

The Health Related Issues Among Children in India

Sanjay Jayawant Rode**Department of Economics, Mumbai University, India****Corresponding Author:** Sanjay Jayawant Rode, Department of Economics, Mumbai University, India.**DOI:** 10.31080/ASPE.2020.03.0200**Received:** November 28, 2019**Published:** January 01, 2020© All rights are reserved by **Sanjay Jayawant Rode.**

In India, most of the marriages are taking place at early age. The legal Age at marriage for girls is eighteen years but it is ignored in most of the cases. The girls in poor families are forced to get married early. The newly married women do not know much about the contraceptive methods. They end up with early pregnancy due lack of contraceptive use and knowledge. They do not try to visit to health care facilities and get the contraceptive knowledge. They do not eat nutritious food, take rest and go to health care centres regularly. The family members do not support them in weight gain during pregnancy and visit to health care facilities. The pregnant women required register with health care facilities for antenatal care. They must visit at least three times during pregnancy. But most of the pregnant women work with the family member without going for pre-natal care. In pre-natal visits, doctors check foetus growth, weight gain of women and provide iron folic acid Tablets. But most of poor pregnant women do not gain wait during pregnancy. The deliveries of such poor women takes place at home where health care staff is not present. Infections are rampant at home due to lack of cleanliness and primary care. Any Infections during delivery to mother or child leads to illness and death of mother and child. There are no emergency services available up to hospitals in rural areas. The children of the poor women do not get adequate nutrition. Women do not know about exclusive breastfeeding and childcare. After delivery, the poor women prepare food for family, carry drinking water and work in the farm. The women do not get time to rest, breastfeed children. Children are growing without food, care, medicines. Women do not get time to recover body after delivery. Most of the time, they miss the breastfeeding to children and they work for more hours in farm and other informal sectors. Contraceptive requirements are not discussed with health care facilities or doctors. Health care staff do not visit in rural and urban areas. It results in another pregnancy among poor women. Children of such women remain underweight, stunted and wasted. Children's are playing in surrounding areas. They met with dirty water and mud. They do not wash hand and mouth, leg and often get contact with various infections, diarrhoea, and fever. If such infections are not treated on time then they end up with different diseases at early ages. Women of lower socio-economic background with lower edu-

cation background suffer from lack of knowledge of childcare. They do not know the exclusive breastfeeding, supplementary feeding and cleanliness. Women's are busy with daily chores and taking care of other members of the family.

After delivery, all children must be vaccinated and given various required doses. But in rural area, the health care facilities are far away. It is not possible for women to take child and go to health care facilities. The public transport facilities are not adequate. In urban area, the health care facilities are overcrowded. The women do not find time to visit health care facilities. Health care facilities are overcrowded. They required waking up early and stand in a long queue to meet doctor. The other expenditure such as money for medicines, loss of employment and wages are the problems with women. The male member do not accompany with women and children. They often involved in private jobs. Malnutrition before two years effect on the intellectual growth, physical development of children. They often end up with lower education and low lifetime earnings.

Children at early age required lot of care, nutrition and health care. However, not all families afford to give such care. Therefore, it is affecting on their physical and intellectual growth. Such children do not becomes the resource of family and nation in the long term. They becomes burn on society. First six years of life in any child is important for intellectual development. Child must learn to read, write in this age. However, children in this age do not learn anything and play whole day with other children. Children are going in anganwadi where they do not learn but eat food and come again at home. Almost all the school in India start teaching after age of six. They consider it is the right age to introduce them alphabets and math. However, till this age, most of the children missing the learning opportunity. Before the completion of six years of life, children's learn drawing, talking and writing. They never forget anything what is taught in this age. This is because their brain cells are growing at highest level. The policy makers need to explore the learning at early age, ability development, skill opportunities reading, writing habits before age six. However, such opportunities with reading and learning is completely ignored in present environment.

The time has come to review all the existing policies related to health care, nutrition and education of children. Therefore, NGO's, researchers, teachers, doctors, nutritionist should come together and prepare policy framework for the physical growth and intellectual development of children in India.

Assets from publication with us

- Prompt Acknowledgement after receiving the article
- Thorough Double blinded peer review
- Rapid Publication
- Issue of Publication Certificate
- High visibility of your Published work

Website: <https://www.actascientific.com/>

Submit Article: <https://www.actascientific.com/submission.php>

Email us: editor@actascientific.com

Contact us: +91 9182824667