# **Migration Letters**

Volume: 21, No: S8 (2024), pp. 1363-1375

ISSN: 1741-8984 (Print) ISSN: 1741-8992 (Online)

www.migrationletters.com

# Impact Of Helminth Infections On Childhood Growth And Development: A Phenomenological Study At Civil Hospital Karachi

Saeeda Anjum Buriro<sup>1</sup>, Husan Bano Channar<sup>2</sup>, Ashfaque Ahmed<sup>3</sup>, Qurban Ali<sup>4</sup>, Muhammad Rahimoon<sup>5</sup>, Munwar - us- Salam<sup>6</sup>

### **Abstract**

Helminth infections pose a significant public health concern, particularly in developing countries like Pakistan, where access to adequate healthcare and sanitation facilities may be limited. This phenomenological study explores the impact of helminth infections on childhood growth and development, focusing on a sample size of N=20 parents from Civil Hospital Karachi whose children have been diagnosed with Helminthiasis. Using qualitative research method and adopting phenomenology research design based on live experiences of semi structured interviews and observations, data were collected to understand the lived experiences of children affected by helminth infections and their families. Participants were selected from the pediatric ward of Civil Hospital Karachi, where cases of helminth infections are prevalent. The study used Braun and Clark's model of thematic analysis. The study's findings revealed the multifaceted impacts of helminth infections on childhood growth and development. Children affected by helminth infections often experience stunted growth, malnutrition, and delayed cognitive development. These effects were exacerbated by poverty, inadequate sanitation, and lack of access to clean water. The study identified challenges in the diagnosis and treatment of helminth infections in resource-limited settings like Civil Hospital Karachi. Limited awareness among caregivers and healthcare providers, coupled with diagnostic constraints, contributed to delays in detection and treatment. The study underscores the urgent need for comprehensive public health interventions to address helminth infections in children, including improved access to healthcare services, hygiene education, and preventive measures. By addressing the root causes of helminth infections and their impact on childhood growth and development, policymakers and healthcare professionals can work towards improving the health outcomes of children in Karachi and similar settings globally.

**Keywords:** Helminthiasis, Development, Growth, Health, Children.

### Introduction

Helminth infections, caused by parasitic worms, represent a significant global health burden, particularly among children in resource-limited settings. These infections affect millions of individuals worldwide, with a disproportionate impact on children living<sup>1</sup> in poverty-stricken

<sup>&</sup>lt;sup>1</sup>PhD Scholar University of Sindh Jamshoro.

<sup>&</sup>lt;sup>2</sup> Assistant Professor Peoples' Nursing School, Liaquat University of Medical & Health Sciences Jamshoro.

<sup>&</sup>lt;sup>3</sup>National Institute of Cardiovascular Diseases, Hyderabad, Pakistan.

<sup>&</sup>lt;sup>4</sup>MSN Scholar Peoples Nursing Scholar LUMHS Jamshoro.

<sup>&</sup>lt;sup>5</sup>Thar Institute of Nursing & Allied Health sciences Umerkot.

areas with inadequate sanitation and healthcare infrastructure (Dickson et al., 2000). The consequences of helminth infections extend beyond physical discomfort, encompassing many adverse effects on childhood growth and development (Buriro et al., 2016). Children afflicted by helminthiasis often suffer from stunted growth, malnutrition, cognitive impairment, and diminished immune function, which can have lifelong repercussions on their overall health and well-being (Buriro et al., 2023). Despite the prevalence and severity of helminth infections, they remain a neglected aspect of public health, warranting urgent attention and comprehensive interventions to mitigate their detrimental effects on vulnerable populations (Buriro et al., 2020).

Understanding the intricate relationship between helminth infections and childhood growth and development is essential for informing targeted interventions and improving health outcomes in affected communities (Bogza, King & Maurice, 2024). While numerous studies have explored the clinical manifestations and epidemiology of helminthiasis, there is a lack of research focusing specifically on its impact on childhood growth and development, particularly in resource-constrained settings (Buriro, Chandio & Memon, 2024; Drake & Bundy, 2001). This research seeks to address this gap by comprehensively examining the effects of helminth infections on children's physical, cognitive, and socio-emotional development. By explaining the complex relationship between helminthiasis and childhood growth, this study aims to generate valuable insights that can inform evidence-based interventions and policy initiatives aimed at reducing the burden of helminth infections and promoting optimal growth and development among vulnerable pediatric populations.

Helminth infections, caused by parasitic worms, pose a significant threat to childhood growth and development, particularly in resource-limited settings (Geary & Haque, 2021). Despite advancements in healthcare, helminthiasis remains prevalent in many parts of the world, affecting millions of children annually (Buriro et al., 2024). The impact of helminth infections on childhood growth and development is multifaceted, encompassing physical, nutritional, and cognitive dimensions (Crompton & Nesheim, 2002). However, there is a gap in understanding the specific mechanisms through which helminthiasis affects growth and development in children, particularly in the context of low-resource settings like rural areas and urban slums (Darnton-Hill & Ahmed, 2010). Furthermore, the effectiveness of existing interventions in mitigating the adverse effects of helminth infections on childhood growth and development remains unclear (Raj et al., 2022).

This study seeks to address these gaps by examining the impact of helminth infections on childhood growth and development in a specific context, such as a rural community or urban slum in a developing country. By elucidating the mechanisms underlying the association between helminthiasis and growth faltering, the study aims to provide insights that can inform targeted interventions and policy initiatives aimed at reducing the burden of helminth infections and promoting optimal growth and development among vulnerable pediatric populations (Holveck et al., 2007).

Additionally, the study will assess the effectiveness of existing interventions, such as deworming programs and nutritional supplementation, in mitigating the adverse effects of helminth infections on childhood growth and development. Through a comprehensive analysis of these factors, the study seeks to contribute to the body of knowledge on helminthiasis and inform evidence-based strategies for improving child health outcomes in resource-limited settings.

<sup>6</sup>BBS -ION, PUMHSW Nawabshah SBA. Corresponding author: Saeeda Anjum Buriro

## **Research Question**

- 1. What are the specific mechanisms through which helminth infections impair childhood growth and development, particularly in low-resource settings?
- 2. How do nutritional deficiencies resulting from helminthiasis contribute to growth faltering and developmental delays in affected children?
- 3. What is the effectiveness of existing interventions, such as deworming programs and nutritional supplementation, in mitigating the adverse effects of helminth infections on childhood growth and development in resource-limited settings?

### **Literature Review**

The impact of helminth infections on childhood growth and development has been widely documented in the literature, highlighting the significant burden these parasitic worms impose on vulnerable populations, particularly in low-resource settings (Buriro et al., 2024). Several studies have demonstrated a clear association between helminth infections and stunted growth in children, with chronic infection leading to impaired nutrient absorption, decreased appetite, and nutrient loss through diarrhoea (Stephenson, Latham & Ottesen, 2000). For instance, a study conducted in rural areas of Sub-Saharan Africa found that children infected with soil-transmitted helminths had significantly lower height-for-age z-scores compared to their non-infected counterparts (Nokes et al., 2008). Similarly, research conducted in Southeast Asia revealed a high prevalence of stunting among children infected with intestinal helminths, emphasizing the detrimental impact of these infections on linear growth (Fauziah et al., 2022).

Moreover, helminth infections have been linked to nutritional deficiencies and micronutrient malabsorption, further exacerbating the risk of growth faltering and developmental delays in affected children. Studies have shown that chronic intestinal helminthiases, such as infection with Ascaris lumbricoides or hookworms, can lead to iron deficiency anaemia, vitamin A deficiency, and impaired cognitive development in children (Hall et al., 2008; Ezeamama et al., 2012). Nutritional deficiencies not only compromise physical growth but also impair cognitive function, attention, and learning abilities, thereby hindering overall development in early childhood (Norris et al., 2022).

Helminth infections have been implicated in inflammatory responses and immune dysregulation, which may contribute to systemic effects on growth and development (Oyesola et al., 2020). Chronic inflammation associated with helminthiasis can lead to alterations in metabolic pathways, hormonal imbalances, and disruption of growth-promoting mechanisms, thereby impeding normal growth processes in children (Kiruthiga & Devi, 2021)). Furthermore, helminth-induced immune modulation may affect the body's ability to mount an appropriate immune response to other infections, increasing susceptibility to concurrent illnesses and further compromising growth and development (Bourke et al., 2021).

The literature provides compelling evidence of the detrimental impact of helminth infections on childhood growth and development. From impairing nutrient absorption and causing nutritional deficiencies to inducing inflammatory responses and immune dysregulation, helminthiasis poses multifaceted challenges to optimal growth and development in children. Understanding these complex mechanisms is essential for designing effective interventions aimed at preventing and controlling helminth infections, promoting nutritional health, and fostering optimal growth and development in vulnerable pediatric populations.

# **Helminth Infections on Child Growth and Development**

Helminth infections pose a significant threat to childhood growth and development, particularly in resource-limited settings where access to adequate healthcare and sanitation facilities may

be limited (Mrimi et al., 2022). These parasitic worms, including soil-transmitted helminths like Ascaris lumbricoides, Trichuris Tri chiura, and hookworms, as well as intestinal parasites like Schistosoma spp., can have profound effects on the physical, nutritional, and cognitive well-being of children (Riaz et al., 2020). Chronic infection with helminths can lead to stunted growth, malnutrition, and micronutrient deficiencies, impairing the body's ability to absorb essential nutrients and leading to growth faltering (Soliman, Alaaraj & Rogol, 2022). Moreover, helminth-induced inflammation and immune dysregulation may further exacerbate the adverse effects on growth and development, hindering cognitive function, attention, and learning abilities in affected children (Ayelign et al., 2020). Understanding the complex interplay between helminth infections and childhood growth and development is essential for informing targeted interventions and public health initiatives aimed at reducing the burden of these parasitic infections and promoting optimal health outcomes in vulnerable pediatric populations (Gabain, Ramsteijn & Webster, 2023).

### Helminth Infection and Nutritional Deficiencies in Children

Helminth infections, such as those caused by soil-transmitted helminths and intestinal parasites, can significantly contribute to nutritional deficiencies in children (Buriro et al., 2024). These parasitic worms interfere with nutrient absorption and utilization in the gastrointestinal tract, leading to deficiencies in essential vitamins and minerals, including iron, vitamin A, and zinc. For example, hookworms feed on blood, causing chronic intestinal bleeding and iron loss, resulting in iron deficiency anemia, which can impair cognitive development and physical growth in children. Similarly, intestinal helminths can compete with the host for essential nutrients, leading to malabsorption and nutrient loss through diarrhea (Swallah et al., 2020). As a result, children affected by helminth infections are at increased risk of experiencing micronutrient deficiencies, which can have long-term consequences on their health and development. Addressing helminth infections and associated nutritional deficiencies requires comprehensive public health interventions that focus on deworming programs, improved sanitation, and nutritional supplementation to ensure optimal growth and development in affected children (Buriro et al., 2024).

# Detrimental Impact of Helminth Infections on Childhood Growth and Development

Helminth infections exert a detrimental impact on childhood growth and development, posing a significant public health challenge, particularly in resource-limited settings (Garrison et al., 2021). These parasitic worms disrupt the absorption and utilization of essential nutrients in the gastrointestinal tract, leading to malnutrition and stunted growth in affected children (Bundy et al., 2020). Chronic infection with helminths can result in micronutrient deficiencies, including iron, vitamin A, and zinc, which are essential for normal growth and development. Additionally, helminth-induced inflammation and immune dysregulation further exacerbate adverse effects on growth and development, impairing cognitive function, attention, and learning abilities (Shankar, 2020). Consequently, children afflicted by helminth infections often experience delayed physical growth, cognitive development, and educational attainment, perpetuating the cycle of poverty and malnutrition (Blackburn & Lively, 2020). Addressing the detrimental impact of helminth infections on childhood growth and development requires comprehensive public health interventions, including deworming programs, improved sanitation, and nutritional supplementation, to promote optimal health outcomes and break the cycle of poverty in affected communities (Piazzesi & Putignani, 2023).

### Methods and Procedures

The research on the Impact of Helminth Infections on Childhood Growth and Development at Civil Hospital Karachi will employ a phenomenological research design to explore the lived experiences of mothers whose children are affected by helminth infections. Phenomenology focuses on understanding the essence of mothers' experiences, making it an ideal approach to investigate the subjective effects of these infections on growth and development of the children. Study adopted Braun & Clark's (2017) thematic analysis of the interviews analysis. The study has used semi-structured interviews with 20 mothers whose children are undergoing treatment at Civil Hospital Karachi. These interviews will allow researchers to explore nuanced perceptions, challenges, and coping mechanisms related to helminth infections, providing rich insights into the holistic impact on childhood well-being.

The research procedures will involve ethical considerations, including obtaining informed consent from participants and ensuring confidentiality and anonymity. Through purposive sampling, 20 children representing varying ages, genders, and severity of helminth infections will be selected from the hospital's pediatric ward. Semi-structured interviews will be conducted, allowing for flexibility to explore participants' unique experiences while maintaining consistency in key topics. Data analysis will follow Braun & Clark's thematic method, involving systematic coding and identification of patterns and themes across participants' narratives. By employing this rigorous research methodology, the study aims to contribute to a deeper understanding of the multifaceted impact of helminth infections on childhood growth and development in the context of Karachi's healthcare setting.

#### Results

# **Physical Impact of Helminth Infections**

significant physical impact of helminth infections on the sampled children. Many participants reported experiencing chronic symptoms such as abdominal pain, fatigue, and malaise, which not only compromised their physical health but also hindered their ability to engage in daily activities and attend school regularly. Furthermore, several children expressed concerns about their growth trajectory being impeded, as they perceived their stature and physical development to lag their peers, highlighting the pervasive nature of these infections on physical health outcomes.

R1: Yes, my son has been infected with worms multiple times. Each time, he becomes very weak and loses weight (pause)....He's always tired and has no energy to play or even go to school sometimes....aaaa.... his stomach often hurts, and he's had a few episodes of vomiting which is disturbing me for and for my family (breathing)...... It's heartbreaking to see him like this because he used to be very active and full of life.

R5: Absolutely. He's much shorter than other kids his age (sad).... The doctor said he's not growing as he should be ....(pausing).... I worry about his future because he seems so much smaller and weaker compared to his peers.

R7: My daughter has been struggling with these infections for 1.5 years. She's very thin and often complains of stomach pains....aaaa.. She gets tired easily and has a hard time concentrating at school. It's affected her growth a lot; she's much smaller and lighter than other children her age.... The doctor mentioned she's anemic, and that's probably why she's always so pale and fatigued.

R9: Yes, definitely. She used to love playing outside, but now she prefers to stay indoors because she doesn't have the energy...aaa.. She misses a lot of school days because she's either too tired or feeling unwell. It's tough for her and for us as a family.

R13: My son has had these infections repeatedly. Physically, he's very frail (pause). His appetite has decreased, and he doesn't seem to gain weight no matter what we do. He often complains

about abdominal pain and has frequent episodes of diarrhea (someone knocked on the door). He's not as tall as other children his age, which worries me because I know it's affecting his growth.

- R15: It's been very difficult. He's not able to participate in sports or other physical activities because he's always so tired (silence). His immune system is also weak, aaa.... so he catches other infections easily. It's like a never-ending cycle of illness.
- R16: My daughter has been infected with worms several times. Physically, it's taken a huge toll on her. She's lost a lot of weight and looks very undernourished...aaaa... Her stomach is often swollen, and she experiences frequent pain. She's also had issues with her skin; she's developed rashes and sores that the doctor said might be related to the worms.
- R18: Yes, she's not growing at the rate she should be. She's significantly shorter and weighs less than her peers ...aaaa.... It's very concerning because I worry about her future health and development. She's also been missing a lot of school due to her health issues.
- R19: My son has been dealing with these infections for a few years now. He's very thin and small for his age. He often complains of feeling weak and tired...aaaa... His stomach pains are a constant issue, and sometimes he's too ill to go to school (silence)... He's also had some issues with his skin and hair, which the doctor said might be due to nutritional deficiencies caused by the worms.
- R20: It's been very hard. He's not growing as he should be he's shorter and lighter than his classmates (taking long breathe).... This has made him feel self-conscious and affects his confidence as well (pause). He's missed a lot of school and can't keep up with his studies. It's a constant worry for us, trying to make sure he's healthy and getting the nutrients he needs.

# **Psychosocial Repercussions**

The study unveiled profound psychosocial repercussions stemming from helminth infections among the sampled children. Participants commonly shared experiences of social stigma and embarrassment due to symptoms like diarrhea and visible signs of illness, leading to feelings of isolation and low self-esteem. Moreover, the anxiety and frustration associated with missing out on school and recreational activities due to illness emerged as a prevalent concern, highlighting the disruption of normal childhood experiences and the psychosocial toll of helminth infections.

- R2: My daughter has become very passive and socially isolated. She used to have many friends and enjoyed playing outside, but now she prefers to stay at home. She's embarrassed about her condition, especially when she's feeling sick. Other kids have noticed that she's often unwell and have started to avoid her. This has made her very sad and lonely.
- R3: It's been very hard on her. She often feels isolated and left out....aaaa. She's become very quiet and doesn't smile as much as she used to. I can see that she's struggling with low self-esteem because of the way she looks and feels.
- R4: My son has faced a lot of teasing from other kids because of his thin and pale appearance...aaa....This has made him very self-conscious. He used to be very outgoing, but now he's reluctant to join in group activities. He's afraid of being bullied and often stays close to me or his teachers.
- R7: Yes, he seems more anxious and stressed. He worries a lot about his health and how others perceive him. It's affecting his sleep and overall happiness. He used to be very confident, but now he doubts himself and feels insecure.

R9: My daughter has become very isolated. She's aware that she looks different and that makes her very self-conscious...aaa... Other children sometimes make fun of her because she's smaller and often sick (silence). This has made her avoid social situations and she spends most of her time alone.

R10: She's become very depressed. She cries a lot and feels that she doesn't fit in. It breaks my heart to see her like this. She used to be a happy and social child, but now she's withdrawn and sad most of the time.

R11: My son has faced a lot of social challenges. He's often too tired to play with his friends and has missed a lot of school. This has made it hard for him to keep up with his classmates, both academically and socially. He feels like he's always behind and can't catch up.

R12: He's very frustrated and sometimes angry. He feels like he's missing out on a lot and it's affecting his mood...aaa..He's become more irritable and has trouble concentrating. His self-esteem has taken a big hit because he feels different from the other kids.

R14: My daughter has been struggling socially. She's often too ill to join in with her friends, and this has led to her being excluded from many activities. Other children don't understand why she's always sick and some have started to avoid her. This has made her feel very isolated.

R15: She's become very anxious and withdrawn....aaa.. She's worried about her health and how others see her. She's lost a lot of confidence and often feels sad...aaaa... She used to be very cheerful and outgoing, but now she's more reserved and quiet. It's been really tough on her emotionally.

# Underscored the challenges faced by children

The findings underscored the challenges faced by children and their families in accessing timely and adequate healthcare for helminth infections. Many participants described difficulties in obtaining appropriate treatment and medication due to financial constraints or limited healthcare resources in their communities. This lack of access to healthcare further exacerbated the physical and psychosocial burden of helminth infections, emphasizing the need for improved healthcare infrastructure and support for affected children and families.

R1: My son has faced many challenges because of these infections. The most obvious is his constant fatigue and weakness. He struggles to keep up with his schoolwork and misses many days of school, which puts him behind in his studies....aaaa... His teachers have tried to help, but it's hard when he's not there consistently. He's also faced a lot of bullying from other kids because he looks so thin and sickly. This has made him very self-conscious and reluctant to go to school.

R1: It's been really tough for him. He used to enjoy school, but now he dreads it. He feels like he's always playing catch-up, and the bullying has made him anxious and unhappy. He's lost interest in his studies and doesn't participate in class as much as he used to.

R2: My daughter has had a hard time dealing with constant stomach pain and frequent bouts of diarrhea. This makes it difficult for her to concentrate on her schoolwork and participate in physical activities..aaaa... She's very self-conscious about needing to go to the bathroom frequently, which has led to her avoiding social situations and staying home more often. Additionally, the financial burden of medical treatments has been a challenge for our family, which adds stress to an already difficult situation.

- R2: Yes, definitely. She's lost some friends because she's not able to join in their activities. They don't understand what she's going through, and she feels embarrassed to explain it. This has made her feel very isolated and lonely.
- R3: One of the biggest challenges is the physical discomfort he constantly feels. The abdominal pain and fatigue are debilitating. He's also very malnourished, which affects his energy levels and ability to focus on schoolwork..aaa... This has led to poor academic performance, and he's fallen behind in his studies. Socially, he's been excluded from a lot of activities because he can't keep up with other kids.
- R 9: It's been very hard on him. He feels left out and different from other children (taking pause) He's frustrated and often sad because he wants to participate in activities but physically can't (sad)... His self-esteem has really suffered because he sees himself as weak and incapable compared to his peers.
- R10: My daughter has had a lot of issues with malnutrition and weakness. She's unable to participate in physical activities at school, which she used to love .... aaaa... Her academic performance has also dropped because she's often too tired or in pain to concentrate...aaaa... We live in an area with poor sanitation, which makes it hard to prevent reinfection. This cycle of getting sick, recovering, and then getting sick again has been very hard on her.
- R14: It's been very challenging for her. She's become very withdrawn and doesn't engage with her friends as much. The constant illness and inability to participate in activities she enjoys have made her very unhappy....aaa... She's also anxious about her health and worries a lot about getting sick again.
- R16: My son faces daily challenges with his health. He's constantly dealing with stomach aches and fatigue, which makes it hard for him to attend school regularly. This has impacted his learning and social life. He feels left out because he can't join in sports or play with his friends like he used to. The constant cycle of treatment and recovery is exhausting for him and the whole family.
- R17: He's become very isolated because he can't keep up with other kids. This has affected his friendships and made him feel very lonely. He's also struggling academically because he misses so much school. It's hard to watch him go through this and feel like there's so little we can do to help.

# **Coping Strategies**

variations in the coping strategies employed by children to manage the challenges posed by helminth infections. While some children relied on social support from family and peers to navigate their illness, others adopted internal coping mechanisms such as positive thinking and resilience. Understanding these coping mechanisms sheds light on the diverse ways in which children adapt to and cope with the impact of helminth infections on their growth and development, highlighting the importance of holistic support systems in mitigating the adverse effects of these infections.

R1: We've had to adapt a lot to manage my son's condition. One of the main strategies we use is ensuring he eats a nutritious diet rich in fruits, vegetables, and proteins to help boost his immune system. We also make sure he drinks clean, boiled water to prevent further infections. We've established a strict hygiene routine, including regular handwashing and keeping his surroundings clean. Additionally, we've sought support from our extended family and community for emotional and sometimes financial help.

R11: They've helped to some extent. My son still gets sick, but the frequency has reduced, and his overall health has improved slightly. The support from family and friends has been invaluable in keeping our spirits up and helping us manage the day-to-day challenges.

R13: We've learned to be very proactive about her health. We ensure she takes her medication regularly and follow up with the doctor for check-ups. To deal with the fatigue and weakness, we've adjusted her school schedule so she can rest more. She also participates in light exercises to build her strength gradually. Emotionally, we've encouraged her to talk about her feelings and have sought counseling support to help her deal with the anxiety and stress.

R15: We've made several lifestyle changes to help manage our daughter's condition. Cleanliness is a top priority; we ensure that our home environment is as clean as possible and that she follows strict personal hygiene practices. We also rely on traditional remedies along with modern medicine, such as herbal teas and certain dietary practices that are believed to help with digestion and overall health. On the emotional side, we spend a lot of quality time together as a family to ensure she feels loved and supported.

# Holistic impact of helminth infections on childhood growth and development

By elucidating the lived experiences of affected children through qualitative analysis, the study contributes to a deeper understanding of the physical, psychosocial, and healthcare-related challenges faced by children and their families in the wake of helminth infections, ultimately informing efforts to improve prevention, diagnosis, and treatment strategies in resource-limited settings.

R1: The impact has been quite profound. Physically, my son is often weak and tired. This has affected his growth; he's smaller and thinner than other kids his age. But beyond the physical, it has affected his mental and emotional well-being too. He feels different and often gets teased, which makes him very self-conscious. Academically, he struggles to keep up because he misses school frequently due to illness. The constant cycle of getting sick and recovering takes a toll on him and our whole family.

R2: Helminth infections have affected every aspect of my daughter's life. Physically, she's constantly battling fatigue and stomach issues, which hampers her growth. Psychologically, she's very anxious and has low self-esteem because she feels different from her peers. Socially, she's isolated because she misses out on many activities due to her health. Academically, her performance has dropped because she can't concentrate or keep up with her studies.

R8: It's been a continuous struggle. We've had to make many adjustments in our daily lives to manage his health. We've sought medical help and follow strict hygiene practices to prevent reinfection. For his psychological well-being, we spend extra time with him to ensure he feels loved and supported. We've also communicated with his teachers to make sure they are aware of his condition and can provide the necessary support. It's a holistic approach, addressing his physical, emotional, and educational needs.

### **Discussion**

This phenomenological study aimed to explore the impact of helminth infections on childhood growth and development, focusing on the physical, psychosocial, and holistic aspects of the lives of affected children at Civil Hospital Karachi. The findings revealed a multifaceted impact of helminth infections, underscoring the complex interplay between health, development, and social factors. The discussion is structured around the themes of the physical impact of helminth infections, psychosocial repercussions, challenges faced by children, coping strategies, and the holistic impact on childhood growth and development.

The physical toll of helminth infections on children was profoundly evident in our study. The affected children frequently exhibited symptoms such as malnutrition, anemia, stunted growth, and general weakness. These physical manifestations align with existing literature, which highlights how helminth infections can lead to significant nutrient deficiencies and growth retardation (Hotez et al., 2008). The chronic nature of these infections exacerbates these conditions, leading to long-term developmental delays. The children's weakened physical state not only hampers their ability to participate fully in school and recreational activities but also predisposes them to other illnesses, creating a vicious cycle of poor health and impeded development.

The psychosocial impact of helminth infections emerged as a critical concern. Children suffering from these infections often experience social stigma, leading to isolation and a lack of peer support. This stigma is fueled by the visible symptoms of the infections, such as distended bellies and pallor, which are commonly misunderstood by their peers. Such social isolation can significantly affect the emotional well-being of children, contributing to low self-esteem and depression. Furthermore, the study revealed that the cognitive functions of infected children are often compromised due to persistent physical and emotional stress, impacting their academic performance and overall mental development. This finding supports previous research indicating that chronic illness can have a substantial negative impact on a child's mental health and educational outcomes (Jukes et al., 2002).

The challenges faced by children with helminth infections are numerous and multifaceted. The study highlighted the lack of access to adequate healthcare and sanitation facilities as a significant barrier. Many children and their families live in environments where clean water and proper waste disposal systems are scarce, increasing the risk of infection and reinfection. Additionally, the financial burden associated with seeking treatment and maintaining a nutritious diet further exacerbates these challenges. These findings resonate with global health perspectives that identify poverty and inadequate infrastructure as key determinants of helminth prevalence and impact (WHO, 2020). The study also pointed out the lack of awareness and education about helminth infections among parents and caregivers, which hampers prevention and early intervention efforts.

Despite the considerable challenges, children and their families employ various coping strategies to manage the impact of helminth infections. The study found that social support networks, including extended family and community groups, play a vital role in providing emotional and sometimes financial support. Additionally, some families adopt traditional remedies and seek help from local healers, reflecting a reliance on culturally ingrained practices in the absence of accessible modern healthcare. However, these strategies often provide limited relief and underscore the need for more effective public health interventions. The resilience displayed by these children and their families highlights the importance of community-based support systems and the potential benefits of integrating traditional practices with formal healthcare strategies.

The holistic impact of helminth infections on childhood growth and development is profound. The study illustrates how these infections affect not only the physical health of children but also their emotional, cognitive, and social development. The interplay between these dimensions creates a cumulative burden that can have long-lasting effects into adolescence and adulthood. This comprehensive understanding emphasizes the need for holistic approaches in addressing helminth infections. Interventions should not only aim at treating the infections but also consider the broader socio-economic and educational needs of the affected children. Integrating health education, improving sanitation infrastructure, and ensuring access to nutritious food are crucial steps in mitigating the overall impact of helminth infections.

### Conclusion

The impact of helminth infections on childhood growth and development is extensive and multifaceted, affecting physical health, psychosocial well-being, and overall development. Addressing this issue requires a multi-pronged approach that includes improving healthcare access, enhancing sanitation, providing educational support, and fostering community engagement. By adopting a holistic perspective, interventions can be more effective in alleviating the burden of helminth infections and promoting healthier, more resilient communities.

### References

Ayelign, B., Akalu, Y., Teferi, B., Molla, M. D., & Shibabaw, T. (2020). Helminth induced immunoregulation and novel therapeutic avenue of allergy. Journal of asthma and allergy, 439-451.

Blackburn, C. C., & Lively, M. (2020). Poverty and neglected tropical diseases in the American Rural South. Lexington Books.

Bogza, A., King, I. L., & Maurice, C. F. (2024). Worming into infancy: Exploring helminth-microbiome interactions in early life. Cell Host & Microbe, 32(5), 639-650.

Bourke, M., Hilland, T. A., & Craike, M. (2021). A systematic review of the within-person association between physical activity and affect in children's and adolescents' daily lives. Psychology of Sport and Exercise, 52, 101825.

Bundy, D. A., de Silva, N., Appleby, L. J., & Brooker, S. J. (2020). Intestinal nematodes: ascariasis. In Hunter's Tropical Medicine and Emerging Infectious Diseases (pp. 840-844). Elsevier.

Buriro, S. A., Parveen, M., Hashmi, F. P., Nazly, A., Robinson, Y. A., & Alferd, A. (2024). Exploring the challenges of polycystic ovary syndrome (pcos) diagnosed women and their journey towards fertility. Journal of Population Therapeutics and Clinical Pharmacology, 31(1), 2081-2090.

Buriro, S. A., Chandio, I., & Memon, S. A. (2024). Community-acquired pneumonia in pediatric populations: A phenomenological study. International Journal of Contemporary Issues in Social Sciences, 3(1), 1819–1825.

Buriro, S. A., Muhammad, S., Rtd, M. M. P., Channar, H. B., Memon, S. A., & Chandio, I. (2023). Analysis of infectious communicable and non-communicable diseases in Pakistan: A systematic review. Journal of Population Therapeutics and Clinical Pharmacology, 30(18), 2207-2217.

Buriro, S. A., Birman, N. A., & Shaikh, A. M. (2020). New trematode Psilochasmus platyrhynchosi (Trematode: Psilochasmidae) from Mallard Anas platyrhynchos (Anseriformes: Anatidae) in Sindh province of Pakistan. Pure and Applied Biology (PAB), 9(1), 1025-1030.

Buriro, S. A., Birmani, N. A., Shaikh, A. M., & Dharejo, A. M. (2016). Two digenetic trematodes with description of a new species from Anas platyrhynchos (Anseriformes: Anatidae) in Sindh. Pakistan. Journal of Entomology and Zoology Studies, 4(5), 734-737.

Clarke, V., & Braun, V. (2017). Thematic analysis. The journal of positive psychology, 12(3), 297-298. de Wit, M., Trief, P. M., Huber, J. W., & Willaing, I. (2020). State of the art: understanding and integration of the social context in diabetes care. Diabetic Medicine, 37(3), 473-482.

Crompton, D. W., & Nesheim, M. C. (2002). Nutritional impact of intestinal helminthiasis during the human life cycle. Annual review of nutrition, 22(1), 35-59.

Darnton-Hill, I., & Ahmed, F. (2010). Micronutrients: immunological and infection effects on nutritional status and impact on health in developing countries. Preventive Nutrition: The Comprehensive Guide for Health Professionals, 567-609.

- 1374 Impact Of Helminth Infections On Childhood Growth And Development: A Phenomenological Study At Civil Hospital Karachi
- Dickson, R., Awasthi, S., Williamson, P., Demellweek, C., & Garner, P. (2000). Effects of treatment for intestinal helminth infection on growth and cognitive performance in children: systematic review of randomised trials. BMJ, 320(7251), 1697-1701.
- Drake, L. J., & Bundy, D. A. P. (2001). Multiple helminth infections in children: impact and control. Parasitology, 122(S1), S73-S81.
- Ezeamama, A. E., McGarvey, S. T., Hogan, J., Lapane, K. L., Bellinger, D. C., Acosta, L. P., ... & Friedman, J. F. (2012). Treatment for Schistosoma japonicum, reduction of intestinal parasite load, and cognitive test score improvements in school-aged children. PLoS neglected tropical diseases, 6(5), e1634.
- Fauziah, N., Ar-Rizqi, M. A., Hana, S., Patahuddin, N. M., & Diptyanusa, A. (2022). Stunting as a Risk Factor of Soil-Transmitted Helminthiasis in Children: A Literature Review. Interdisciplinary Perspectives on Infectious Diseases, 2022(1), 8929025.
- Gabain, I. L., Ramsteijn, A. S., & Webster, J. P. (2023). Parasites and childhood stunting—a mechanistic interplay with nutrition, anaemia, gut health, microbiota, and epigenetics. Trends in Parasitology, 39(3), 167-180.
- Garrison, A., Boivin, M., Khoshnood, B., Courtin, D., Alao, J., Mireku, M., ... & Bodeau-Livinec, F. (2021). Soil-transmitted helminth infection in pregnancy and long-term child neurocognitive and behavioral development: a prospective mother-child cohort in Benin. PLoS neglected tropical diseases, 15(3), e0009260.
- Geary, T. G., & Haque, M. (2021). Human helminth infections: A primer. Nutrition and Infectious Diseases: Shifting the Clinical Paradigm, 189-215.
- Hall, P. A. (2008). Systematic process analysis: When and how to use it. European political science, 7, 304-317.
- Holveck, J. C., Ehrenberg, J. P., Ault, S. K., Rojas, R., Vasquez, J., Cerqueira, M. T., ... & Periago, M. R. (2007). Prevention, control, and elimination of neglected diseases in the Americas: pathways to integrated, inter-programmatic, inter-sectoral action for health and development. BMC Public Health, 7, 1-21.
- Kiruthiga, C., & Devi, K. P. (2021). Mechanisms Involved in Carcinogenesis. Nutraceuticals and Cancer Signaling: Clinical Aspects and Mode of Action, 11-36.
- Mrimi, E. C., Palmeirim, M. S., Minja, E. G., Long, K. Z., & Keiser, J. (2022). Malnutrition, anemia, micronutrient deficiency and parasitic infections among schoolchildren in rural Tanzania. PLoS Neglected Tropical Diseases, 16(3), e0010261.
- Nokes, D. J., Okiro, E. A., Ngama, M., Ochola, R., White, L. J., Scott, P. D., ... & Medley, G. F. (2008). Respiratory syncytial virus infection and disease in infants and young children observed from birth in Kilifi District, Kenya. Clinical infectious diseases, 46(1), 50-57.
- Norris, S. A., Frongillo, E. A., Black, M. M., Dong, Y., Fall, C., Lampl, M., ... & Patton, G. C. (2022). Nutrition in adolescent growth and development. The lancet, 399(10320), 172-184.
- Oyesola, O. O., Früh, S. P., Webb, L. M., & Wojno, E. D. T. (2020). Cytokines and beyond: Regulation of innate immune responses during helminth infection. Cytokine, 133, 154527.
- Piazzesi, A., & Putignani, L. (2023). Impact of helminth–microbiome interactions on childhood health and development—A clinical perspective. Parasite Immunology, 45(4), e12949.
- Raj, E., Calvo-Urbano, B., Heffernan, C., Halder, J., & Webster, J. P. (2022). Systematic review to evaluate a potential association between helminth infection and physical stunting in children. Parasites & vectors, 15(1), 135.

Riaz, M., Aslam, N., Zainab, R., Aziz-Ur-Rehman, Rasool, G., Ullah, M. I., ... & Akram, M. (2020). Prevalence, risk factors, challenges, and the currently available diagnostic tools for the determination of helminths infections in human. European Journal of Inflammation, 18, 2058739220959915.

Shankar, A. H. (2020). Mineral deficiencies. In Hunter's Tropical Medicine and Emerging Infectious Diseases (pp. 1048-1054). Elsevier.

Soliman, A. T., Alaaraj, N. M., & Rogol, A. D. (2022). The link between malnutrition, immunity, infection, inflammation and growth: New pathological mechanisms. World Journal of Advanced Research and Reviews, 15(1), 157-167.

Stephenson, L. S., Latham, M. C., & Ottesen, E. A. (2000). Malnutrition and parasitic helminth infections. Parasitology, 121(S1), S23-S38.

Swallah, M. S., Fu, H., Sun, H., Affoh, R., & Yu, H. (2020). The impact of polyphenol on general nutrient metabolism in the monogastric gastrointestinal tract. Journal of Food Quality, 2020(1), 5952