preponderance was observed for educational difficulties antisocial problems and habit problems. Educational difficulties were observed amongst lower age group while antisocial problems were observed amongst higher age groups. Both were statistically significant. It was caused by lack of proper attention by parents who are preoccupied with earning a living.

Objective of the study

To assess the condition of children living in urban slum area.

Material and methods

In this study, descriptive research design is used for the fulfilment of the objectives. Area of the study is slum area of Nai Basti near city railway station of Meerut City in Uttar Pradesh. For the purpose of study 50 households were selected out of which from each house one child has selected as sample.

Results and outcomes

The condition of children in slum area is shown in the following tables:-

Table 1:- Gender of the Respondents

S. No.	Gender	Frequency	Percentage
1	Male	36	72%
2	Female	14	28%
	TOTAL	50	100%

The facts reveal that majority (72%) of the respondents are male, whereas minority (28%) of the respondents are female.

Table 2:- Religion of the Respondents

S. No.	Religion	Frequency	Percentage
1	Hindu	43	86%
2	Muslim	07	14%
3	Others	00	00%
	TOTAL	50	100%

The facts reveal that majority (86%) of the respondents are Hindu, whereas minority (14%) of the respondents are Muslim.

Table 3:- Caste Category of the Respondents

S. No.	Caste Category	Frequency	Percentage
1	General	08	16%
2	OBC	13	26%
3	SC	29	58%
4	ST	00	00%

TOTAL	50	100%
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The facts reveal that majority (58%) of the respondents belongs to SC Category, whereas minority (16%) of the respondents belongs to General Caste Category.

Table 4:- Type of Family of the Respondents

S. No.	Type of Family	Frequency	Percentage
1	Joint Family	04	08%
2	Nuclear Family	46	92%
	TOTAL	50	100%

The facts reveal that majority (92%) of the respondents belongs to Nuclear Family, whereas minority (08%) of the respondents belongs to Joint Family.

Table 5:- Size of Family of the Respondents

S. No.	Size of Family	Frequency	Percentage
1	Small (3-4) Members	19	38%
2	Medium (5-6) Members	27	54%
3	Large (7 and above) Members	04	08%
	TOTAL	50	100%

The facts reveal that majority (54%) of the respondents belongs to medium size family, whereas minority (08%) of the respondents belongs to large size family.

Table 6:- Parent's Occupation of the Respondents

S. No.	Parent's Occupation	Frequency	Percentage
1	Own Business	05	10%
2	Labour Worker	13	26%
3	Daily Wedge Worker	25	50%
4	Other Work	07	14%
	TOTAL	50	100%

The facts reveal that half (50%) of the respondent's parents are daily wedge worker, whereas minority (10%) of the respondent's parents have own business.

Table 7:- Parent's Monthly Income of the Respondents

S. No.	Parent's Monthly Income	Frequency	Percentage
1	Up to 3000	03	06%
2	3001- 6000	14	28%
3	6001- 9000	24	48%
4	9001 and above	09	18%
	TOTAL	50	100%

The facts reveal that most (48%) of the respondent's parents earns Rs. 6001-9000 monthly, whereas least (06%) of the respondent's parents earns Rs. up to 3000 monthly.

Table 8:- Schooling Status of the Respondents

S. No.	Schooling Status	Frequency	Percentage
1	Yes	37	74%
2	No	13	26%
	TOTAL	50	100%

Asian Resonance

The facts reveal that majority (74%) of the respondents go to the school, whereas minority (26%) of the respondents not go to the school.

Table 9:- Vaccination Status of the Respondents

S. No.	Vaccination Status	Frequency	Percentage
1	Yes	47	94%
2	No	03	06%
	TOTAL	50	100%

The facts reveal that majority (94%) of the respondents are vaccinated, whereas least (26%) of the respondents are not vaccinated.

Table 10:- Malnutrition Status of the Respondents

S. No.	Malnutrition Status	Frequency	Percentage
1	Yes	27	54%
2	No	23	46%
	TOTAL	50	100%

The facts reveal that majority (54%) of the respondents are malnutrition, whereas least (26%) of the respondents are not malnutrition.

Table 11:- Health Status of the Respondents

S. No.	Health Status	Frequency	Percentage
1	Good	10	20%
2	Moderate	17	34%
3	Bad	23	46%
	TOTAL	50	100%

The facts reveal that most (46%) of the respondents have bad health status, whereas least (20%) of the respondents have good health status.

Conclusion

Thus, the above study reveals that in the slum, majority of the children are male, Hindu, belongs to SC category and belongs to nuclear family. The 54% of the children belong to medium size family, whereas half (50%) of the children's parents are daily wedge worker, and 48% of the children's parents earn Rs 6001-9000 per month. In the study area of research, majority of the children go to the school. Although majority of the children have vaccinated, still majority of them are malnutrition, and they also have bad health status.

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