

Impact of Socio-Economic Factors on Health and Nutritional Awareness among Underprivileged Children: A Case Study of Khadda

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ABSTRACT:

Health and nutrition are critical determinants of the well-being and development of children, particularly those in underprivileged communities. This research explores the challenges and impacts of nutritional deficiencies among underprivileged children and highlights effective interventions and strategies to address these issues. The researcher emphasized the role of the social determinants of health, such as poverty, education, and access to healthcare, in shaping nutritional outcomes. The quantitative method was employed and data was collected from slum of Khadda. The research findings add to the knowledge on hygienic and educational programmes for underserved groups, illuminating practical tactics for empowering children and enhancing their general well-being. The study also demonstrated the inculcation of healthy habits in children of Slum of Khadda.

KEY WORDS: health, nutrition, healthy diet, slum, underprivileged children

I. INTRODUCTION

In the densely populated urban landscape of Khadda, slum children face numerous socio-economic challenges that impact their overall development, including limited access to quality education and health education, opportunities for personal growth. Addressing these challenges requires innovative approaches that not only provide educational support but also nurture the holistic development of these vulnerable populations. I started a community work creating awareness on health and nutrition among children, Health education helps a person to get knowledge about physical fitness and to be healthy. It can help you improve their personal growth. Health and nutrition are foundational to the development and well-being of children, yet underprivileged populations face significant barriers in accessing adequate nutrition. This introduction delves into the critical relationship between health and nutrition for underprivileged children, outlining the challenges and the importance of targeted research in this area underprivileged children of Khadda, particularly in low- and middle-income, are disproportionately

affected by malnutrition. The Researcher in this domain is crucial for understanding the multifaceted causes of malnutrition and developing effective interventions. Factors contributing to poor nutrition in underprivileged children include food insecurity, lack of access to nutritious foods, inadequate healthcare, poor sanitation, and limited education on healthy eating practices. Social determinants such as poverty, parental education, and community infrastructure also play significant roles.

The researcher found that health and nutrition was most important for the underprivileged children and provide teaching session on factors of affecting health and nutrition, also the researcher conducted many activities and assessment for the children's. And through the poster and chart paper also flash card had been presented for the children's so that they can understand that how is important health and nutrition for the body.

BACKGROUND OF THE STUDY

Slum areas are characterized by overcrowded living conditions, inadequate infrastructure, and limited access to basic services, present significant challenges to health and nutritional well-being. This introduction addresses the critical issue of health and nutritional awareness in slum areas of Khadda, emphasizing the necessity of targeted research to improve outcomes for these vulnerable populations. Slums are often marked by poverty, food insecurity, and a lack of access to clean water and sanitation, all of which contribute to poor health and nutritional status. Residents of slum areas face a high burden of both infectious and non-communicable diseases, driven by their living conditions and limited access to healthcare services. Malnutrition in slum populations manifests in various forms, including undernutrition, micronutrient deficiencies, and increasing rates of obesity. Undernutrition is prevalent in slum areas, with children particularly vulnerable to its effects. Stunting (low height-for-age) and wasting (low weight-for-height) are common among children living in these environments, leading to long-term developmental deficits and increased susceptibility to diseases. Micronutrient deficiencies, such as

those in iron, vitamin A, and zinc, are also widespread, resulting in anaemia, weakened immunity, and impaired cognitive development. In recent years, a paradoxical rise in obesity and related non-communicable diseases has been observed in slum populations. This "double burden" of malnutrition is attributed to the consumption of low-cost, energy-dense, nutrient-poor foods, which are more accessible than healthier alternatives. Poor dietary diversity and the reliance on processed foods contribute to this emerging public health challenge. Health and nutritional awareness are crucial in addressing these issues. However, slum residents often lack the knowledge and resources to make informed dietary choices and adopt healthy behaviours. Factors such as low literacy rates, cultural beliefs, and limited access to health information exacerbate the situation. Research aimed at understanding and improving health and nutritional awareness in slum areas must consider the unique socio-economic and environmental contexts of these communities. Effective strategies to enhance awareness include community-based education programs, the involvement of local health workers, and the use of culturally appropriate communication methods. Interventions should focus on promoting breastfeeding, balanced diets, proper hygiene practices, and regular health check-ups. Community engagement and participatory approaches are essential in designing and implementing successful interventions. Empowering residents with knowledge and resources to improve their health and nutrition can lead to sustainable behavioral changes. Additionally, policies that address the broader determinants of health, such as housing, education, and employment, are vital for creating supportive environments for health improvement. In conclusion, enhancing health and nutritional awareness in slum areas is a critical step towards improving the well-being of these underserved populations. Research in this field must prioritize the development of context-specific, community-driven interventions that address both immediate nutritional needs and the underlying socio-economic factors. By fostering greater awareness and promoting healthy behaviors, it is possible to make significant strides in reducing the health disparities faced by slum dwellers and ensuring their right to a healthy life.

STATEMENT OF THE PROBLEM

The statement of the problem is, "Impact of Socio-Economic Factors on Health and Nutritional Awareness Among Underprivileged Children: A Case Study of Khadda"

OBJECTIVES OF THE STUDY:

1. To study the health and nutritional conditions of slum of Khadda.
2. To study the awareness of underprivileged children of Khadda on health and hygiene.
3. To create awareness on healthy diet of underprivileged of Khadda.
4. To compare pre-test and post-test results on health and nutrition for underprivileged children of Khadda.

SIGNIFICANCE OF THE STUDY:

The study is important for underprivileged children because these children will be sure that they have to take care of their health and take proper nutrition so that they do not have to face any kind of health issues, and nutrition will make them physically strong and immune. According to a study conducted by Srivastava, A. et. al. 2012, most of the school-age slum children in our study had a poor nutritional status. Therefore, health and nutrition awareness are very important for underprivileged children. The researcher has chosen this topic because it is the need of the hour to be aware and make as many people as possible aware so that everyone can get health education irrespective of their caste, creed, religion and economic or social background. It is very important to make the children and parents of marginalized and disadvantage groups so that they have good health and hygiene.

The awareness will help in the development of the following:

- **Physical Development and Growth** - Proper nutrition is fundamental for the physical growth and development of children. Underprivileged children often suffer from malnutrition, which can manifest as stunting (low height for age), wasting (low weight for height), and underweight (low weight for age). These conditions are not only markers of poor nutritional status but also indicators of increased vulnerability to illnesses and infections. Adequate nutrition during the early years is critical for ensuring proper growth, strengthening the immune system, and reducing the risk of mortality and morbidity.
- **Cognitive Development and Educational Outcomes** - Nutrition profoundly affects cognitive development and educational outcomes. Essential nutrients such as iron, iodine, and omega-3 fatty acids play a significant role in brain development. Malnutrition and micronutrient deficiencies can impair cognitive function, leading to difficulties in learning, memory, and concentration. Underprivileged children who lack access to nutritious food are more likely to experience delayed cognitive development, which negatively impacts their academic performance and future

educational attainment.

- **Social and Emotional Well-being** - Health and nutrition are also linked to the social and emotional well-being of children. Malnourished children are more prone to behavioral issues, social withdrawal, and emotional distress. Proper nutrition supports not only physical and cognitive health but also emotional stability and social interactions. Ensuring that underprivileged children have access to nutritious food helps foster a supportive environment where they can thrive socially and emotionally.

II. REVIEW OF LITERATURE

A study was conducted by Syed, S., & Rao, R. (2015). which mentioned that maternal illiteracy, occupation, inadequacy of dietary knowledge and social class are significantly associated with nutritional status of children. A study conducted by Mawkhlieng and Debbarma in 2018 with the prime aim of assessing the nutritional status and associated factors for children at slum area of Khadda. A community based cross sectional survey was carried out in the study. A total of 10 children of underprivileged, were participated in this study. A pre-prepared questionnaire was used to find out the association among various factors with nutritional status. The nutritional status of underprivileged children are presented through the three segments according to the age range. Age range between 8 to 12 years children, the researcher took the survey and assessment to the children. Another study conducted by Dr. A. Patel, and Dr. R. Singh in 2020 on "Socioeconomic Status and Health Awareness in Urban Slums" This study explored the relationship between socioeconomic status and health awareness among residents of urban slums in Khadda. Data was collected through surveys and interviews with 10 children. The findings revealed that lower socioeconomic status was associated with limited access to health information and resources. The study highlighted that poverty, lack of education, and limited healthcare infrastructure significantly hindered health and nutrition awareness. Interventions that combined education with financial support were recommended to improve health outcomes in these communities. Another study conducted by Dr. S. Kaur, Prof. M. Sharma in 2019 on "Impact of Educational Programs on Nutritional Knowledge Among Rural children. This research focused on the effectiveness of educational programs in enhancing nutritional knowledge among women in rural Khadda, India. The study involved 10 children who participated in a series of workshops on balanced diets, the importance of vitamins and minerals, and food hygiene. Pre- and post-intervention assessments showed a significant increase in nutritional knowledge and improved

dietary practices. The study concluded that educational programs, when tailored to the local context and delivered through trusted community figures, could substantially improve nutrition awareness and health outcomes. Another study by Dr. L. Martinez, Dr. J. Gomez in 2018 on "Cultural Beliefs and Health Practices in Indigenous Communities" This study examined how cultural beliefs and practices influence health and nutrition awareness in indigenous communities in Khadda. Through ethnographic methods, including participant observation and interview with community members, the researchers identified that traditional beliefs often conflicted with modern health practices. However, when health education programs respected and incorporated these cultural beliefs. The another study derived by Cambridge University Press in 2007, "The role played by lay knowledge in understanding health inequalities" has received increased interest recently. Very little is known, however, about how lay knowledge of food and health varies across social class. The present exploratory study compared and contrasted ways in which people from different social backgrounds draw on and use different forms of lay knowledge about food and health. Parents from 40 families were recruited from two socio-economically different suburbs (20 families from each suburb). In-depth interviews were conducted with the mother and father in each family to examine lay knowledge about food and health. All interviews were transcribed and coded for specific themes. Responses from each suburb were compared and contrasted.

III. METHODOLOGY

A case study was done to find the status of nutrition and health of children in slum areas of Khadda. The pre test was conducted to understand the situation of the slum children and intervention was done.

Description of the participants:

The participants of this study are children residing in various slum areas of Khadda, Kushinagar. These children, typically aged between 8 and 12 years, represent a vulnerable demographic facing numerous socio-economic challenges. The description of these participants includes their demographic details, living conditions, educational background, and psychological and social context.

- **Demographic Details:**

The children involved in this study come from diverse backgrounds, yet they share common socio-economic characteristics. Most of them belong to families with low income, often engaged in informal labor such as construction work, street vending, or domestic help. The family sizes are usually large,

with several siblings sharing limited resources. The average household income is meager, barely sufficient to meet basic needs, leading to a continuous struggle for survival.

• **Living Conditions:**

Living conditions in the slum areas of Khadda are harsh and inadequate. The participants typically reside in overcrowded and poorly constructed dwellings made of temporary materials like tin, plastic sheets, and wood. These structures lack proper ventilation, sanitation, and access to clean water. The environment is often unsanitary, contributing to frequent health issues among the children such as respiratory infections, skin diseases, and gastrointestinal problems. Electricity supply is sporadic, and there is a lack of basic amenities such as toilets and safe drinking water.

The limitation of the study are as follows:

1. Children between the ages of 8 and 12 years were taken for study.
2. Children living in designated slum areas of Khadda .
3. Both children attending formal schools and those enrolled in non- formal education centers.

Data Collection Tools

- i. The study employs a multi-method approach to use ,the primary methods of data collection include surveys, interviews, and observations. Each method is selected to provide different perspectives and insights, ensuring a holistic understanding of the children's experiences and development.
- ii. **Surveys:** Surveys are used to collect quantitative data from a large sample of participants. The survey instrument includes structured questionnaires designed to assess various aspects of health and nutrition awareness, and educational outcomes. The questionnaires are tailored to be age-appropriate and easy to understand, often incorporating visual aids for younger children.
- iii. **Interviews:** Interviews are conducted to obtain qualitative data, providing deeper insights into the experiences and perceptions of the participants. Semi-structured interviews allow for flexibility, enabling the interviewer to probe for more detailed responses and explore emerging themes. Individual interviews with the children are conducted in a comfortable and non-intimidating setting. The interviews focus on their experiences with factors of affecting health activities, feelings of self-worth, and any changes in their social interactions. Interviewers use open-ended questions to encourage children to share their thoughts freely and authentically.

iv. **Observations:** Direct observations are a critical component of the data collection process, providing real-time insights into the children's behavior and interactions during teaching sessions. Observations are conducted systematically using an observation checklist and field notes to capture detailed information.

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Data Collection:

Questionnaires are used to collect quantitative data from the participants. Surveys are administered before the start of the health and nutrition activities (pre-intervention) and again after a specified period (post-intervention).

IV. RESULTS AND ANALYSIS

Analysis is the process of considering something carefully or using statistical methods in order to understand it or explain it.

In the present study the results of pre-test showed that children of slum of Khadda had low level of awareness on health and nutrition. It has been presented through pie chart.

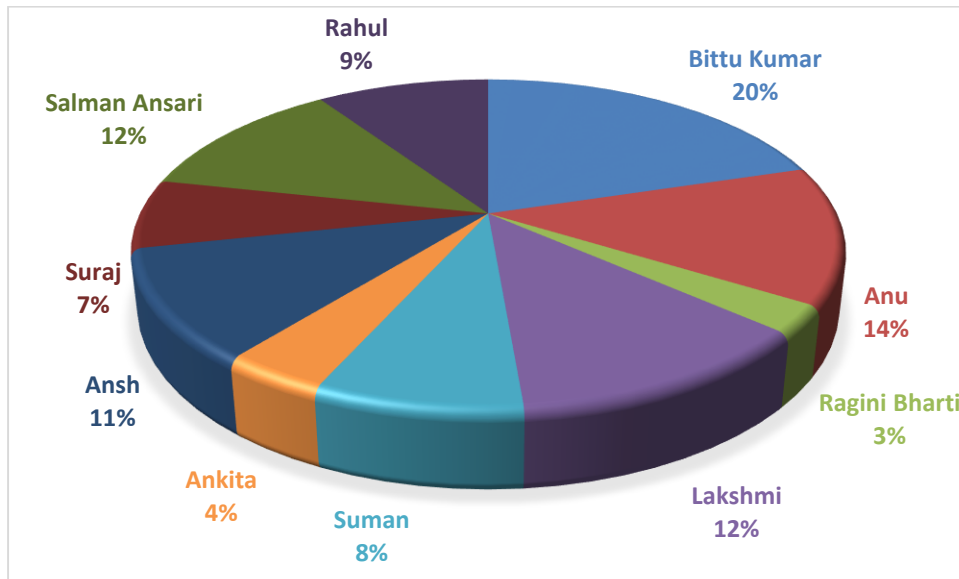


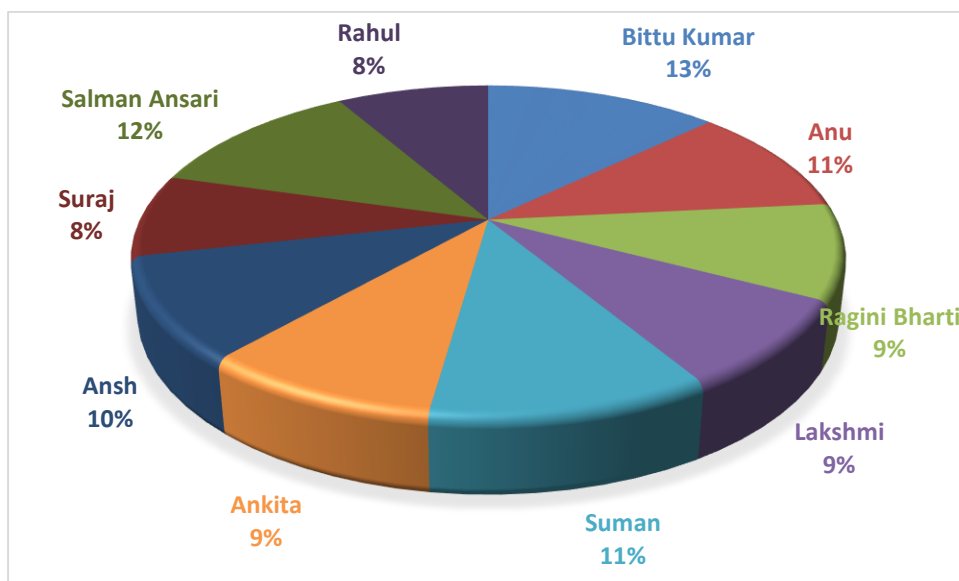
Fig 1: Pre-test showed that children of slum of Khadda had low level of awareness on health and nutrition.

INTERPRETATION: The researcher first took a pre-test to see how much awareness the children have about health and nutrition. After taking the pre-test, they found out that they do not know about health and nutrition because their minimum number is 2,3,6 out of 50 and Maximum. Number 15 came. Whose research was these Children had no awareness about health and nutrition.

ANALYSIS - The researcher conducted pre test for under privileged children and got information that how they were aware about health and nutrition. And after the pre test the researcher conducted teaching session on factors of affecting health and taught them about the nutrition. The researcher also conducted group discussion for

those children who get the information of health and factors of health . After the teaching session the researcher show the poster of nutrition elements and through the flash card the researcher tries to explain about nutrition and health that how important for the children. After doing these things the researcher had survey conduct and also revision all those things . After the session the researcher took the post test to the children, that how the get aware about health and nutrition.

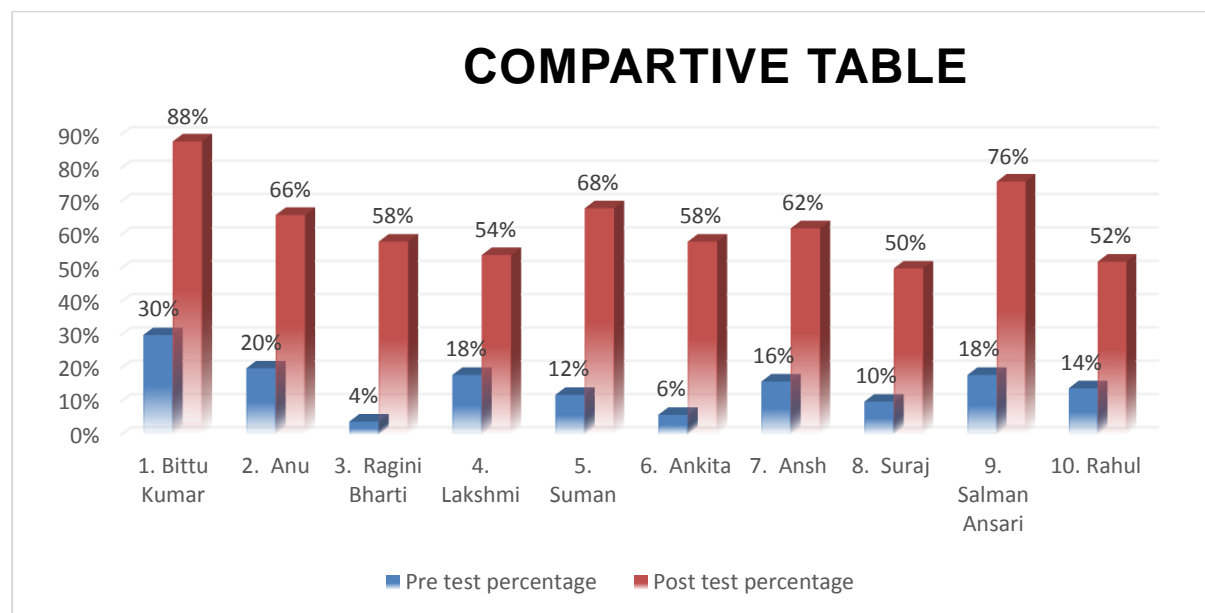
In the present study the results of post -test showed that children of slum of Khadda had high level of awareness on health and nutrition. It has been presented through pie chart.



Interpretation: After seeing the results of the pre-test, the researcher made all the children learn about health and nutrition one by one in a good way and through flash cards, teaching session video presentation, the children learned about health and

nutrition. Then the researcher conducted a post test in which the minimum number of children was 25 out of 50 and the maximum number was 40. Which researcher knows how much the children have learned and applied it in their life.

Comparative table :



V. FINDINGS OF THE STUDY

- After conducting the researcher study, it was found that children have started paying attention to health and hygiene and have started taking nutrition. The researcher described well the factors affecting health and nutritional awareness of underprivileged children.
- All children started paying attention to cleanliness and factors of affecting health , started following the rules related to health given by the researcher.
- The researcher conducted many types of activities as like group discussion, assessment teaching session, chart etc. Through which children were made aware of how important health and nutrition
- The researcher informed all those under privileged children about factors of affecting health and nutritional awareness, all those children’s started keeping care of her /his health .
- The researcher also took the pre test and post test from under privileged children.
- The researcher found that all the children’s awered about health and nutrition well being

underprivileged children aware about health and nutrition and also taught the children how important health is for them and to stay healthy and take nutrition , through this study underprivileged children of Khadda have come to know about health and nutrition which is very important for them to know. After conducting the researcher study, it was found that children have started paying attention to health and hygiene and have started taking nutrition. The researcher described well the factors affecting health and nutritional awareness of underprivileged children . The study found that comprehensive assessment ,engaging teaching approaches and also conduct the pre test and post test. And the researcher through the (TLM) aware of underprivileged children of Khadda. And health and nutrition for underprivileged children cannot be overstated. Proper nutrition is foundational for physical growth, cognitive development, and overall well-being. It strengthens the immune system, reduces the risk of chronic diseases, and supports emotional . Investing in the nutrition of underprivileged children not only enhances their individual potential but also contributes to breaking the cycle of poverty and fostering a more equitable society.

VI. CONCLUSION

This Report is based on educating for under privileged children of Khadda and making aware of health and nutrition. The research made the

FUTURE SCOPE

- Health education system should be made available for marginalized children by the

- government.
- The government should run a cleanliness and health campaign in the rural areas.
 - Limitations-
 - There were certain limitation which the researcher faced during work.
 - There was a good time for the completion of this summer assignment for a beginner researcher. Everything was new so it has taken time to complete the report.
 - Resources are limited in the rural areas. And in the Ngo were not available teaching materials.
 - There was lack of communication and they were literate but not too much therefore inside the children afraid and hesitating also unable to express themselves fully.

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