



# REVIEW OF RESEARCH

ISSN: 2249-894X

IMPACT FACTOR : 5.7631 (UIF)

UGC APPROVED JOURNAL NO. 48514

VOLUME - 8 | ISSUE - 9 | JUNE - 2019



## HEALTH SEEKING BEHAVIOUR OF MISHING TRIBE IN A KULAJAN VILLAGE OF DHEMAJI DISTRICT IN ASSAM

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### ABSTRACT:

*Health is man's natural condition. It is a prerequisite for human development and is an essential component for the well being of the mankind. It is the result of living in accordance with natural laws pertaining the body, mind and environment. The health status of an individual or group of people is often determined as much by socially and culturally constructed human practices as that by biological and environment factors. It is fact that healthy lifestyle is as much a product of health consciousness as the attitude toward life. According to the World Health Organization, the main determinant of health includes the social and economic environment, the physical environment and the person's life individual characteristic and behaviour. Therefore, for understanding health condition of Mishing in Kulajan, there is a need to examine their health seeking behavior, diseases, pattern of treatment, for medical facility etc.*



**KEYWORDS:** Health , World Health Organization , socially and culturally constructed.

### INTRODUCTION

Health seeking behaviour is those remedial actions or activities that individual undertaken to rectify perceived ill health. It also includes all behaviours related to establishing and maintaining a healthy mental and physical state ([http://wiki.ubc.ca/Health Seeking Behaviour](http://wiki.ubc.ca/Health_Seeking_Behaviour), downloaded on 23/8/2017). Health seeking behaviour of a community or group largely depends upon their social, personal, cultural and experimental factors. It also helps to understand how

a community engaged with the health care system in their social, economic, cultural and environmental condition. The health seeking behavior of the people defines their social position of health and provides a better understanding of the disease process. Therefore it is important to study the health seeking behaviour and its impact in case of Mishing in Kulajan village.

### OBJECTIVES

Following are the main objectives of this paper

- To understand the Health

- Seeking Behaviour of Mishing tribe in Kulajan village.
- To understand the Household Health Seeking Behaviour of Mishing tribe.

### METHODOLOGY

#### • The study area:

The study was conducted in kulajan village in Dhemaji district of Assam. The total area of the district is 78, 438sq.km with a population of 686,133 out of which 351,249 are female and 334,884 are male. The rural and urban population distribution of the district is 48,285 people live in urban areas and 637,848 people

live in rural area. The density of population of the district is 212 per sq. km. and the literacy rate is 72.70 % out of which 79.84% male and 65.21% female. The district headquarter is located at Dhemaji town. The district consists of six sub-divisions namely -Jonai, Machkhowa, Sissiborgaon, Bordalani and Dhemaji Development block. Kulajan village come under Silapathar gaon panchayat of jonai sub-division.

## **DATA AND METHODOLOGY**

This section mainly gives a detail analysis related to sources, types, universe and unit of the study, tools and technique of data collection.

### **I. Universe and unit of the Study**

Kulajan village is the universe and near about 50% households are constitute the unit of the study. The households were selected by applying random sampling method. Kulajan village is situated in the eastern most part of Dhemaji district and inhabited by the Mishing tribe only. For collecting data I first contact with panchayat president and village head man with whom I discussed a lots about my research work, after that they permitted me to collect household information.

### **II. Sources and Types of Data**

The work is on primary and secondary sources of data. The primary data were collected from the field and respondents through structure interview scheduled and observation technique and informal discussion with the villagers. Secondary data were collected from books, journals, magazines, articles, newspapers, government and non-government official data records etc.

### **III. Tools and Techniques for Data Collection**

Primary data were collected through structure interview scheduled. The interview schedules contain questions related to basic information like- age, sex, educational qualification, marital status etc. and details of social condition, like - tribe, clan, religion, family types etc. Economic details like- occupation, monthly income, agricultural land etc. Educational details like- educational qualifications, inter-generational education status, and drop-out, attitude towards children education and so on. Health related questions which include- personal hygiene habits, types of houses, food patterns, diseases, patterns of treatment etc.

Apart from interview scheduled, informal interview and observation were applied as a technique for primary data collection.

### **IV Presentation and Analysis of Data**

After collecting data from randomly selected respondents of Kulajan village, quantitative data from the schedule were classified systematically with statistical method and presented in tabular form. Open end questions and interviews were presented in the form of case studies

## **HOUSEHOLD HEALTH SEEKING BEHAVIOUR**

### **Living Condition**

There is a strong relationship between living condition and health. Good health always depends upon good living condition and life style. The living condition includes house type, use of electricity, cooking fuel, source of drinking water etc. These are discuss under following headings

### **Types of House**

House is a place where people take shelter and execute their family function. Type of house is one of the important factors which indicate economic condition of the people and ultimately affect the health condition also. Generally the villagers are living in three types of houses namely hut (chang ghar), Assm type chang ghar, and Assam type full brick wall.

### Power consumption

Consumption of power indicates the standard of living of the community. On the basis of power consumption the respondent are classified into two categories. These are shows in the following table.

**Table No.4.07 Distribution of the Respondents on the basis of Power Consumption.**

Sl. No.	Power consumption facility	Respondents	Percentage (%)
1.	Electricity	88	%
2.	Kerosene	12	%
Total	-	100	100

Source:Field survey from November to June 2016-17.

The data indicates that 92.05% of respondents use electricity as a source of lighting, whereas 8.95% uses kerosene as sources of light. So, a few household do not have electric facility because they cannot afford it due to poverty.

### Cooking Fuel

Fuel is one of the important things for preparation of food. Different types of fuel are used by the people for preparing of food like Karosin, LPG, electric hitter, solar energy, biomass etc .Generally in tribal society biomass like- firewood, crop residues etc. are used for cooking which they collect from forest.

### Sources of Water

The villagers collect water from two sources, like tubewell, and ringwell. The villagers collected water from whatever sources uses for drinking, bathing, washing and cooking etc.

### Purification of Drinking Water

Mishing of kulajan is not habituated in purifying of drinking water. Very few used purified water for drinking. There is a general believes among the villagers that tub well's water needs no purification. Following table make it clear.

**Table No. 4.10 Distribution of the Respondents on the basis of the methods they adopted for purifying drinking water.**

Sl.No.	Methods of purification	Respondents	Grand total percentage (%)
1.	Without purify	98	61.25%
2.	Electronic purify	6	3.76%
3.	Boil	40	25%
4.	Filter	16	10.62%
	Total	160	100

Source:Field survey from November 2016 to June 2017.

The above table indicates that 61.25% of respondents drink water without purification, 25% of respondents drink boil water, 10.62% of respondents drink water from simple filter and only 3.76% of respondents purify water by using electronic purifier. More than half of the respondents drink water without proper purification. General believes prevails among the villagers that tube-well and ring wall's water not require purification.

### Sanitation

According to WHO, "Sanitation means the provision of facilities and services for the safe disposal of human urine and faces (www.Who into/topics/ sanitation/en/, down lorded on 23/8/17).

Inadequate sanitation is a major cause of different diseases worldwide. People of Kulajan village are not much conscious about sanitation. For this many factors like poverty, social custom, ignorance, etc. are responsible. The villagers are totally ignorant about the micro organism and modes of infection and they are least bothered about many of the unhygienic practices. They do not considered these thing harmful to their health rather than to be natural phenomenon.

### Garbage Disposition

Pattern of garbage disposition is also related to health. In Kulajan, villagers are not conscious about proper garbage disposition. They throw garbage here and there in their surrounding which effects environment as well as health of them.

### Personal Health Seeking Behaviour

Personal health seeking behaviour has been defined as a “sequence of remedial actions that individuals undertake to rectify perceived ill health”. Personal hygiene habit is clearly related to health. It includes bathing, washing hand, oral care, hair and nail care, cleaning utensils, cloths etc. It is found that good personal hygiene habit help to prevent oneself from different types of diseases. Maintaining personal hygiene habit largely depends on the culture of the people.

### Washing Hand

Majority of villagers washing their hand with plain water before taking food.They also not wash their hand properly even after handling pet animal, working in paddy field and coming out from loo. The following tables make it clear.

**Table No.5.04 Distribution of the Respondents on the basis of their habit of Washing hand coming out of Loo.**

Sl. No.	Washing materials	Respondents	Percentage (%)
1.	Soap		%
2.	Soap and lemon		%
3.	Plain water		%
4.	Sand and Ashes		
Total	-	100	100

Source:Field study survey from November 2016 to June 2017.

The above table shows that 42.05%of respondents wash their hands with plain water after coming from loo, 21.87% of respondents wash their hands with soap, 20.62% of respondents wash their hand with soap and lemon and 15.0% of respondents wash their hands with sand and ashes etc. after coming from loo. So, majority of the villagers uses plain water for washing their hands after coming out of loo. They are not conscious about effects of this habit. This picture further encourages knowing their habit of washing hand before food

### Food Habit

Food is one of the major important prerequisite for maintaining good health. If a person takes good and healthy food regularly then he will remain apart from some common disease like gastric, blindness, weakness, anemia etc. Food habits of a community largely depend upon their economic condition, culture, belief, custom and tradition. So, health condition of a community largely depends upon food habits. Diet of Mishing of Kulajan village primarily consists of rice, pulses, seasonal vegetables, meat, fish, dry fish etc.

### **Cooking Practices**

Mishing of kulajan generally prepared food in morning and evening. In morning they clean kitchen, utensils and prepare food in aluminum or steel vessels. They use very less oil but many chilies (both powder/green). There is a beli among the villagers that if they boil the vegetable more than its food value will lose. So, most of the villager not boil vegetable much.

### **Eating Practices**

Eating practices also has its effects on health condition of a person. It is observed that the majority of the villagers eat food twice daily. Specially, they take food in the morning around 8.00 A.M. to 10.00 A.M. and night 7.00P.M.to. 9.00 P.M.

### **Food during illness**

No special foods are given to sick people. On the other hand some foods are restricted in some diseases like if a person suffers from jaundice he/ she is restricted to take turmeric, salt, meat, and fish. Generally, villagers consider a person is considering ill when he/ she is not able to move properly.

So, it is found that the diet of the villagers were deficient in all essential food elements. They consume fruits, milk and other non vegetarian like - meat, fish, egg, etc. less which contains much nutrition. Further their addiction towards intoxicating things and habit of taking wine and smoking added more to their poor health condition.

### **Immunization and Vaccination of Children**

Irrespective of their educational qualification all the villagers have got their children immunized through periodical government immunization programme. For immunizing children the villagers does not make any gender discrimination. The respondents informed that from last ten to fifteen years, tendency of parents for immunizing and vaccinated children up to 12 years of age increases. It is mainly due to government propaganda and health activities that villagers became more conscious about the matter. They believe that immunization and vaccination will protect their children from serious diseases.

### **Health Checkup**

Regular health checkup is an important factor for maintaining good health. The main aim of health checkup is to detect illness an early stage, in the first place. Regular health examination and tests can also help to find problems before they start by getting right health services, screening, and treatment. But the respondents are not habituated to go for health checkup regularly. They inform that unless and until they suffer from disease they did not approach doctor. Even these who suffer from high blood pressure, diabetics, they also not go for regular checkup.

### **Community Health Seeking Behaviour**

Community life has its effect on the health condition. In kulajan irrespective of educational qualification the villager largely depend upon local medician man or ojha who applied magical means to cure diseases. They believe that root cause of diseases and unnatural death is evil spirits, black magic and violation of taboos. When magical means fail to bring accepted result then some of them adopt modern treatment. It is also found that some people especially those who are rich and educated take both traditional and modern treatment simultaneously.

There is a strong belief among the villagers that the diseases like paralyses, pain in any part of body, fevers, and epilepsy, weightless etc. occurs only due to black magic of jealous neighbors, relative or enemy. So for the treatment of these diseases they take the help of local medicinal men who applied supernatural means for cure.

**CONCLUSION:**

Health statuses of the villagers closely related to their way of living. Most of their diseases mainly occur only due to their unhealthy life style, superstition and ignorance. In regard to treatment they adopted different methods like magicoo- religious, traditional medicine, modern etc. Health seeking behavior like maintaining personal hygiene, sanitation, among the villagers is not improved much.

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