

**HEALTH AWARENESS AND PROBLEMS OF SLUM WOMEN IN INDIA: A
SOCIOLOGICAL STUDY OF DAVANGERE CITY**

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ABSTRACT:

India, which is now becoming one of the fast developing countries in the world, suffers from the concomitant problems of increase in slums and poor health of the people living there. Slums are mushrooming every year due to the proliferation of the city, leading to large number migrants coming from villages in search of livelihood, especially from the districts of Davangere Hubli Dharwad, Bangalore and from states like Karnataka Bihar, UP, Odisha, to name a few. While the migration from the districts happens due to failure of monsoonal rains, those from the other states are drawn to the higher wages paid in the city. The spread of slums is also due to unchecked, unplanned and hazard growth of industries giving way to creation of concrete jungles in the urban areas. The rapid urbanizations in the entire metropolis of India resulted in the speedy growth of slums. The slums have thus become most important factors that affect the environmental structure of Indian cities. In Davangere City could be found in multiple places in the city. **Objectives:** To analyze the factors for the poor socio-economic condition of women in slums. To study various problems affecting the health of women living in slums. To highlight the threats to the health status of slum women during the antenatal and post natal periods To analyze in detail the factors leading to the low health status of women living in slums. Purposive random sampling was adopted from the available people during the day time between 10 a.m to 12 Noon and again between 2 – 4 p.m in two slums namely Basava nagar, Filterbed area and Jagat circle area garden in the corporation of Davangere city during the month of February and March 2017. Primary data was collected from 100 married women, 50 from each slum, in the age group of 19 to 40. The tool for the data collection was mainly from the interview method. The collected data were then collated and interpreted for studying the causes of poor health of women in the slums and bringing to the attention of the government and health departments. In fact, the health of women in the study areas was found to be affected due to want of proper food, working long hours without proper rest, not getting enough nutritious food during breastfeeding their children and lack of balanced diet in general. The health of women is also affected due to the practice of marrying off the girls at the completion of 18 years of age, and also due to the resultant early age pregnancies. The spacing between pregnancies is very low which too led to their declining health. The lack of sanitation facilities and unhygienic environment plays devastating effects on their health and well being. Inadequate supply of drinking water during the summer seasons and also lack of water from the hand pump for the domestic purposes carries the highest burden of disease which disproportionately affects their health and also impacts on the health of children less than 7 years of age. Lack of these basic necessities also influence the work burden, safety, education and equity of women.

Key Words: Inadequate, disproportionately, sanitation, hazard.

INTRODUCTION:

India, which is now becoming one of the fast-developing countries in the world, suffers from the concomitant problems of increase in slums and poor health of the people living there. Slums are mushrooming every year due to the proliferation of the city, leading to large number migrants coming from villages in search of livelihood, especially from the districts of Davangere Hubli Dharwad, Bangalore and from states like Karnataka Bihar, UP, Odisha, to name a few. While the migration from the districts happens due to failure of monsoonal rains, those from the other states are

drawn to the higher wages paid in the city. The spread of slums is also due to unchecked, unplanned and hazard growth of industries giving way to creation of concrete jungles in the urban areas. The rapid urbanizations in the entire metropolis of India resulted in the speedy growth of slums. The slums have thus become most important factors that affect the environmental structure of Indian cities. In DavangereCity could be found in multiple places in the city. Other factors such as shortage of developed land for housing for the poor and exorbitant prices of land beyond the reach of the poor in cities have further exacerbated the growth of slums in Gulbarga. Though there are various efforts taken by the state and central governments to stop the proliferations of slums in the cities, number of the slum dwellers are on the increase, due to the above reasons. This has resulted in the slums exerting tremendous pressure on the existing civic amenities and social infrastructure. (Khullar, 2006). Environmental conditions as well as socio-economic backwardness are increasingly becoming responsible for the poor condition of health among slum dwellers. It is commonly observed that the health status of the people in slums is below in par, particularly that of women and children as they are the most vulnerable section of the society. Most often, men in the slums are not interested in the health of their women or their children. Therefore they have become the most neglected among the society. Women are used only as productive machinery; this is seen clearly in the large number of children found in the slums everywhere. Therefore it is very essential to analyse in detail the factors leading to the low health status of women living in Slums.

OBJECTIVES:

1. To analyze the factors for the poor socio-economic condition of women in slums.
2. To study various problems affecting the health of women living in slums
3. To highlight the threats to the health status of slum women during the antenatal and post natal periods
4. To analyze in detail the factors leading to the low health status of women living in slums.

HYPOTHESIS:

1. As the level of education is very low the standard of health awareness is also very low in the area.
2. Due to male dominated society, the women remain socially and economically backward.
3. Marriage of slum women at the age of below 21 has adverse effect on their health status

METHODOLOGY:

Hitherto very little research has been undertaken in the area of health of women in the slums. It was identified from the field survey that there is no authentic data available either from the health departments or from the published research articles. Here the research study is totally based on the primary and secondary data.

Purposive random sampling was adopted from the available people during the day time between 10 a.m to 12 Noon and again between 2 – 4 p.m in two slums namely Basava nagar, Filterbed area and Jagat circle aria garden in the corporation of Davangerecity during the month of February and March 2017. Primary data was collected from 100 married women, 50 from each slum, in the age group of 19 to 40. The tool for the data collection was mainly from the interview method. The collected data were then collated and interpreted for studying the causes of poor health of women in the slums and bringing to the attention of the government and health departments.

ASSESSMENT OF HEALTH STATUS AMONG THE SLUM WOMEN:

Based on the 10 years work experience of the researcher in slums in the city of Gulbarga, the following parameters were selected to study in detail, according to the importance on health aspects of women.

- 1) Age of marriage
- 2) Age at first birth

- 3) Spacing between pregnancies
- 4) Number of children
- 5) Place of delivery
- 6) Pre and post natal care
- 7) Food habits
- 8) Sources of drinking water
- 9) Types of fuel used in cooking
- 10) Types of infections
- 11) Level of awareness on health matters

RESULTS AND DISCUSSION:

Age of Marriage:

The age of marriage for the women in the slums is a key factor in understanding their health status. It is found that 11 per cent of the women were married before 18 years of age. Only a negligible per cent of the women (5%) married after 21 years of age. The vast majority of women respondents (84%) married between 18 - 21 years of age.

AGE AT THE TIME OF FIRST BIRTH:

It is medically proven that pregnancy at early age is detrimental for the health of mother and child. In spite of the government taking several steps by enacting the laws and also disseminating awareness programmes for the prevention of marriage at an early age and avoiding pregnancy before the age of 19, the scenario among the poorer section has not changed much. It is appalling to learn that 67 per cent of the mothers delivered the first child before the age of 21.

SPACING BETWEEN PREGNANCIES:

The doctors say that there must be minimum three years gap for the second child to be born. Here in the study area, nearly half of the mothers (47%) have more than two children and this indicates clearly that the spacing between pregnancies is comparatively lower. Among 47%, more than quarter of the respondents (27%), have given birth between 2 – 4 years gap. It is shocking to find that 53 per cent of the mothers have two children who were born in less than two years gap. Only 20 per cent of the mothers have given birth to their children leaving 4 years space. Therefore it is very clear that most of the women (47%) from the study areas had low spacing years between two children and this in turn has adversely affected their health conditions.

PLACE OF DELIVERY:

One of the very important indicators for the health awareness of people is the place of delivery. It is good to note that the vast majority of the respondents (87%) chose the government hospital as the place of delivery, due to poor economical status. Only 11 per cent of the respondents preferred the private nursing home as the place of delivery, with an idea of quality care and good treatment. It is a good indicator that no mothers in the slums gave birth to their children at their homes.

FOOD HABITS AND PRE AND POST NATAL CARE OF WOMEN:

Health of the mothers is enhanced quickly due regular intake of calorie food and also pre and post natal care of women on a regular basis. More than half of the respondents (58%) from the study areas said that they were not given sufficient food at the time of their pregnancy and this shows that they just had meals only three times a day. Among these women, the data reveals that about quarter (20%) of the respondents had only single cup of tea and biscuits as their tiffin.

SOURCES OF DRINKING WATER:

Every family in the study areas has access to drinking water facility. The corporation of Davangere provides drinking water which is available almost every day through hand pumps. Where there is no facility of hand pumps, the drinking water is provided through tanks.

HEALTH AWARENESS:

Generally, health awareness and health consciousness among the slum dwellers is very low. People simply throw wastes in the street and surrounding areas. Half of the people do not have the habit of disposing the waste into the dustbins kept by the corporation of Davangere. About two thirds of the respondents (73%) said that they do not have toilets in their house. Therefore, they are using the public toilets which are unhygienic. It is commonly said that nobody used soap for cleaning their hands after the using the toilets. This act of people reveals clearly that use of soap is not at all an important matter among the slum dwellers. Women are using the public toilets only for the privacy reasons. Children mainly use the drains as the open lavatories. Mostly, men go to the banks of Coolum River and nearby the pushes of the railway tracks for open defecation. This type of unhygienic environment poses a grave concern and big threat to health of the slum dwellers. Only about 32 per cent of the families are using mosquito nets and others are using mosquito repellents to ward off the mosquitoes.

RECOMMENDATIONS:

1. Door to door health services should be provided in the slum areas by government and non government organizations.
2. Doctors and health service providers' behavior needed to be more cordial towards slum women.
3. Reducing price of medicine so that slum people could afford it.
4. Quality of sanitation facilities to be improved.
5. Distribution of iron tablet, and vitamin tablets by the Government in the locality is needed.
6. Government and non-government organizations should work in increasing awareness on different health issues.
7. Female doctors are needed to be appointed in the maternal child health centers.
8. There should be regular spray to control mosquito and proper garbage cleaning facility by Davangere City Corporation.

CONCLUSION:

This study on the health status of women in slums in the city of corporation of Davangere City reveals that the poor socio economic conditions of families adversely affect women's health. It is still a practice in slums for the women to take food after the male members of their families. This kind of structural gender imbalances do exist almost in every strata of society in India. In fact, the health of women in the study areas was found to be affected due to want of proper food, working long hours without proper rest, not getting enough nutritious food during breastfeeding their children and lack of balanced diet in general. The health of women is also affected due to the practice of marrying off the girls at the completion of 18 years of age, and also due to the resultant early age pregnancies. The spacing between pregnancies is very low which too led to their declining health. The lack of sanitation facilities and unhygienic environment plays devastating effects on their health and well being. Inadequate supply of drinking water during the summer seasons and also lack of water from the hand pump for the domestic purposes carries the highest burden of disease which disproportionately affects their health and also impacts on the health of children less than 7 years of age. Lack of these basic necessities also influence the work burden, safety, education and equity of women.

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