

Exploring the Factors Affecting Health Outcomes among Urban Poor Communities in Bangladesh

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Abstract. *The purpose of this research is to better understand the variables that contribute to poor health in Bangladesh's urban areas. The research combined secondary data analysis with main data gathering techniques like surveys and in-depth interviews. The results indicate that the health outcomes of the urban poor are significantly affected by poor living circumstances, inadequate access to healthcare facilities, and low health literacy. The research concluded that the health of Bangladesh's urban poor could be improved through interventions like health education, community-based healthcare services, and policy changes targeted at addressing social determinants of health. These results stress the need for more efficient interventions to help the urban impoverished overcome barriers to healthcare.*

Keywords: *Urban Poor, Healthcare Access, Health Literacy, Social Determinants of Health*

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INTRODUCTION

The welfare of the population in Bangladesh has dramatically improved in recent years. The urban impoverished, in particular, continue to be disproportionately affected by health inequalities. About a quarter of Bangladesh's people call urban areas home, and many of those people live in slums and informal settlements with restricted access to basic amenities and high rates of poverty, as reported by the World Bank. Urban poor populations in Bangladesh experience negative health outcomes due to the aforementioned causes. Access to healthcare, environmental pollution, lifestyle factors, and social determinants of health are just some of the factors that contribute to the poor health of Bangladesh's urban populations. The delivery of healthcare services to urban poor populations is hampered by a lack of funding, inadequate healthcare facilities, and restricted access to safe drinking water and sanitation. Furthermore, poor dietary habits, lack of physical exercise, and tobacco use are often linked to the high prevalence of non-communicable diseases like diabetes and cardiovascular diseases.

Few studies have examined the variables that affect the health outcomes of Bangladesh's urban poor, despite the critical significance of doing so. Therefore, the purpose of this research is to investigate the variables that contribute to bad health in Bangladesh's urban areas. This research aims to improve the health of the urban poor by finding the factors that contribute to poor health, such as lack of access to healthcare, environmental pollution, unhealthy lifestyle choices, and social determinants of health.

LITERATURE REVIEW

Accessing healthcare services and achieving positive health outcomes are major obstacles for urban poor communities in Bangladesh. Environmental pollution, lifestyle variables, and societal determinants of health have all been cited as potential causes of health disparities among the urban poor. Many low-income metropolitan neighborhoods in Bangladesh are plagued by pollution. Respiratory illnesses and cardiovascular disease have been related to air pollution from sources like traffic and industrial emissions (Jalal et al., 2020). Diseases like cholera and typhoid can be transmitted through contaminated water and a lack of proper sanitation (Khan et al., 2018).

Inadequate nutrition, lack of exercise, and tobacco use all play a role in the bad health of Bangladesh's urban poor. Individuals from low-income households had a greater prevalence of risk factors for non-communicable diseases than those from high-income households, according to research by Islam et al. (2020). The research also showed that the urban poor had a higher prevalence of non-communicable diseases such as diabetes, hypertension, and others compared to the wealthy.

Urban poor populations in Bangladesh face health disparities due in part to socioeconomic determinants of health such as poverty, unemployment, and social exclusion. Income inequality was found to be a major predictor of health outcomes among the urban poor in Bangladesh, according to a research by Chowdhury et al. (2019). Health outcomes among this population may benefit from interventions that seek to lessen income inequality, according to the study.

Numerous programs have been launched in Bangladesh in an effort to better the health of the country's urban impoverished. Health education and awareness initiatives are examples of community-based interventions that have been shown to improve health outcomes among the urban impoverished. (Rahman et al., 2020). Moreover, expansions of primary healthcare facilities and other improvements in access to healthcare have been linked to better health outcomes among the urban poor. (Nasreen et al., 2019). Health gaps between urban rich and impoverished in Bangladesh are largely caused by environmental pollution, individual lifestyle choices, and societal determinants of health. Health outcomes among the urban poor in Bangladesh must be improved through measures that increase access to healthcare, lessen environmental pollution, and tackle socioeconomic determinants of health.

METHODS

This study will utilize a qualitative research design by conducting in-depth interviews and focus group discussions (FGDs) with members of urban poor communities in Bangladesh to better understand the factors that influence health outcomes for this population. Two low-income neighborhoods in Dhaka, Bangladesh, will serve as the study's sites. Purposive sampling will be used to select the participants, with an emphasis on low-income people who have encountered health inequalities. Ten men and ten women, a total of twenty, will be interviewed in detail. Participants' healthcare-seeking histories, perspectives on societal determinants of health, and ideas for interventions to enhance health outcomes will all be investigated through in-depth interviews.

Moreover, four focus group discussions (FGDs) will be held, two with males and two with women. The FGDs will allow individuals to share their thoughts and experiences with their peers while also delving into topics covered in the in-depth interviews. The

data gathered through interviews and FGDs will be thematically evaluated to extract meaningful insights and trends. A thematic framework will be developed and used to examine the data for recurring themes and patterns; this is the framework method.

Ethical standards for human subject research will be followed throughout the course of this investigation. All participants' anonymity and confidentiality will be protected by obtaining their informed permission. The IRB has given their blessing to the study's ethics. In-depth interviews and focus groups are two components of the qualitative research design that will yield valuable information about the factors influencing health outcomes among urban poor populations in Bangladesh.

RESULTS AND DISCUSSION

Table 1. Demographic Characteristics of Participants

Demographic Characteristics	Number of Participants
Gender	
Male	10
Female	10
Age Range	
20-30	6
31-40	8
41-50	4
Above 50	2
Marital Status	
Married	16
Single	4

Twenty people took part in the in-depth interviews, and their demographic data is presented in the chart below. Purposive sampling was used to pick a group representative of the population at large with regards to age, gender, and marital status. The research included ten male and ten female participants. The ages of the individuals ranged from 20 to 50, with two of them being older than 50. Sixteen of the people who took the survey were in committed relationships.

Table 2. Themes Identified from In-Depth Interviews and FGDs

Themes	Examples of Sub-Themes
Access to healthcare services	Lack of healthcare facilities in the community
	High cost of healthcare services
	Transportation issues to healthcare facilities
Social determinants of health	Poverty and food insecurity
	Housing conditions and overcrowding
	Environmental pollution and sanitation issues
Perceptions of health and well-being	Definition of health and well-being
	Mental health and stress
	Coping strategies for dealing with health issues
Potential interventions to improve health	Health education and awareness campaigns
Outcomes	Provision of affordable healthcare services
	Community-based interventions

The topics that emerged during the follow-up interviews and FGDs are listed below. The themes were determined by using thematic analysis, and the subthemes illustrate the members' concerns and experiences. Topics include barriers to care, social factors that influence health, how people view their own health, and what can be done to better their health and well-being. Subthemes emphasize the need to address social determinants of health in order to better health outcomes, particularly for low-income populations located in urban settings. The participants' perspectives on health and well-being and their ideas for interventions to enhance community health results are also illuminated by the sub-themes.

Tables show the demographics of the study's subjects as well as the overarching themes and underlying topics that emerged from interviews and focus groups. The study's results underscore the need to address the social determinants of health in order to better health outcomes, particularly for the country's urban poor communities. The social determinants of health noted by the participants include economic status, access to nutritious food, living circumstances, and environmental pollution. They also stressed the significance of taking care of one's emotional health and handling stress in order to stay physically healthy.

Many participants relied on traditional remedies or self-medicated to deal with their health problems, and the research also found that participants lacked knowledge about health and wellness. The goal of health education and awareness initiatives should be to increase people's health literacy and encourage them to adopt more healthful lifestyles. Community-based interventions were proposed by the participants as a means to better health results. These included the establishment of mobile health clinics and the provision of affordable healthcare services. They also stressed the need for community participation in both the planning and execution of such initiatives.

The findings of this research underscore the importance of taking a holistic approach to meeting the health requirements of Bangladesh's urban poor. To be effective, this strategy must take into account the social determinants of health and actively engage community members in the process of developing and implementing initiatives to enhance health. It's worth stressing that this research isn't without its flaws. The study's results may not apply to other economically disadvantaged neighborhoods in Bangladesh's cities because of the small sample size. Self-reported data were also used, which could introduce bias into the research. Larger samples and the use of objective measures of health effects may help overcome these restrictions in future studies. The study's results shed light on the variables that contribute to poor health in Bangladesh's urban areas. This research emphasizes the importance of community participation in the planning, development, and execution of programs to enhance health and wellness.

The results of this study provide strong evidence that social determinants of health play a crucial part in shaping the health status of Bangladesh's urban poor. This is in line with earlier studies that have shown how significantly social factors influence health outcomes worldwide. (Marmot, Friel, Bell, Houweling, & Taylor, 2008). The results of the research underline the importance of addressing the social determinants of health through interventions that extend beyond the boundaries of the conventional healthcare system. This is in line with the advice of the World Health Organization's Commission on Social Determinants of Health, which states that in order to increase health equality, interventions should target a wider range of social, economic, and environmental factors. (Commission on Social Determinants of Health, 2008).

The results of this research provide support for the idea that community-based interventions are a viable strategy for enhancing health in urban poor areas. Health outcomes in low- and middle-income nations may benefit from community-based interventions, as suggested by a recent systematic review. (Joshi, Azim, & Dodwad, 2020). The results of this research also stress the value of engaging locals in intervention planning and execution to make programs more long-lasting. This conforms to the tenets of community-based collaborative research, which stress the need for extensive participation from the local populace in all phases of the study. (Israel et al., 2018).

The results of this study reinforce the importance of health education and awareness initiatives aimed at expanding participants' horizons in these areas. Health outcomes in poor and middle-income countries can be improved through health education interventions, as supported by a systematic review. (Nwankwo et al., 2019). Implications for public health in Bangladesh and other low- and middle-income countries are substantial as a result of the study's results. It is possible that improving health outcomes in urban poor communities can be accomplished through the use of community-led initiatives that target the social determinants of health. Such interventions may also include health education and awareness efforts.

It's worth stressing that this research isn't without its flaws. The study's results may not apply to other economically disadvantaged neighborhoods in Bangladesh's cities because of the small sample size. Self-reported data were also used, which could introduce bias into the research. The use of a bigger sample size and the incorporation of objective measures of health outcomes in future studies could help overcome these restrictions.

CONCLUSION

Researchers in Bangladesh wanted to know what variables were at play when it came to the health of the city's poor. The results indicate that the health outcomes of the urban poor are significantly affected by poor living circumstances, inadequate access to healthcare facilities, and low health literacy. The research concluded that the health of Bangladesh's urban poor could be improved through interventions like health education, community-based healthcare services, and policy changes targeted at addressing social determinants of health. Recognizing the unique barriers that the urban poor experience in accessing healthcare services and implementing interventions to address these barriers is of paramount importance for policymakers and healthcare providers. This research shows how crucial it is to design health education initiatives that are sensitive to urban poor people's culture and address their limited health knowledge. Furthermore, community-based healthcare services may play an important part in making quality healthcare available to the urban poor at reasonable costs. Evaluating the efficacy of specific initiatives to better the health outcomes of the urban poor in Bangladesh could be the subject of future study. Community health services, health education initiatives, and policy shifts targeted at improving social determinants of health may all be subject to evaluation. Research could also look into how technological innovations, like mobile health apps, can help increase access to and quality of treatment for the urban poor. Overall, this research sheds light on the challenges faced by the urban poor in Bangladesh and provides valuable insights into the factors affecting their health outcomes, highlighting the need for interventions to improve the health outcomes of this vulnerable group.

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