

Health Problems and Healthcare Utilization among Urban Slum Residents of Ghaziabad: A Cross-Sectional Study: Reg No: 343

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ABSTRACT

Introduction: Urban slums face overcrowding, poor sanitation, and limited healthcare access, leading to a high burden of disease. Respiratory infections and chronic illnesses like hypertension are common health issues in these settings. Healthcare utilization is shaped by cost, availability, and awareness, often limiting timely care. This study explores health problems and healthcare utilization patterns among urban slum residents of Ghaziabad. **Methodology:** A community-based cross-sectional study was conducted among 384 residents from four randomly selected urban slums of Ghaziabad. Participants were interviewed using a pre-tested, semi-structured questionnaire covering socio-demographic details, commonly reported illnesses, and health-seeking practices. Data were entered in MS Excel and analyzed using appropriate software, with a p value <0.05 considered significant. **Results:** The study revealed that respiratory problems were the most prevalent health issue, affecting 191 participants (49.7%), followed by skin infections (23.4%), gastrointestinal problems (14.1%), and musculoskeletal disorders (9.6%). Among chronic illnesses, hypertension (19.5%) and diabetes (12.2%) were the most common. Regarding health-seeking behavior, 64.8% of respondents preferred government hospitals for primary treatment, while 23.4% sought care from pharmacies or drug stores, and only 8.3% utilized private hospitals. The severity of symptoms (44%) and high cost of treatment (38.3%) were the major determinants influencing healthcare-seeking, whereas cultural belief was reported by only 2.3% of participants.

Conclusion: The findings highlight a dual burden of communicable and non-communicable diseases among slum residents, with respiratory illnesses and hypertension being the most common. Strengthening affordable healthcare services and implementing preventive interventions tailored to vulnerable urban slum populations.

KEYWORDS

Urban slums, Healthcare utilization