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A Study on the Health Condition of Women of the Birhor Tribe of Bilaspur District of Chhattisgarh State

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Abstract

Health is an important part of human development for people's lives. In addition, there is a significant gap in tribal areas' access to healthcare services and health infrastructure. The present study aims to know the perception of Birhor tribal women about the causes of their illness and to identify the methods of their treatment. The study was carried out in Koyalari, Semaria, Shaktibahra, and Umaria villages under the Kota block of Bilaspur district of Chhattisgarh state. Primary data were collected from 116 women of the Birhor tribe. The data were analyzed using suitable statistical tools. The majority of the respondents (68.97%) reported a lack of current and past health problems, which is indicative of very good health, however, of those respondents who had health problems most had frailty-related problems. The reliance on traditional treatment methods, especially Vaidyas, highlights the lack of education and access to medical facilities. Moreover, the majority of respondents (38.79%) said that they give first preference to Vaidya for their health-related treatment, followed by respondents who prefer quack doctors (35.34%), Baigas (21.55%), and qualified doctors (2.59%).

Keywords: Birhor tribes, PVTGs, health-seeking behavior, cause of illness, treatment.

Introduction

Health is an important part of human development for people's lives. It's not just the absence of disease, but the extent of the disease coverage, including cultural awareness of diseases, socio-economic disparities, access and availability of health services, costs and quality of services, and current biological understanding of health and disease (Dalal & Ray, 2005). Assessment of a population's nutritional status, demographic parameters, health care practices, disease burden, life expectancy, and other factors can all be used to assess their health (Pritchett & Summers, 1996). The degree of socioeconomic development, which can be gauged by the population's level of skill acquisition and capital formation (Bhargava, 1998; Scrimshaw, 1996 & Fogel, 2004). The attention of the state to the health of the indigenous populations has not been adequate as they live in difficult terrains where access to health care services is complicated (Bhattacharya, 1994). Despite this, the poor quality of the health infrastructure and the lack of trained workers contribute to the triple burden of diseases that affect 80 per cent of tribal women (Chandana and Kumar, 2020). In addition, there is a significant gap in tribal areas' access to health care services and health infrastructure. Furthermore, tribal populations are dependent on traditional practices of healing not

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just for general issues but also for chronic illnesses, since traditional medicines are easily available, acceptable, and affordable.

Incidentally, they do not commute to receive contemporary medical care; instead, they choose to receive their treatment from locals using herbal remedies or traditional medications. The tribal perceptions to nature, world-view, and cosmogony vary among themselves and thus put them sometimes in identifiable isolation. Their health is the perceptions and conceptions in their cultural system based on external stimuli emanating from astrological influences, witchcraft, and evil spirits in the etiology of disease, with less awareness of the modern health-care and health services for Health-seeking behaviour The health status of any community is influenced by the interplay of health consciousness of the people, socio-cultural, demographic, economic, educational and political factors. The common beliefs, traditional customs, myths, and practices related to health and disease, in turn, influence the health-seeking behaviour of autochthonous people (Balgir, 2004a). Their misery is compounded by poverty, illiteracy, ignorance of the causes of diseases, hostile environment, poor sanitation, lack of safe drinking water blind beliefs, etc (Balgir, 2004b). Causes of diseases of Birhor tribe: 1. Natural- Malevolent action of some planets and belief in the doctrine of karma or bad deeds of the past, failure of performing rituals; environmental effects, wrong combination of foods, contact with some living organisms, 2. Supernatural- Evil spirits intrusion, evil eye effects, wrath of gods and goddesses, 3. Human agencies- Sorcerers and witches in finding out the causes of diseases like injury, paralysis, eczema, vomiting, and rickets. The Procedure of Treatment is Folk medicine: 1. Religious- preventive procedures- include the use of charms, amulets, animal sacrifices, and propitiation of disease-causing gods and goddesses, 2. Magical- Curative procedures- domestic methods, magical spells, shamanistic treatment. The present study was formulated with following research objectives:

- 1. To find out the health status of Birhor tribal women,
- 2. To know the perception of Birhor tribal women about the causes of their illness and to identify the methods of their treatment.

Methodology

The present study was carried out in Koyalari, Semaria, Shaktibahra, and Umaria villages under the Kota block of Bilaspur district of Chhattisgarh state. To collect primary data, 116 women of the Birhor tribe were randomly selected as respondents from these areas. Through personal interviews recorded in the pretested interview schedule, the investigator collected the primary data. The data obtained were sorted into tables for interpretation after being examined using appropriate statistical methods.

Results and discussion

Health is important to tribes because it helps people be more economically productive while preserving the group's cultures and cohesion. It changes how people form positive relationships with each other and improves performance at work. Health is also built strategically because it is for the future, even if it is difficult in the present, especially in the fight against the cycle of poverty and disease. In short, health contributes greatly to quality of life; thus, everyone can play an active role in communities and support traditions for future generations. The present study aims to know about the health conditions of female Birhor tribes, treatment modalities, causes of disease, and priority of medical treatment.



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Table 1: Distribution of respondents according to present and past health problems

S. No.	Response	Present		Past		
		Frequency	Percentage	Frequency	Percentage	
A.	Have you had any health problems?					
1.	Yes	36	31.03	11	9.48	
2.	No	80	68.97	105	90.52	
	Total	116	100	116	100	
B.	If yes, please specify the related disease					
1.	Weakness	33	91.67	9	81.82	
2.	Joint and bones	10	27.78	3	27.27	
3.	Eyes	17	47.22	6	54.55	
4.	Nose, Throat, and Ears	7	19.44	3	27.27	
5.	Nerve	15	41.67	0	0.00	
6.	Other	5	13.89	0	0.00	

Frequency based on the multiple responses

Present health status: The data shown in Table 1 indicates that the majority of the respondents (68.97%) narrated that currently they don't have any health problems, while only 31.03 per cent said that they are suffering from health problems. Out of the 36 respondents suffering from health problems, the majority (91.67%) had weakness, followed by eye-related problems (47.22%), nerve-related problems (41.67%), joint and bone-related problems (27.78%), and nose, throat and ear-related problems (19.44%). While 13.89 per cent of the respondents had other health problems like backache, tuberculosis, and physical disabilities.

Past health status: The data also reveals that the majority of the respondents (90.52%) reported that they had no health problems in the past, while 9.48 per cent said that they had health problems in the past. Among these 11 respondents who spoke about their past health problems, the data showed that most of them (81.82%) felt weakness in their body, followed by 54.55 per cent of the respondents who faced everelated problems. While an equal percentage of respondents (27.27%) had joint and bone problems and nose, throat, and ear-related problems.

From the above results, it can be concluded that as per the present health status of the women of the Birhor tribe, 68.97 per cent of the respondents had no health problems, whereas most of the respondents who were facing health problems had weaknesses. Similarly, as per the past health status of women, 90.52 per cent of the respondents had no health problems, whereas most of the respondents who were facing health problems had weaknesses. Thus, the problem of weakness in both present and past health is a matter of great concern which shows that they are far away from nutritious food.



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Table 2: Distribution of respondents according to the treatment modality followed by them

Response	Pro	Present		Past	
	Frequency	Percentage	Frequency	Percentage	
Do you follow treatment methods?					
Yes	36	100.00	11	100.00	
No	0	0.00	0	0.00	
Total	11	100	36	100	
If yes, what type of treatment do you take?					
Home Remedies	22	61.11	7	63.64	
Baiga	22	61.11	11	100.00	
Vaidya	36	100.00	11	100.00	
Quack Doctor	30	83.33	4	36.36	
Qualified Doctor	15	41.67	1	9.09	
	Do you follow treatm Yes No Total If yes, what type of the Home Remedies Baiga Vaidya Quack Doctor	ResponseFrequencyDo you follow treatment methods?Yes36No0Total11If yes, what type of treatment do youHome Remedies22Baiga22Vaidya36Quack Doctor30	Response Frequency Percentage Do you follow treatment methods? Yes 36 100.00 No 0 0.00 Total 11 100 If yes, what type of treatment do you take? Home Remedies 22 61.11 Baiga 22 61.11 Vaidya 36 100.00 Quack Doctor 30 83.33	Response Frequency Percentage Frequency Do you follow treatment methods? Yes 36 100.00 11 No 0 0.00 0 Total 11 100 36 If yes, what type of treatment do you take? Home Remedies 22 61.11 7 Baiga 22 61.11 11 Vaidya 36 100.00 11 Quack Doctor 30 83.33 4	

Present treatment: The data marked in Table 2 depict that the majority of the respondents (100.00%) said that they are taking any treatment for their health problems. Among the treatments that respondents are taking, the majority of the respondents (100%) said that they are taking treatment from Vaidyas, followed by 83.33 per cent of the respondents who are taking treatment from quack doctors. Similarly, an equal percentage of the respondents (61.11%) said that they are taking treatment from Baigas, and also using home remedies. While 4.67 per cent of the respondents said that they are taking treatment from qualified doctors.

Past treatment: The data marked in Table 2 expressed that the majority of the respondents (100.00%) said that they had taken treatment for their health problems. Among the treatments taken by the respondents, an equal percentage of the respondents (100.00%) said that they had taken treatment from Vaidyas and Baigas, followed by 63.64 and 36.36 per cent of respondents said that they had taken treatment from home remedies, and quack doctors respectively. While 9.09 per cent of the respondents said that they had taken treatment from qualified doctors.

Based on the findings it can be said that the majority of the respondents (100.00%) are currently taking some or the other treatment for their health problems and they are getting their treatment from Vaidyas. Similarly, most of the respondents (100.00%) had taken some treatment for their health problems earlier and they had taken treatment from Vaidyas and Baigas.

Table 3: Distribution of respondents according to what they think causes illness

S. No.	The cause of your illness	Frequency	Percentage
1.	Natural Calamity	18	15.52
2.	Supernatural Cause	27	23.28
3.	Black Magic and Evil Eye	56	48.28



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4.	Physical Problems	93	80.17
5.	Weather	99	85.34
6.	Alcohol Consumption	15	12.93
7.	Eating and Drinking bad food	78	67.24
*Freque	ency based on the multiple responses		

The data based on causes of illness is presented in Table 3. The majority of the respondents (85.34%) believe that the main cause of illness is weather change, followed by the respondents who believe that physical problems (80.17%) and certain bad foods and drinks (67.24%) are the causes of illness. Similarly, 48.28 and 23.28 per cent of the respondents believe that black magic, evil eye, and supernatural powers are also the causes of illness. While 15.52 and 12.93 per cent of the respondents consider natural disasters and excessive drinking respectively as the cause of the illness.

The findings show that most of the respondents (85.34%) believe that the main cause of illness is weather change.

Table 4: Distribution of respondents based on preference to receive treatment first

S. No.	preference to seek treatment	Frequency	Percentage
1.	Home Remedies	2	1.72
2.	Baiga	25	21.55
3.	Vaidya	45	38.79
4.	Quack Doctor	41	35.34
5.	Qualified Doctor	3	2.59
	Total	116	100

The data displayed in Table 4 elaborates that the majority of the respondents (38.79%) said that they give first preference to Vaidyas for their health-related treatment, followed by respondents who prefer quack doctors (35.34%), Baigas (21.55%), and qualified doctors (2.59%). While only 1.72 per cent of the respondents said that they prefer home remedies.

On the basis of the findings, it would be said that the majority of the respondents (38.79%) said that they give first preference to Vaidya for their health-related treatment.

Conclusion

The highlights of this study reveal that the majority of female respondents from the Birhor tribe reported a lack of current and past health problems, which is indicative of very good health, however, of those respondents who had health problems, most had frailty-related problems. The reliance on traditional treatment methods, especially vaidyas, highlights the lack of education and access to medical facilities. Moreover, the perception of weather change as the primary cause of illness reflects the overall mindset. Even in modern times, they prefer to stick to their traditional system of medicine, on which they are heavily dependent. This behaviour of theirs clearly reflects their inability to adopt today's modern system of medicine.



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