
A Study of the Health Status of People in certain Slum Pockets of Thane District

Usha. P. Oomman

ABSTRACT:

World Bank estimates that 45 % of the world population lives with less than \$1 a day, of whom almost 50% are children. Hundreds of millions of people today live in urban slums, many without access to basic services. Overcrowding plays a critical role in determining the nature of interactions in the household, and is related to poor mental and physical health. It is also found that objective crowding affects negatively parents' relationships and interactions with their young children, sexual behaviour between couples, and social relationships with those living outside the home. A central aspect of subjective overcrowding is a feeling of lack of privacy, including a feeling of lack of control over others' access to information about oneself and one's life. The social and psychological effects of overcrowding are immediate, long-term, cumulative, multiple, mutually reinforcing, direct as well as indirect, and critical. This paper A Study of The Health Status of People in Certain Slum Pockets of Thane District, is a brief attempt to highlight the social and psychological effects of overcrowding in the urban slums.

Keywords: *overcrowding, social, psychological, slum colonies, space and spatial density.*

INTRODUCTION:

The World Bank estimates that 45 % of the world population is forced to live with less than \$1 a day, of whom almost 50% are children. Hundreds of millions of people today live in urban slums, many without access to basic services. They are particularly vulnerable because of the stresses of their living conditions. The WHO report on Violence and Health states that poverty does not contribute to violence on its own but instead accompanies factors such as unemployment, low educational levels, substance abuse and poor housing.

Overcrowding and crowding are used interchangeably in modern times. Overcrowding is usually defined as the presence of too many people in the available space and facilities. Overcrowding may be measured in terms of the number of rooms available per person which plays a critical role in determining the nature of interactions in the household, and is related to poor mental and physical health. It is also found that objective crowding affects negatively parents' relationships and interactions with their young children, sexual behaviour between couples, and social relationships with those living outside the home. A central aspect of subjective overcrowding is a feeling of lack of privacy, including a feeling of lack of control over others' access to information about oneself and one's life.

Recent, concerns about the impact of overcrowding on health is emerging in both developed and developing countries in conjunction with malnutrition and lack of sanitary hygiene. Studies affirm the transmission of diseases increases among people living closely together. Specifically, overcrowding increases the risk of infection as the number of potential

transmitters is increased. The result is that children and adults living in crowded conditions get more infections and more severe infections.

OBJECTIVE:

The objective of the paper is to examine the social and psychological effects of overcrowding in slum colonies.

METHODOLOGY:

This paper is a brief attempt to throw light on the nature of sociological and psychological problems of overcrowding in slum colonies of Kalyan, Ulhasnagar and Ambarnath of Thane district. The study is based on primary data collected through personal interviews. In all 150 households were interviewed. It should be emphasized that the findings and conclusions made in this paper remain preliminary. Some constraints were encountered during data collection through personal interview method. Furthermore, numerous people were on vacation and thus unavailable during the time that the interviews were conducted. Perhaps most importantly, many individuals who were contacted were reluctant to give information, especially on the issues relating to the social psychological effects of overcrowding. Those who were most able to provide first-hand information on the health and psychological pressures faced by them in slum colonies were also the most difficult to interview, and the most pressed for time when they were contacted. Also, the limited time and scope of the study did not allow for verification or cross referencing of the information obtained in interviews. Despite these limitations, a good deal of information was collected, mostly on specific conditions in particular slum colonies, as well as general information on the overall situation and effects of overcrowding.

FINDINGS:

1. Nature of the problem:

Overcrowding and its associative effects derive from:

- the high 'social density' in homes, schools and colonies.
- the high 'spatial density' of the colony, in particular, congested buildings and roads, and lack of public spaces, including playgrounds and meeting places;
- the burden placed on the already insufficient infrastructure and utilities, including roads, water supply, and electricity, and public services, including health and education.

The social and psychological effects of overcrowding are immediate, long-term, cumulative, multiple, mutually reinforcing, direct as well as indirect, and critical. Overcrowding is likely to worsen.

2. Where problems of overcrowding manifest:

Overcrowding affects all segments of the population in colonies. Social and psychological effects of overcrowding are experienced among individuals and within relationships at the following levels:

Within households, due to:

- lack of personal privacy
- exposure to others' behaviours and personal activities between families and households,
- multi-family households are common and space within households is constricted as a whole, due to:
- physical congestion
- crowded and overburdened social services, and
- limited public spaces and buildings for meeting socially between colony residents.

3. The social and psychological effects of overcrowding:

The social and psychological effects of overcrowding can be summarized as follows:

3.1. Health effects:

Overcrowding poses serious direct and indirect health risks to all segments of the population, particularly the elderly, young children, and the disabled:

- overcrowding results in insufficient ventilation in homes, causing or exacerbating respiratory illness
- susceptibility to disease, the severity of diseases, the spreading of illness, and the mortality due to disease all increase as a result of social and physical overcrowding
- overcrowding exacerbates health risks related to insufficient and poor water supply and poor sanitation systems in the colonies
- likelihood of accidents in the home and community increases
- overcrowding physically and emotionally overburdens mothers and other caregivers, increasing health risks of dependents
- lack of space and overcrowding directly impacts the physical development and psychological well being of disabled residents.

3.2. Social effects:

Overcrowding contributes to far-reaching social problems:

- it places a strain on social relations within the home and community
- overcrowding in schools and homes is linked to substandard education and functional illiteracy, and may be related to increased child labour
- it is a 'push factor' in the decisions leading to girls' early marriage (before the age of 18) which, in turn, leads to serious health and social ramifications for women and children
- overcrowding affects women's access to social and economic resources; it increases their responsibilities in the home and burdens their time.

3.3. Psychological effects:

Direct and indirect psychological effects result from overcrowding:

- lack of privacy is linked to depression and other negative psychological outcomes
- overcrowding contributes to psychological frustrations which, in turn, have a bearing on behavioural responses and residents' ability to cope with the conditions

CONCLUSION:

Overcrowding exacerbates other problems in the slum colonies, and results in potentially fatal consequences and health risks like insufficient and poor water supply and poor sanitation systems. There are insufficient programmes on the part of authorities, and insufficient resources allocated, to address social and psychological effects of overcrowding. Nonetheless, there is a great deal of concern about the issue and a belief that it is of critical importance. There is not enough information or analysis on the direct and indirect effects of overcrowding. There is a need for further study to unravel the inter-relationships of numerous effects and conditions associated with overcrowding.

Future studies should:

- involve direct information gathered from those working and living in these colonies.
- include both qualitative and quantitative data gathering.
- aim at developing programmes or projects that can address short, medium and long-term needs and issues. For example, in the short term, the direct conditions of overcrowding can be alleviated through encouraging more stringent adherence to building codes, and use of improved building materials in construction of additions to homes, and insufficient social services.
- incorporate the concerns and needs of colony residents and be alert to institutes interested in coordinating study in this area.

Finally, despite lack of agreement on the part of stakeholders concerning substantive issues linked to any solution to overcrowding, there is an urgency around the issue as well as sufficient scope to address the above mentioned issues.

BIBLIOGRAPHY

- i. Abdul Hadi, Rami (1994). "Construction and Housing in the West Bank and Gaza Strip." A paper prepared for UNCTAD.
- ii. Baum, A. and Koman, S (1976). "Differential response to anticipated crowding: psychological effects of social and spatial density," *Journal of Personality and Social Psychology* , 34 (3):526-36.
- iii. Bradley, D., Stephens, C., Harpham, T., and Cairn Cross S. (1992). *A Review of Environmental Health Impacts in Developing Country Cities* . The World Bank, p. 6.
- iv. Clauson-Kaas, Jes, et al. (1996). "Urban health: human settlement indicators of crowding," *Third World Planning Review* , 18 (3), pp.349-63.
- v. Cosgrave, John (1996). "Refugee density and dependence: practical implications of camp size," *Disasters: The Journal of Disaster Studies* , 20 (3), pp.261-70.
- vi. Edwards, J.N., and Both, A. (1977). "Crowding and human sexual behaviour," *Social Forces* , 55 (3):791-808.
- vii. Fuller, Theodore D., et al. (1996). "Chronic stress and psychological well-being: evidence from Thailand on household crowding," *Social Science Medicine* , 42 (2), pp. 265-80.

-
- viii. Gabe, Jonathan, and Williams, Paul (1986). "Is space bad for your health?: The relationship between crowding in the home and emotional distress in women," *Sociology of Health and Illness* , 8 (4) (December):351-71.
 - ix. Qouta, Samir, Punamaki, R-L., and El Sarraj, E. (1997). "House demolition and mental health: victims and witnesses," *Journal of Social Distress and the Homeless* , 6 (3):203-11.
 - x. Ruback, R.B. and Pandey, J. (1991). "Crowding, perceived control, and relative power: an analysis of households in India," *Journal of Applied Social Psychology* , 21, pp. 351-44.
 - xi. Satterthwaite, David (1995). "The underestimation of urban poverty and of its health consequences," *Third World Planning Review* , 17 (4), pp.3-12.
 - xii. Shaefer, M. (1993). *Health, Environment and Development: Approaches to Drafting Country-level Strategies for Human Well-being Under Agenda 21* . Geneva: World Health Organization.
 - xiii. World Bank (1993). *World Development Report 1993: Investing in Health*. World Bank.
 - xiv. Zeedyk-Ryan, Janice, and Smith, Gene F. (1983). "The effects of crowding on hostility, anxiety, and desire for social interaction," *Journal of Social Psychology* , 120 (2) (Aug):245-52.