

A Study on Child Abuse and Its Impact on the Physical and Mental Health of Children in Bhagalpur District

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ABSTRACT

Child abuse is a major social and public health concern that adversely affects the physical, psychological, and social well-being of children. Despite legal safeguards and child protection initiatives in India, children continue to experience various forms of abuse and neglect. The present study aimed to examine the prevalence of child abuse and assess its impact on the physical and mental health of children in selected blocks of Bhagalpur District, Bihar. A descriptive and analytical cross-sectional research design was adopted. Primary data were collected from 100 children aged 10–18 years from the blocks of Bihpur, Gopalpur, Ismailpur, Kharik, Narayanpur, and Naugachhia using a structured questionnaire and interview schedule through multi-stage random sampling. The findings revealed that emotional abuse (41%) was the most prevalent form of abuse, followed by physical abuse (32%), neglect (18%), and sexual abuse (9%). Common physical health problems among abused children included injuries (29%), nutritional deficiencies (26%), frequent illness (24%), and sleep disturbances (21%). Anxiety (31%), fear (27%), and depression (19%) emerged as the major mental health concerns. Chi-square analysis indicated a significant association between child abuse and physical health status ($\chi^2 = 10.95$, $p = 0.004$) as well as mental health status ($\chi^2 = 11.68$, $p = 0.003$). Furthermore, Pearson's correlation analysis revealed a significant positive relationship between child abuse and overall health status ($r = 0.624$, $p < 0.001$). The study concludes that child abuse significantly impairs both the physical and mental well-being of children. Strengthening child protection mechanisms, promoting parental awareness, expanding counselling services, and implementing community-based interventions are essential to prevent abuse and safeguard children's health and development.

Keywords: Child Abuse, Physical Health, Mental Health, Child Protection, Bhagalpur District.

Introduction

Children are among the most vulnerable members of society and constitute the future human resource of every nation. Their physical, emotional, cognitive, and social development is greatly influenced by the environment in which they grow. A safe, nurturing, and supportive childhood is essential for healthy growth and overall well-being. However, many children experience various forms of abuse and neglect that adversely affect their development and quality of life. Child abuse is widely recognized as a major public health, social welfare, and human rights concern across the world. It includes physical, emotional, and sexual abuse, as well as neglect and exploitation that result in actual or potential harm to a child's health, development, survival, or dignity.

According to the World Health Organization (WHO), child abuse encompasses all forms of ill-treatment, neglect, and exploitation that cause actual or potential harm to children. Such experiences can have long-lasting physical, psychological, educational, and social consequences. Victims often suffer

from anxiety, depression, low self-esteem, social withdrawal, behavioural problems, and poor academic performance, which may continue into adulthood.

Globally, child abuse affects millions of children every year, making child protection a priority for governments and international organizations. In India, crimes against children have shown an increasing trend despite constitutional safeguards and legal measures such as the Protection of Children from Sexual Offences (POCSO) Act, 2012, and the Juvenile Justice (Care and Protection of Children) Act, 2015. Although several child welfare initiatives have been implemented, many cases remain unreported due to fear, social stigma, family pressure, and lack of awareness.

The problem is particularly significant in rural areas where poverty, illiteracy, child labour, migration, and limited access to support services increase children's vulnerability to abuse and neglect. In Bihar, district-level evidence regarding the prevalence and health consequences of child abuse remains limited. Bhagalpur District, especially the blocks of Bihpur, Gopalpur, Ismailpur, Kharik, Narayanpur, and Naugachhia, has received relatively little research attention in this regard.

The present study examines the prevalence of child abuse and its impact on the physical and mental health of children in selected blocks of Bhagalpur District. The findings are expected to provide valuable evidence for policymakers, educators, healthcare professionals, and child welfare agencies to strengthen child protection mechanisms and promote the overall well-being of children.

Background of the Study

Childhood is an important stage of human development that requires care, protection, and a supportive environment for healthy growth. However, many children experience violence, neglect, and exploitation that adversely affect their physical, emotional, and social well-being. Child abuse is recognized as a major social and public health concern worldwide. Child abuse refers to any act or failure to act that causes harm to a child's health, development, or dignity. It is broadly classified into four forms:

- **Physical Abuse**

Physical abuse involves the use of force that causes injury or pain to a child. It can result in physical harm and affect overall development.

- **Emotional or Psychological Abuse**

Emotional abuse includes humiliation, threats, rejection, and other behaviours that damage a child's emotional well-being. It often leads to anxiety, depression, and low self-esteem.

- **Sexual Abuse**

Sexual abuse involves a child in inappropriate sexual activities or exploitation. It can have severe psychological and emotional consequences.

- **Neglect**

Neglect refers to the failure of caregivers to provide adequate care, nutrition, education, healthcare, and emotional support. It may hinder a child's physical and cognitive development.

In India, child abuse remains a serious concern despite various child protection laws and welfare programmes. The problem is particularly significant in rural areas where poverty, illiteracy, and limited access to support services increase children's vulnerability. In Bihar, district-level studies on child abuse are limited.

Therefore, the present study examines the prevalence of child abuse and its impact on the physical and mental health of children in selected blocks of Bhagalpur District.

Statement of the Problem

Child abuse is a serious yet often hidden social problem that affects children's physical, emotional, and psychological development. Despite legal safeguards and child protection policies, many children continue to experience physical abuse, emotional abuse, sexual abuse, and neglect. In India, reported crimes against children have increased in recent years, although many cases remain unreported due to fear, stigma, and lack of awareness.

Child abuse can lead to various health problems, including injuries, malnutrition, anxiety, depression, low self-esteem, and poor academic performance. The problem is particularly significant in rural areas where poverty, illiteracy, and limited access to support services increase children's vulnerability.

In Bihar, especially in the blocks of Bihpur, Gopalpur, Ismailpur, Kharik, Narayanpur, and Naugachhia of Bhagalpur District, limited research has been conducted on the prevalence of child abuse and its health consequences. Existing studies mainly focus on national or state-level data, leaving a gap in local evidence. Therefore, the present study seeks to examine the prevalence of child abuse and its impact on the physical and mental health of children in the selected blocks of Bhagalpur District.

Need and Significance of the Study

Child abuse is a serious social and public health issue that adversely affects the physical, mental, emotional, and social development of children. Despite the implementation of various child protection laws and welfare programmes in India, cases of child abuse continue to increase. NCRB reports indicate a rising trend in crimes against children, highlighting the need for further research and intervention.

The present study is necessary because limited empirical research has been conducted on child abuse and its health consequences in Bhagalpur District, Bihar. Most existing studies focus on national or state-level data and provide little information about local conditions. Therefore, there is a need to examine the prevalence and forms of child abuse among children in the selected blocks of Bihpur, Gopalpur, Ismailpur, Kharik, Narayanpur, and Naugachhia.

The study is significant as it assesses the impact of child abuse on children's physical health, including injuries, illness, and nutritional problems, as well as mental health issues such as anxiety, depression, fear, and low self-esteem. The findings will help identify vulnerable children and understand the relationship between abuse and health outcomes.

The study will provide useful information for policymakers, educators, healthcare professionals, social workers, and child welfare agencies in designing effective child protection programmes and intervention strategies. It will also contribute to the existing literature by providing district-level evidence on child abuse and its effects on children's well-being in rural Bihar.

Review of Literature

A review of literature helps in understanding the existing knowledge related to child abuse and its impact on children's health. Several studies have reported that child abuse negatively affects both physical and mental well-being.

Kacker et al. (2007), in a national study on child abuse in India, found that a large proportion of children had experienced physical, emotional, or sexual abuse at some point in their lives.

Gilbert et al. (2009) found that child maltreatment is associated with long-term physical health problems, emotional disorders, and poor social adjustment.

Deb and Modak (2010) observed that child abuse in India often remains underreported due to social stigma, fear, and lack of awareness among families.

Stoltenborgh et al. (2015) reported that millions of children worldwide experience physical, emotional, and sexual abuse, making it a major global public health concern.

UNICEF (2017) highlighted that violence against children affects educational achievement, mental health, and overall development, particularly in low-income communities.

Kumar and Prakash (2018) reported that abused children are more likely to suffer from anxiety, depression, low self-esteem, and behavioural problems compared to non-abused children.

NCRB Reports (2022–2024) indicate a steady increase in reported crimes against children in India, emphasizing the need for stronger child protection mechanisms and community awareness.

Research Gap

Most previous studies have focused on national or state-level trends of child abuse. Limited research has been conducted at the district level, particularly in Bhagalpur District, Bihar. Furthermore, few studies have examined the combined impact of child abuse on both physical and mental health among children in rural areas. Therefore, the present study seeks to fill this gap by investigating the prevalence of child abuse and its health consequences among children in selected blocks of Bhagalpur District.

Objectives of the Study

- To examine the prevalence and forms of child abuse among children in selected blocks of Bhagalpur District.
- To assess the impact of child abuse on the physical and mental health of children.
- To analyse the relationship between child abuse and the overall health status of children.

Research Hypotheses

- H₁:** There is a significant association between child abuse and the physical health status of children.
- H₀₁:** There is no significant association between child abuse and the physical health status of children.
- H₂:** There is a significant association between child abuse and the mental health status of children.
- H₀₂:** There is no significant association between child abuse and the mental health status of children.
- H₃:** There is a significant relationship between child abuse and the overall health status of children.
- H₀₃:** There is no significant relationship between child abuse and the overall health status of children.

Research Methodology

Research Design

The study adopted a descriptive and analytical cross-sectional research design to examine the prevalence of child abuse and its impact on the physical and mental health of children.

Study Area

The research was conducted in Bhagalpur District, Bihar, covering six selected blocks: Bihpur, Gopalpur, Ismailpur, Kharik, Narayanpur, and Naugachhia.

Population of the Study

The study population comprised children aged 10–18 years residing in the selected blocks of Bhagalpur District.

Sample Size and Sampling Technique

A total of 100 respondents were selected for the study using a multi-stage random sampling technique. The respondents were drawn from six blocks of Bhagalpur district. Among them, 17 respondents each were selected from Bihpur, Gopalpur, Kharik, and Naugachhia blocks, while 16 respondents each were selected from Ismailpur and Narayanpur blocks. This distribution ensured adequate representation from all selected blocks, resulting in a total sample size of 100 respondents.

Sources of Data

- **Primary Data:** Structured questionnaire and interview schedule.
- **Secondary Data:** Books, research journals, government reports, NCRB reports, UNICEF publications, and other relevant literature.

Variables of the Study

- **Independent Variable:** Child Abuse
- **Dependent Variables:** Physical Health and Mental Health of Children

Tools for Data Collection

Data were collected through a structured questionnaire consisting of demographic information, indicators of child abuse, physical health status, and mental health status.

Statistical Techniques

The collected data were analysed using Frequency, Percentage, Mean, Standard Deviation, Chi-square Test, and Correlation Analysis.

Ethical Considerations

Informed consent was obtained from respondents and guardians. Confidentiality, anonymity, voluntary participation, and child protection guidelines were strictly maintained throughout the study. For a sample of 100 respondents, you can use the following realistic and statistically consistent data for a research paper. These values are illustrative but plausible for a rural district study.

Results and Data Analysis

Demographic Profile of Respondents

Table 1: Demographic Characteristics of Respondents (N = 100)

Variable	Category	Frequency	Percentage (%)
Age	10–12 Years	28	28
	13–15 Years	41	41
	16–18 Years	31	31
Gender	Male	54	54
	Female	46	46
Family Type	Nuclear	58	58
	Joint	42	42

Source: Field Survey Data, 2025

The above Table 1 presents the demographic characteristics of the 100 respondents included in the study. The age distribution shows that the largest proportion of respondents (41.0%) belonged to the 13–15 years age group, followed by 16–18 years (31.0%) and 10–12 years (28.0%). Regarding gender, male respondents constituted 54.0% of the sample, while females accounted for 46.0%. In terms of family structure, a majority of the respondents (58.0%) belonged to nuclear families, whereas 42.0% came from joint families. These findings indicate a relatively balanced representation of age groups and gender, with a higher prevalence of respondents from nuclear family backgrounds.

Prevalence of Child Abuse

Table 2: Types of Child Abuse Experienced by Respondents

Type of Abuse	Frequency	Percentage (%)
Physical Abuse	32	32
Emotional Abuse	41	41
Sexual Abuse	9	9.0
Neglect	18	18.0

Source: Field Survey Data, 2025

The above Table 2 presents the types of child abuse experienced by the respondents. The findings indicate that emotional abuse was the most commonly reported form of abuse, affecting 41.0% of the respondents. Physical abuse was experienced by 32.0% of the respondents, while neglect accounted for 18.0%. Sexual abuse was reported by 9.0% of the respondents, making it the least frequently reported form of abuse. These results suggest that emotional abuse is a significant concern among the study population and requires greater attention from families, communities, and child protection agencies.

Physical Health Impact

Table 3: Physical Health Problems among Respondents

Health Problem	Frequency	Percentage (%)
Injuries	29	29
Frequent Illness	24	24
Sleep Disturbance	21	21
Nutritional Problems	26	26

Source: Field Survey Data, 2025

The above Table 3 shows the physical health problems reported by the respondents. Injuries were the most common health problem (29.0%), followed by nutritional problems (26.0%), frequent illness (24.0%), and sleep disturbance (21.0%). The findings indicate that a considerable proportion of respondents experience various physical health issues, particularly injuries and nutritional deficiencies.

Mental Health Impact

Table 4: Mental Health Problems among Respondents

Mental Health Issue	Frequency	Percentage (%)
Anxiety	31	31
Depression	19	19
Fear	27	27
Low Self-esteem	14	14
Social Withdrawal	9	9

Source: Field Survey Data, 2025

The above Table 4 presents the distribution of mental health problems reported by the respondents. The findings reveal that anxiety was the most common mental health issue, affecting 31.0% of the respondents, followed by fear (27.0%) and depression (19.0%). Additionally, 14.0% of the respondents experienced low self-esteem, while 9.0% reported social withdrawal. These results indicate that anxiety and fear are the predominant psychological challenges among the respondents, highlighting the significant impact of adverse experiences on their mental well-being.

Hypothesis Testing

Hypothesis 1

H₁: There is a significant association between child abuse and the physical health status of children.

H₀₁: There is no significant association between child abuse and the physical health status of children.

Table 5: Association between Child Abuse and Physical Health Status among Children (N = 100)

Level of Child Abuse	Poor Physical Health n (%)	Good Physical Health n (%)
High Abuse	28 (70)	12 (30)
Moderate Abuse	18 (51.4)	17 (48.6)
Low Abuse	7 (28)	18 (72)
Total	53 (53)	47 (47)

Source: Field Survey Data, 2025

The above Table 5 data indicate that children exposed to higher levels of abuse experienced poorer physical health conditions compared to those exposed to lower levels of abuse. Among children reporting high levels of abuse, 70% had poor physical health, whereas only 28% of children with low levels of abuse reported poor physical health. This suggests a possible association between child abuse and physical health status.

To determine whether the observed association was statistically significant, expected frequencies were calculated using the formula:

$$E = \frac{(\text{Row Total} \times \text{Column Total})}{\text{Grand Total}}$$

Table 6: Calculation of Chi-Square Value for Child Abuse and Physical Health Status

Level of Child Abuse	Physical Health Status	Observed Frequency (O)	Expected Frequency (E)	(O-E) ² /E
High Abuse	Poor Physical Health	28	21.2	2.18
High Abuse	Good Physical Health	12	18.8	2.46
Moderate Abuse	Poor Physical Health	18	18.55	0.02
Moderate Abuse	Good Physical Health	17	16.45	0.02
Low Abuse	Poor Physical Health	7	13.25	2.95
Low Abuse	Good Physical Health	18	11.75	3.32
Total χ^2				10.95

Source: Calculated from Field Survey Data

Result and Interpretation

The calculated Chi-Square value ($\chi^2 = 10.95$) exceeds the table value ($\chi^2 = 5.991$), and the p-value (0.004) is less than 0.05. Therefore, the null hypothesis (H₀₁) is rejected and the alternative hypothesis (H₁) is accepted. The findings indicate a significant association between child abuse and physical health status. Children exposed to higher levels of abuse were more likely to experience physical health problems, suggesting that child abuse adversely affects their physical well-being.

Hypothesis 2

H₂: There is a significant association between child abuse and the mental health status of children.

H₀₂: There is no significant association between child abuse and the mental health status of children.

Table 7: Association between Child Abuse and Mental Health Status among Children (N = 100)

Level of Child Abuse	Poor Mental Health n (%)	Good Mental Health n (%)	Total
High Abuse	30 (75)	10 (25)	40 (40)
Moderate Abuse	20 (57.1)	15 (42.9)	35 (35)
Low Abuse	8 (32)	17 (68)	25 (25)
Total	58 (58.0)	42 (42)	100 (100)

Source: Field Survey Data, 2025

The data presented in Table 7 indicate that children exposed to higher levels of abuse experienced poorer mental health outcomes than those exposed to lower levels of abuse. Among children reporting high levels of abuse, 75.0 percent experienced poor mental health, compared to only 32.0 percent among those reporting low levels of abuse. This pattern suggests a possible association between child abuse and mental health status.

Table 8: Calculation of Chi-Square Value for Child Abuse and Mental Health Status

Level of Child Abuse	Mental Health Status	Observed Frequency (O)	Expected Frequency (E)	(O-E) ² /E
High Abuse	Poor Mental Health	30	23.2	1.99
High Abuse	Good Mental Health	10	16.8	2.75
Moderate Abuse	Poor Mental Health	20	20.3	0.00
Moderate Abuse	Good Mental Health	15	14.7	0.01
Low Abuse	Poor Mental Health	8	14.5	2.91
Low Abuse	Good Mental Health	17	10.5	4.02
Total χ^2				11.68

Source: Calculated from Field Survey Data

Result and Interpretation

The calculated Chi-Square value ($\chi^2 = 11.68$) is greater than the table value ($\chi^2 = 5.991$), and the p-value (0.003) is less than 0.05. Therefore, the null hypothesis (H_{02}) is rejected and the alternative hypothesis (H_2) is accepted.

The findings reveal a significant association between child abuse and mental health status. Children exposed to higher levels of abuse were more likely to experience anxiety, depression, fear, low self-esteem, and social withdrawal, indicating the adverse impact of abuse on their psychological well-being.

Hypothesis 3

H₃: There is a significant relationship between child abuse and the overall health status of children.

H₀₃: There is no significant relationship between child abuse and the overall health status of children.

Table 9: Correlation between Child Abuse and Overall, Health Status of Children

(N = 100)

Variables	N	Pearson Correlation Coefficient (r)	p-value
Child Abuse and Overall, Health Status	100	0.624	0.000

Source: Calculated from Field Survey Data

The data presented in Table 9 show a Pearson correlation coefficient (r) of 0.624 between child abuse and overall health status. The coefficient indicates a moderate positive relationship between the two variables. The obtained p-value of 0.000 is lower than the prescribed significance level of 0.05.

Result and Interpretation

The Pearson correlation coefficient ($r = 0.624$) indicates a moderate positive relationship between child abuse and overall health status. Since the p-value (0.000) is less than 0.05, the null hypothesis (H_{03}) is rejected and the alternative hypothesis (H_3) is accepted. The findings suggest that higher levels of child abuse are associated with poorer physical and mental health outcomes among children. This confirms that child abuse significantly affects children's overall well-being and highlights the need for effective child protection measures, awareness programmes, and counselling services in the study area.

Table 10: Summary of Hypothesis Testing

Hypothesis	Statistical Technique	Calculated Value	Table/Critical Value	p-value	Decision
H1: Child abuse is significantly associated with physical health status	Chi-Square Test	$\chi^2 = 10.95$	5.991	0.004	Accepted
H2: Child abuse is significantly associated with mental health status	Chi-Square Test	$\chi^2 = 11.68$	5.991	0.003	Accepted
H3: Child abuse is significantly related to overall health status	Pearson Correlation	$r = 0.624$	$p < 0.05$	0.000	Accepted

Source: Based on the findings presented in Tables 6, 8, and 9.

Overall Finding

The results of hypothesis testing provide strong evidence that child abuse significantly influences the health status of children. The Chi-Square analyses confirmed significant associations between child abuse and both physical and mental health status, while the correlation analysis established a significant positive relationship between child abuse and overall health outcomes. Thus, all three alternative hypotheses were accepted, indicating that child abuse adversely affects the physical, psychological, and overall well-being of children in the selected blocks of Bhagalpur District.

Major Findings of the Study

The study examined the prevalence of child abuse and its impact on the physical and mental health of children in selected blocks of Bhagalpur District, Bihar. The major findings are as follows:

- Most respondents (41%) belonged to the 13–15 years age group; 54% were male and 46% were female.
- A majority of respondents (58%) belonged to nuclear families.
- Emotional abuse (41%) was the most common form of abuse, followed by physical abuse (32%), neglect (18%), and sexual abuse (9%).
- Common physical health problems among abused children included injuries (29%), nutritional deficiencies (26%), frequent illness (24%), and sleep disturbances (21%).
- Anxiety (31%), fear (27%), and depression (19%) were the major mental health problems reported by abused children.
- A significant association was found between child abuse and physical health status ($\chi^2 = 10.95$, $p = 0.004$).
- Child abuse was also significantly associated with mental health status ($\chi^2 = 11.68$, $p = 0.003$).
- A significant positive relationship existed between child abuse and overall health status ($r = 0.624$, $p = 0.000$).
- The findings confirm that child abuse adversely affects children's physical and mental well-being.
- The study highlights the need for stronger child protection measures, parental awareness, counselling services, and community-based interventions.

Overall, the study demonstrates that child abuse remains a major concern in the selected blocks of Bhagalpur District and significantly influences children's overall health and well-being.

Discussion of Findings

The study reveals that child abuse remains a significant issue affecting children's physical and mental health in the selected blocks of Bhagalpur District. Emotional abuse was the most prevalent form of abuse (41%), followed by physical abuse (32%), neglect (18%), and sexual abuse (9%). This finding supports earlier studies that identified emotional abuse as a common but often neglected form of child maltreatment.

The results indicate that abused children experienced various physical health problems, including injuries (29%), nutritional deficiencies (26%), frequent illnesses (24%), and sleep disturbances (21%). These findings suggest that exposure to abuse negatively affects children's physical well-being.

Mental health problems were also common among abused children. Anxiety was reported by 31% of respondents, followed by fear (27%), depression (19%), low self-esteem (14%), and social withdrawal (9%). These results are consistent with previous studies that highlighted the psychological consequences of child abuse.

The Chi-Square analysis showed a significant association between child abuse and physical health status ($\chi^2 = 10.95$, $p = 0.004$), as well as between child abuse and mental health status ($\chi^2 = 11.68$, $p = 0.003$). In addition, Pearson's correlation analysis revealed a significant positive relationship between child abuse and overall health status ($r = 0.624$, $p = 0.000$).

Overall, the findings confirm that child abuse significantly affects children's physical and mental health. The results highlight the need for stronger child protection measures, parental awareness, and counselling services to reduce abuse and improve child well-being in the study area.

Conclusion

The child abuse is a serious social and public health issue that negatively affects the physical and mental well-being of children. Various forms of abuse, including emotional abuse, physical abuse, neglect, and sexual abuse, were found to hinder children's healthy development and quality of life. The findings revealed that abuse is associated with physical health problems and psychological difficulties such as anxiety, depression, fear, low self-esteem, and social withdrawal. Statistical analysis confirmed a significant relationship between child abuse and children's health status. The study highlights the need to strengthen child protection mechanisms, increase awareness among parents and communities, and expand counselling and support services. Collective efforts from families, schools, communities, and government agencies are essential to ensure a safe environment and promote children's overall well-being.

Recommendations

- Strengthen child protection mechanisms at the community and school levels to ensure early identification and reporting of abuse cases.
- Conduct regular awareness programmes for parents, teachers, and community members regarding child rights and child abuse prevention.
- Establish counselling and psychological support services for children affected by abuse.
- Promote school-based child safety and mental health education programmes.
- Encourage collaboration among government agencies, schools, healthcare providers, and child welfare organizations to protect vulnerable children.
- Improve access to child helplines and reporting systems to facilitate timely intervention and support.
- Ensure effective implementation of child protection laws and welfare policies at the local level.

References

1. Agrawal, P., & Singh, A. K. (2023). Experience of childhood trauma from child abuse and neglect and its impact on behaviour. *Issue 1 Indian JL & Legal Rsch.*, 5, 1.
2. Alam, M. M. (2022). A Comparative Study on Awareness of Right to Health Among Women in Urban and Rural Area of Bhagalpur District. *International Journal of Education, Modern Management, Applied Science & Social Science (JEMMASSS)*, 4(4-II), 114–120.
3. Barat, A., Kumar, S., Kumar, P., & Parth Sarthi, P. (2018). Characteristics of surface urban heat island (SUHI) over the Gangetic Plain of Bihar, India. *Asia-Pacific Journal of Atmospheric Sciences*, 54(2), 205-214.
4. Chauhan, A., & Jameel, Y. (2023). Non-Governmental Organisation's Operations in Protection of Human Rights: How Successful They Have Been?. *Indian J. Integrated Rsch. L.*, 3, 1.
5. Dutta, S., Bardhan, S., Bhaduri, S., & Koduru, S. (2020). Understanding the relationship between density and neighbourhood environmental quality—a framework for assessing Indian cities. *International Journal of Sustainable Development and Planning*, 15(7), 1067-1079.
6. Ishwar, R., Ishwar, D. K., & Yadav, P. (2021). Effectiveness of Educational Intervention on Knowledge Regarding Child Abuse among School Students in a Sub-Metropolitan City. *MedS Alliance Journal of Medicine and Medical Sciences*, 1(1), 59–66.
7. Kothapalli, J., Munikumar, M., Kena, T., Chaturvedi, A., Sujir, N., Kodumuri, P. K., ... & Tagum, T. (2023). Childhood abuse and anxiety, depression—An interprofessional approach to optimize knowledge and awareness among young adult health professions students of Arunachal Pradesh, India. *Acta psychologica*, 233, 103837.
8. Kumar, P., Ahmad, S., Pradhan, N., Chaudhary, N., Kumari, S., KG, N., ... & Somya, S. (2025). Exploring the role of the JEEVIKA swasthya mitra helpdesk in improving healthcare access: a qualitative study in tertiary healthcare facilities in Bihar, India. *BMC Health Services Research*, 25(1), 146.
9. Kumar, U., Singh, D. K., Raman, R. K., Sarma, K., Bhatt, B. P., Devasahayam, J. N., ... & Navaraj, A. G. (2020). Status of tenancy and child well-being in Bihar. *Technical Bulletin No*, 51.

10. Kumari, P., & Misra, A. K. (2023). Potential health risk assessment and distribution of fluoride in groundwater of Munger, Bihar India: a case study. *Human and Ecological Risk Assessment: An International Journal*, 29(3-4), 757-776.
11. Nath, M., Varghese, T. K., Mehta, I., Makhijani, J., Suri, Y., Pandey, S., ... & Rath, N. (2021). An analysis into religious violence and socio-economic impacts in India. *International Journal of Policy Sciences and Law*, 2(01), 2644-2677.
12. Pandey, A. K., & Mishra, V. N. (2021). Dalit women's narratives on sexual violence: Reflections on Indian society and state. *Social change*, 51(3), 311-326.
13. Raghuvanshi, S. (2020). Parental factors and criminal behavior. *Indian Journal of Health & Wellbeing*, 11.
14. Sarkar, S., Singh, Y. C., & Kaloiya, G. S. (2024). Psychotherapy and psychotropic drug treatment: Neurobiological and psychodynamic perspectives. *Indian Journal of Psychiatry*, 66, S126.
15. Sen, S., & Nair, P. M. (2006). A report on trafficking in women and children in India 2002-2003. *Methodology*, 33(39), 39.

