

Health Problems among Children under Five Years Living in Slum and Non Slum Areas

Thesis

Submitted For partial fulfillment of Master Degree in
Community health nursing

By

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2012

بِسْمِ اللَّهِ الرَّحْمَنِ الرَّحِيمِ

﴿قَالُوا سُبْحَانَكَ لَا عِلْمَ لَنَا إِلَّا مَا عَلَّمْتَنَا

إِنَّكَ أَنْتَ الْعَلِيمُ الْحَكِيمُ﴾

صدق الله العظيم

سورة البقرة آية (32)

Abstract

Slum children are likely to be the victim of under nutrition due to extreme poverty, lack of dwelling, inadequate access to food and exposure to polluted environment. Moreover the paucity of information regarding the optimum feeding and hygienic practices may contribute to the frequent episodes of infection resulting in growth hampering. **The aim** of this study was to Identify health problems among children under five years living in slum and non slum areas. **Settings:** The study was conducted at two maternal and child health centers from slum and non slum areas and home in Benha city **design:** A descriptive Comparative design. **Subjects:** a purposive sample of 200child and their mother. all of them distributed as, 100 child from slum area and100 child from non slum area from MCH centers. during three days weekly. **Tools:** three tools were used for data collection as an interviewing questionnaire for assessing socio demographic Characteristics and assessment of children health problems. And two observational checklist to assess children development and to observe home environment. **Results:** the result of this study showed that less than fifths of slum children were under weight and short, and about one third have average development compared with the minority of non slum children. Also more than one third of slum children suffered from lower respiratory tract infection compared with less than fifths. And more than one third of slum children suffered from gastroenteritis compared with less than fifth of non slum children. And more than half of slum children suffered from parasitic diseases compared with one third of non slum children. As well as half of slum children suffered from anemia compared with one fifths of non slum children. **Conclusion:** the study concludes that there was significant differences regarding the following. Concerning respiratory diseases it was found significant difference regarding lower RTI. As regards to gastrointestinal tract infection it was found significant difference regarding G.E and parasitic disease. Also it was found significant difference regarding anemia among slum and non slum children. **Recommendations:** Development of health education programs to reduce the incidence of children illness through mother's class in MCH centers, provided adequate and variable booklet magazine or pamphlets with simple explanation. Regular follow up of children at MCH centers for early detection and treatment.

.

Key words: *slum, non slum, health problems, children under five years old*

ACKNOWLEDGEMENT

*First and foremost, I feel always indebted to **ALLAH**, the most kind and most merciful.*

*I wish to express my deep appreciation and gratitude to **Prof. Dr. Faten K. EL-Guindi**, Professor and chairman of Community Health Nursing, Ain Shams University, for giving me the privilege of working under her supervision and for her valuable guidance, constructive criticism encouragement and patience.*

*My deepest thanks and sincere appreciation to. **Dr. Nahla ahmed abd-elaziz**, Assistant professor of Community Health Nursing, Ain Shams University, for her helpful guidance.*

I would like to express my deep thanks to all those who contributed by giving me their time, effort and encouragement to accomplish this study.

Lastly, and not least, my special gratitude to my husband and my family.

Hala abd-elaaty ahmed

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List of Abbreviation

AAP: American academy of pediatric

ADLS: Activities of daily living

AIPD: All India publishers distributors

B.C: Bachelor of chemistry

CDC: Centers of disease and control

C°: Cel-si-ous

CHN: Community health nursing

CO: Company

DNS: Disease nursing statistical

FAO: Food and Agriculture Organization of the United Nation

G.I.T I: Gastro-intestinal tract infection

HIV: Human Immune Deficiency Virus

IPIs Intestinal parasitic infections (IPIs)

1Q: Inelegance question

MCH: Maternal Health center

MOHP: Ministry of Health and Pulation

MD: (L. edicinae Doctor) medical department

Mg/kg: Milligram per killogram of the body

NCHS: National center of health statistics

NJ: New Jersey

R T I: Respiratory tract infection

PHD: (L. philosophiae doctor) doctor of philosophy

T.V: Television

U.SA: United state of America

WHO: World health organization

Introduction

Children represent an important highly vulnerable group of the population. Health of children is first and foremost of parental and community health services. Optimal health is essential for maximum utilization of educational opportunity (**Pender et al., 2005**). The children are usually the healthiest group in the community they are generally interested in new ideas and eagerness to learn. Children should be encouraged to take part in community health activities, this will increase their interest in health (**Berger, 2004**). In Egypt the children below 5 years constitutes 10.6% of total population (**Annual Census Of Ministry Of Health, 2010**).

Under five years are considered as one of the most vulnerable groups to infectious disease due to over crowding, lack of environmental sanitations, and malnutrition (**London et al., 2007**). Slum children are likely to be the victim of under nutrition due to extreme poverty, lack of dwelling, inadequate access to food and exposure to polluted environment. Moreover the paucity of information regarding the optimum feeding and hygienic practices may contribute to the frequent episodes of infection resulting in growth hampering (**Ozturk et al., 2002**).

Today, slums have come to include the vast informal settlements that are quickly becoming the most visible manifestation of urban poverty in developing world cities. Such settlements are known by many different names and are characterized by a variety of tenure arrangements. In all cases, however, the buildings found there vary from the simplest shack to permanent and sometimes surprisingly well-maintained structures, but what most slums share in common is a lack of clean water, electricity, sanitation and other basic services (**Sharad et al, 2007**).

An Egyptian expert has criticized the current situation of the population in Egypt, saying that despite the large allocations adopted by the government for slums, there has been no change and the explanation to this is that the population distribution in Egypt is not balanced and is one of the three main dimensions of the problem of population Egypt. In addition to rapid growth and the low level of population characteristics, Abdul-Muttalib Abdul-Hamid said there is a significant increase of the phenomenon of slums across the country, where the number amounted to 870 total in 2007 and slums absorbed 39 percent of the total urban population of Egypt (**abdel salam, 2010**).

From prevention to treatment. The nurses play an important roles in prevent an control of infection through provide continues education in how to avoid infection in different community sitting as schools ,churches, factory and etc, provide healthy behavior , assess the risk of acquiring an infection and stress about immunization . provide early detection and treatment. Also provide continues follow up to affect cases especially who have chronic disease or permanent impairment . and teach care givers about infection control at home (**Marcia and Jeanett, 2006**)

Significance of the study:

Children younger than 5 years, attacks rang from 2-3 illnesses per child per year in developed countries, attacks are at least 5 times more common in developing countries. in developing countries, acute diarrheal disease are responsible for 1 billion case per year and 4-5 million death per year (**Butterton and Calderwood, 2001**).

Each year around three million children under the age of five die due to environment-related diseases. Acute respiratory infections annually kill an estimated 1.6 million children under the age of five. As

much as 60 percent of acute respiratory infections worldwide are related to environmental conditions. Diarrheal diseases claim the lives of nearly 1.5 million children every year. Eighty to 90 percent of these diarrhea cases are related to environmental conditions, in particular, contaminated water and inadequate sanitation. Nearly 1 million children under the age of five died of malaria in 2008. Up to 90 percent of malaria cases are attributed to environmental factors **(WHO,2010)**.

There were 925 million malnourished people in the world in 2010, an increase of 80 million since 1990, **(FAO,2010,2008)** despite the fact that the world already produces enough food to feed everyone - 6 billion people - and could feed the double - 12 billion people **(FAO,2008)**

Intestinal parasitic infections (IPIs) are globally endemic and have been described as constituting the greatest single worldwide cause of illness and disease. IPIs are linked to lack of sanitation, lack of access to safe water and improper hygiene; therefore they occur wherever there is poverty. IPIs deprive the poorest of the poor of health, contributing to economic instability and social marginalization. The poor people of under developed nations experience a cycle where under nutrition and repeated infections lead to excess morbidity that can continue from generation to generation. People of all ages are affected by this cycle of prevalent parasitic infections; however, children are the worst affected **(Steketee and Garzo, 2003)**.

Aim of the study

This study aims to Identify health problems among children under five years old living in slum and non slum areas in Benha city.

Objectives:

1. Assess the growth and development among children under five years living in slum and non slum areas.
2. Identify the health problems among children under five years old living in slum and non slum areas.

Study Questions?

1. Are there any differences in growth and development among children (1-5 years) living in slum and non slum areas ?
2. Are there any differences in health problems among children (1-5 years) living in slum and non slum areas ?
3. Is there relation between socio demographic characteristics and health Problems among children (1-5 years) living in slum and non slum areas?

Review of Literature

Child health is one of the major concerns of public health throughout the world. In Egypt developing an awareness of child care is one of the most cherished goals. Caring for today's children is a guarantee of the nation's future. Children are true wealth of our country **(Jane and Ruth, 2002)**. In Egypt the children below 5 years constitutes 10.6% of total population **(Annual Census Of Ministry Of Health, 2010)**.

Children are the future of our society and special gifts of the world, their overall health has improved, and rates of death and illness in some areas have decreased. But we still focus on children's health particularly: children are vulnerable of malnutrition and infectious diseases, many of which can be effectively prevented or treated **(Schulte et al., 2001)**.

Under five years aged child faces many problems (e.g, physical, psychological and social problems), such as increased susceptibility to upper respiratory tract infections, inadequate peer relationships, learning disorders, respiratory and gastrointestinal problems, etc. more over, Egyptian Under five years are subjected to special stresses due to poverty, poor nourishment, suffering a variety of parasitic and infectious diseases **(Wong and Wilson, 2004)**.

A growth pattern is a complex network of various factors with a great variation at every sphere. Several investigators have provided sufficient evidence to prove that socio economic status is one of the important factor affecting the physical growth of children **(Dixit et al, 1992; Bogin 1999; and Arifeen et al, 2001)**.