Sociodemographic and Health Status Profile of Bhatha Village – A Comparison and Analysis

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Citation

Abstract
Background: The National Government conducts a nation wide Census every 10 years. This study performed at the period between the 2 censuses (2001 & 2011) looks at the changes in a typical village of Bhatha in terms of sociodemographics and health status. Objectives: To study the socio-demographic profile and health status of the community of the village Bhatha in the district of Surat, Gujarat, India and compare it with that of India and Gujarat. Method: A cross sectional observational study done in the first week of October, 2006 in the village of Bhatha by a survey of the village using a self designed questionnaire. Results: Criteria
India
Gujarat
Bhatha Sex Ratio 933 920 959 Total Literacy Rate 64.8% 69% 94% Female Literacy Rate 53.7% 92% Unemployment Rate 60.9% 58% 53.47% Crude Death Rate 9 13.6 Conclusions: The village of Bhatha has showed to have better sex ratios, literacy rates, and employment rates but worse crude death rates than the national and state averages.

INTRODUCTION
The National Government performs the country wide Census every 10 years to provide an elaborate detailed analysis of the sociodemographic profile and other related aspects of the country. This study performed at the period between the 2 censuses (2001 & 2011) looks at the changes in a typical village of Bhatha in terms of socio-demographics and health status.

The objectives of this study being to analyse the above mentioned aspects of the community of the village Bhatha in the district of Surat, Gujarat, India and compare it with that of India and Gujarat by doing a cross sectional observational study in the first week of October, 2006 in the village of Bhatha using a self designed questionnaire.

SUBJECTS AND METHODS
A cross sectional observational study was done in the first week of October, 2006 in the village of Bhatha in Surat. The study included a survey of the village using a self designed questionnaire. 143 families in the village were questioned. A total of 719 people were a part of the study. The questionnaire included questions regarding the social demographic, and health status of people.

Questionnaire: (Figure 1)

The data was collected and was analyzed on 5th October, 2006.

RESULTS
The observations were categorized according to various demographic, social and heath indicators. They are represented accordingly below.

The total number of families surveyed was 143 and the total population under the study being 719, thus making the average family size in the village, 5 people/family.

Distribution Of Study Population According To Age And Sex: (Table 1)

Distribution Of Study Population According To Religion: (Table 2)

Distribution Of Families According To Age And The Total Monthly Income: (Table 3)

Distribution Of Study Population (>5yrs) According To The Education Obtained: (Table 4)
Distribution Of Study Population Age Wise According To The Number Of Deaths In Last One Year: (Table 5)

Distribution Of Study Population (>15 yrs) According To The Occupation: (Table 6)

Distribution Of Study Population (12-23 months) According To The Vaccination Status: (Table 7)

Distribution Of Study Population According To The Socio-Economic Status (Modified Prasad’s Classification): (Table 8)

Comparison Of Sex Ratio, Total Literacy Rate, Female Literacy Rate, Unemployment Rate And Crude Death Rate Of Bhatha, Gujarat And India: (Table 9)

Figure 1:
Questionnaire:

Household Number:

Name of Head of Family and Complete Address:

Religion:

Caste:

Total Family Income per Month:

Total Earning Members:

Number of Deaths in Last One Year with the Age of the Deceased:

*: 1 – Married, 2 – Unmarried, 3 – Divorced, 4 – Separated, 5 – Married but alone (Widower)


Vaccination cards were used as the source and where not available, the respondents were asked to point out the sites where the vaccine was given.

Distribution Of Study Population According To Age And Sex:

Table 1:

| Sex Ratio: 959 females/1000 males.
| Less than 5 Sex Ratio: 407 females/1000 males (Under 5 yr)

Figure 2:

Distribution Of Study Population According To Religion:

Table 2:

<table>
<thead>
<tr>
<th>Number of Households</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hindu</td>
<td>133</td>
</tr>
<tr>
<td>Muslim</td>
<td>0</td>
</tr>
<tr>
<td>Pati</td>
<td>10</td>
</tr>
<tr>
<td>Others</td>
<td>0</td>
</tr>
<tr>
<td>Total</td>
<td>143</td>
</tr>
</tbody>
</table>

Figure 3:

Distribution Of Families According To Age And The Total Monthly Income:

Table 3:

<table>
<thead>
<tr>
<th>Total Monthly Income</th>
<th>Number of Families</th>
</tr>
</thead>
<tbody>
<tr>
<td>500-1000</td>
<td>30</td>
</tr>
<tr>
<td>1000-1500</td>
<td>33</td>
</tr>
<tr>
<td>1500-2000</td>
<td>11</td>
</tr>
<tr>
<td>2000-3000</td>
<td>6</td>
</tr>
<tr>
<td>3000-4000</td>
<td>4</td>
</tr>
<tr>
<td>&gt;4000</td>
<td>5</td>
</tr>
</tbody>
</table>

Dependency rate: 30 %

Dependency ratio: 43 %

Distribution Of Study Population (>5yrs) According To The Education Obtained:

Table 4:

<table>
<thead>
<tr>
<th>Education</th>
<th>Male</th>
<th>Female</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bilingual</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Just Literate</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Primary (Upo 7th std)</td>
<td>125</td>
<td>191</td>
<td>276</td>
</tr>
<tr>
<td>Secondary (8-10 stds)</td>
<td>130</td>
<td>192</td>
<td>322</td>
</tr>
<tr>
<td>Higher Secondary (11-12 stds)</td>
<td>40</td>
<td>43</td>
<td>83</td>
</tr>
<tr>
<td>Graduate</td>
<td>28</td>
<td>15</td>
<td>43</td>
</tr>
<tr>
<td>Post-graduate</td>
<td>5</td>
<td>2</td>
<td>7</td>
</tr>
<tr>
<td>Total</td>
<td>340</td>
<td>341</td>
<td>681</td>
</tr>
</tbody>
</table>

Literacy Rate of Total Population: 94%

Literacy Rate of Total Female Population: 92%

Literacy Rate of Total Male Population: 96%
Distribution Of Study Population Age Wise According To The Number Of Deaths In Last One Year:

**Figure 6**

Table 5:

<table>
<thead>
<tr>
<th>Age</th>
<th>Male</th>
<th>Female</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>&lt;1</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>1-4</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>5-14</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>15-60</td>
<td>3</td>
<td>7</td>
<td>10</td>
</tr>
<tr>
<td>&gt;60</td>
<td>3</td>
<td>7</td>
<td>10</td>
</tr>
</tbody>
</table>

Crude Death Rate: 13.9 per 1000 people per year
(Calculated as Total number of deaths/ Total population instead of the median population as the study is a cross sectional study.)

Distribution Of Study Population (>15 yrs) According To The Occupation:

**Figure 7**

Table 6:

*majority of the females are housewives and also many in older age group, which have been categorized as unemployed.

Unemployment Rate of the Village: 53.47%.

Unemployment Rate amongst Females: 89.81%

Unemployment Rate amongst Males: 17.54%.

Distribution Of Study Population (12-23 months) According To The Vaccination Status:

**Figure 8**

Table 7:

<table>
<thead>
<tr>
<th>Status</th>
<th>Male</th>
<th>Female</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fully Vaccinated</td>
<td>9</td>
<td>5</td>
<td>14</td>
</tr>
<tr>
<td>Partially Vaccinated</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Not Vaccinated</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

Distribution Of Study Population According To The Socio-Economic Status (Modified Prasad’s Classification):

**DISCUSSION**

The household size of India and Gujarat are 5.3 and 5 respectively while that of the village of Bhatha is 5 which is similar to the state.

The sex ratio of India and Gujarat is 933 females/1000 males and 920 females/1000 males respectively. The sex ratio of survey sample of Bhatha village (959 females/1000 males) is higher than that of India and Gujarat. Whereas on the other hand the sex ratio for children aged less than 5 yrs is very low (407 females/1000 males) compared to the national and state ratios of 927 and 883. The causes for this adverse female to male ratio of under 5 yrs population could be the presence of female feticide and sex selective sterilization among the villagers.

At the census 2001, 80.5% have returned themselves as followers of Hindu religion, 13.4% as Muslims or the followers of Islam, 2.3% as Christians, 1.9% as Sikh, 0.80% as Buddhists and 0.4% are Jain. In addition, over 6 million have reported professing other religions and faiths including tribal religions, different from six main religions. In the study, The Hindu religion still predominates (93%) but the other major religion being significant is the Parsi religion (7%).

The literacy rate of India is 64.8% (Total), 75.3% (Male), 53.7% (Female) while that of Gujarat is 69% (Total) with the gap between males and females being typically more in rural areas. The literacy rate of Bhatha village - 94% (Total), 96% (Male), 92% (Female); is higher than national and state figures. The reason for this is the population has achieved minimum primary education which is considered
The crude death rate of India is 9/1000 people\(^1\) which is less than that of the village (13.6/1000 people). This can be explained by the lack of availability of better health facilities in the area surveyed.

Unemployment rate of India and Gujarat are 60.9\% and 58\% respectively\(^1\). The unemployment rate in the village people was 53.47\% which is lesser than the national and state levels.

The socioeconomic classification shows that the majority of the study population belonged to class IV and V, implying lower socio-economic class.

One of the aims of this study is to compare the national and state trends according to the 2001 Census with a typical village (Table 9). The village of Bhatha is a village in the outskirts of Surat city. The nearby presence of a fast growing city may be responsible for the apparently better socio demographic profile of the village. The sex ratios, total and female literacy rates and the employment indicators are better than the State and National levels, which suggest that the three are interrelated; a high literacy rate especially female, a better sex ratio and lesser unemployment. And this may be responsible to all the children studied being fully vaccinated suggesting better awareness amongst people especially the women. This suggests the changes occurring in the villages of our country in the fields of socio demographic events towards the apparent better.

The crude death rates point out to the need of better penetration and utilization of health care into the villages. And this is important considering the proportion of the Indian population living in villages. The high number of people living in the lower socio-economic class suggests the need of a financial upliftment of the villages. This has to be associated with an increase in the better integration of economics into the socio demographic and health sector such as the employment of people, increase in the basic wages to levels sustainable for a better living, better education, better health etc.

It has to also be noted that the small sample size could be a source of bias in the study. But still the figures are worth considering for an average sized village and thus concluding that the village has showed to have better sex ratios, literacy rates, and employment rates but worse crude death rates than the national and state averages.

**References**

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