



## ORIGINAL ARTICLE

### Socio-Demographic Profile of an Urban Slum of Kolkata, 2013: A Snapshot

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#### Abstract:

**Background and Objective:** : More than one third of Kolkata's population resides in slums and the proportion is expected to rise in coming years. Rational allocation of resources and addressing the health needs for all ages require understanding of socio-demographic profile of this vulnerable section of society. Structure of slums has changed not only over the years but across the regions too. The study provides a snapshot of socio-demographic profile of a slum of Kolkata.

**Methods:** The information collected by house to house survey, using census method, in the 46 slum settlements, located in well-demarcated 3.9 Km<sup>2</sup> area of South Kolkata during 2012-13. The area constitutes Urban Field Practice Area of All India Institute of Hygiene and Public Health (AIHH&PH), Kolkata

**Results:** A total of 36190 individuals (18665 males and 17525 females) resided in 9601 households with majority (67.2 %) having nuclear family structure and median household size of 4. Proportion of children 6 years or less was 6.7 %, while elderly age 65 years or more was 6.2 %. Sex ratio was 939 females per 1000 males and child sex ratio was 967. Proportion of literates was 86.5% and working population was 42.2%. Predominant religion was Hindu (91.7 %) and 85.8% of the slum dwellers were from the state of West Bengal.

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## **Conclusion:**

The study has provided crucial information of population structure of a typical Kolkata slum, for effective health planning.

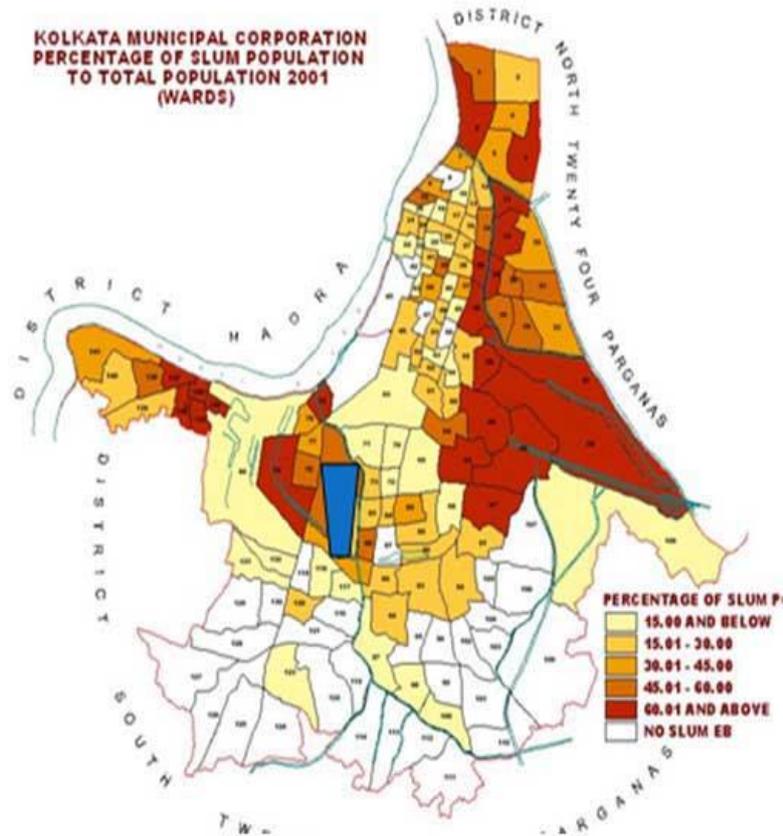
**Key words:** Kolkata, Slums, Socio-demographic Profile, Urban Field Practice Area, UHC (urban health centre), AIIH & PH. (All India Institute of Hygiene & Public Health).

## **Introduction:**

Kolkata is among the most populated metropolis of India with more than one third of its population residing in slums.<sup>1,2</sup> Kolkata ranks 10th in the urban agglomeration of the world and slums are expected to rise over years to come as per United Nations Report on Urbanization.<sup>3</sup> However these slum dwellers at large remain marginalized and deprived primarily due to poor planning.<sup>4</sup> To address the issue, Government of India's National Health Mission and Population Policy have paid special emphasis on catering to the health needs of this underserved group.<sup>5</sup> Assessment of socio-demography is the basic essential prerequisite for effective health planning. The slum composition is not only changing over time<sup>6</sup> but regional differences are also noted in socio demographic profile, more so in demography of the slum dwellers across the nation.<sup>7-10</sup> Hence, the present study, reports snapshot of socio-demographic structure of slum dwellers of Kolkata, residing in a defined geographical area, during 2012-13.

## **Methodology:**

**Settings:** The study has been undertaken in the Urban Field Practice area of All India Institute of Hygiene and Public Health, Kolkata. It extends over an area of 3.9 Km<sup>2</sup>, of Kolkata Municipal Corporation (KMC) ward numbers of 74, 81 and 82 of Chetla area of South Kolkata (Figure1). The area is bound on North by Judges Court Road, East by Tolly Nallah, West by Diamond Harbour Road and South by Boat Canal and Tollygunge Circular Road. The estimated population of 102045<sup>11</sup>, has heterogeneous mix of urban elite, very poor slum dwellers as well as the middle class. However, the study population constituted of slum dwellers in 46 settlements. These slum dwellers also include urban vulnerable groups like sex workers, garage workers, vendors, auto drivers and many other workers from unorganized sectors not covered under any health insurance scheme. These slum families live in close vicinity to posh colonies and are exposed to all kinds of urban hazards of metropolis.



**Figure 1 : Location of Study area (Urban Practice Field of AIHH & PH)**

**Field methods:** The survey in the field was done using census method by making house to house visits in each and every slum family of the area in 4 months during late 2012 and early 2013, by experienced post graduate students and field staff under supervision of the researchers. Predesigned and pretested semi structured schedule was used to record the information. Information was collected from the head of the household or any senior family member. Continuous monitoring and cross checking of 10 % households from each of the settlements with necessary corrections was also done simultaneously. Data entry, validation, compilation and report writing was done by using MS office V 2010 and Epi Info V 7.1.0.6 softwares.

**Results:**

**Table 1: Demographic Characteristics of Study (Slum) population**

Variable	Value
Study population	36190 (35.5%)

Sex Ratio	939
Infant (0-1 year)	408 (1.1 %)
Infant Sex Ratio	1000 females / 1000 males
Child (0-6 years) Population	2407 (6.7 %)
Child Sex Ratio (0-6 yrs.)	967
Population aged 15-44 years	19127 (52.9 %)
Sex Ratio among 15-44 years	984
Population aged 65 years & above	2254 (6.2 %)
Sex Ratio among aged 65 years & above	1060

Table 1 shows the demographic characteristics of the survey population. The enumerated slum population was 36190, constituting 35.5 % of the total estimated population of 102045 residing in the area. Out of total 36190 slum dwellers, 52 % were males and 48 % were females with sex ratio of 939 females per 1000 males. Infant constituted 1.1 % of population and proportion of children aged 0-6 years was 6.7 %. Child sex ratio (0-6 years) was 967 females per 1000 males. Those aged 65 years and above were 6.2 % of the population. Male: Female Ratio in the population was 1.06:1.0 and females were lower among children under five years, whereas in the age group of 15-34 years females were more. Female preponderance was again noted in those aged 75 years and above. More than 90 % of the population was Hindu and about 15 % belonged to states other than West Bengal. Proportion of Schedule Caste (SC) population was 19.8% and Schedule Tribe (ST) was 1 %.

**Table 2: Household Characteristics and Income of Study Population**

Variable	Value
<b>Number of Households (HH)</b>	<b>9601</b>
<b>Household Size</b>	
• Mean ± SD	3.8 ± 2.0
• Median	4.0
<b>Household Type</b>	
• Nuclear family	67.2 %
• Joint family	14.4 %
• Extended family	16.4 %

<ul style="list-style-type: none"> <li>Others</li> </ul>	2.0 %
<b>Monthly Per Capita Income (Rs.)</b>	
<ul style="list-style-type: none"> <li>Mean <math>\pm</math> SD</li> <li>Median (range)</li> </ul>	<p>2011<math>\pm</math>2277</p> <p>1500 (858-45000)</p>

Table 2 depicts, the mean household (HH) size to be 3.8 and median value to be 4. Majority of household had nuclear family structure (67.2%) followed by extended families (16.4%) and joint families (14.4%). Other HH types constituted a smaller proportion (2 %), which was the living arrangement for individuals belonging to similar occupational groups. Median per capita monthly income of Rs. 1500/- was estimated, as per information received.

**Table 3: Marital, Literacy & Occupational status of Study population**

Variable	percentage
Currently Married (Total)	55.0
<ul style="list-style-type: none"> <li>Male</li> <li>Female</li> </ul>	<p>54.4</p> <p>55.5</p>
Widow, widower, Separated & Deserted	6.6
<ul style="list-style-type: none"> <li>Male</li> <li>Female</li> </ul>	<p>2.5</p> <p>11.0</p>
Total Literate ( aged 7 years & above)	86.5
Female Literate (aged 7 years & above)	81.1
Educated more than Primary level	62.4
Working population	42.2
Low end jobs (Daily wagers, small vendors, HH maids, low paid workers)	11.8
Skilled Workers (mechanic drivers and other skilled workers)	7.0
Middle and Higher level of Jobs	21.7
Others	2.0

Table 3 depicts, marital status, literacy and occupation of the study population. More than half of the population (55%) were married, 11% of females and 2.5% of males were living without spouse. Literacy level was 86.5% and female literacy was 81.1%. About 42% were working with 11.8% having low end jobs.

## **Discussion:**

The slum population (35.5 %) of the study area was quite similar to slum population of Kolkata (32.3 %)<sup>1,2</sup>. The study aimed to find out demographic and family characteristics of the population which was the first essential step in assessing the health needs of the vulnerable community. The sex ratio of 939 was higher compared to Kolkata district's average of 908 for the same period, but was lower than the sex ratio of West Bengal 950<sup>2</sup>. This observation was contrary to findings of Census report 2011, where sex ratios of slums of major Indian cities were found to be lower (800-900) than non-slum areas of the same cities<sup>7</sup>. The Child Sex Ratio was even better (967). Reasons may be manifolds, like Urban Health Centre playing significant role in promoting small family norm (being in existence since 1955) and less gender preference. The number of deserted, divorced and widows, were found to be quite high (11 %) probably due to some source of earning in the surrounding area. Proportion of children (0-6 years) was found lower (6.7%) in the study population than the value of Kolkata district (7.6%), West Bengal state (8.9 %), and the country (13.2 %) <sup>2</sup>. Proportion of elderly (65 years and above) was 6.2% This is in contrast to Census observations (2011) where slum dwellers were found to have lower proportion of elderly. Median household size of 4 reported in the study, was lower than Census data (2011) for the Kolkata slum (4.5 to 4.6) <sup>2,7</sup>. The preponderance of nuclear family type (67.2 %) might have linkage with economic benefits that the government provided.

Working population constituted 42 % which was higher than the values of urban population of West Bengal (38.8 %), and might be due to higher employment opportunity in the area <sup>2</sup>. Proportion of Schedule Caste (SC) population (19.8 %) was higher than Kolkata's average (5.3 %) but was closer to West Bengal's average of (23 %). Schedule Tribe (ST) of 1% was also higher than Kolkata's average of (0.2%). This may be due to immigration of these groups from adjoining districts in search of livelihood.

## **conclusion:**

The study has provided very basic and most essential information about urban poor population which is an essential prerequisite for effective planning and evaluation of interventions.

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