



A Study of Issues Related to Health and Hygiene in Kantharpura Village

KEYWORDS

HEALTH, HYGIENE, INFRASTRUCTURE

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ABSTRACT *The main thrust of this research paper is to analyze sociologically the issues related to the health and hygiene among the population of the Kantharpura village in Tilakwada Taluka of Narmada district in Gujarat. The main focus is on infrastructure, awareness and governmental schemes.*

The sample consists of 30 households belonging to different caste groups and class groups. The data is collected through interview scheduled and observation and the method is field study. The collected data is analyzed sociologically from the conflict perspective.

The main objectives of the study are-

- *To find out the facilities and infrastructure related to health*
- *To know the awareness among the people regarding hygiene*
- *To find out the governmental role in improving the health and hygiene.*

The data clearly indicates that although the level of knowledge regarding hygiene is high in Kantharpura, it is not translated into practice by them. As a result many suffer from various diseases and their lack of faith in modern medicines causing them more troubles. It is found that there are lack of medical facilities and infrastructure; lack of doctors and nurses; and lack of awareness programmes in the village. As a consequence, they are deprived of safe drinking water, lack of training and modern education. These are the main responsible factors leading to unhygienic conditions and ill health.

INTRODUCTION

Health and Hygiene issues are central part of human society. From sociological view point health, hygiene and its related issues are considered as social problems. As the old saying goes the prime happiness lies in the being healthy.

Health is a common theme in most cultures. The most common concept of health is "absence of disease". According to WHO (1948) "health is a state of complete physical, mental and social well being and not merely an absence of disease or infirmity. Health is a multi-dimensional issue. According to many scholars there are mainly two types of hygiene- 'Personal hygiene and Environmental hygiene'. The aim of personal hygiene is to promote standards of personal cleanliness within the setting of condition where people are living. In Alma-Ata conference of 1978, which declared that health as a fundamental human right; health, hygiene and nutrition have been accepted as important concerns in developing countries (World Bank 1980a: 17).

Kantharpura village is situated in Tilakwada Taluka of Narmada District in Gujarat. This village is mostly populated by Bariya (OBC) and Tadvi (ST) castes. This study intends to examine the awareness of the villagers towards their personal hygiene and healthy habits. And the study also highlights the role of medical infrastructure, government policies and health-education in Kantharpura.

Although 'health' comes under the purview of the state government, the responsibility is shared by both the central and state governments jointly. Thus, a number of schemes are introduced by both the governments. The

main aim of this paper is to study the awareness among the population of Kantharpura village regarding their health and hygiene practices by focusing on drinking water, environment and medical infrastructure.

The research sample consists of 30 households belonging to different castes, classes and religious groups of Kantharpura village. 90% of the respondents belong to Hindu 'Bariya' caste and 10% from other castes especially 'Harijan'. 60% respondents are males and 40% are women. This may be due to the male dominance in rural society and as a result women are not allowed to participate in major decisions. The field work method was carried out to collect the primary data by applying interview scheduled, observation and both qualitative and quantitative methods. The collected data is analyzed using conflict perspective.

A conflict perspective on issues related to health, hygiene focuses on questions involving inequality and tension within the social system. Conflict theorists would not deny that modern health education can help people in maintaining or restoring their health. However, a researcher looking at health, hygiene and medicine from this perspective would identify a number of inequalities that exist within a particular social system (Navarro, 1993, 2000). Thus, conflict perspective on issues related to health and hygiene can justify and explain the consequences of inequalities and its relation with individuals' health, level of knowledge about hygiene and other major issues. Conflict theorists argued modern health education and facilities have not reached to base of society. Because of these inequalities there has been major impact on health and its related issues in society.

The main objectives of this paper are to find out the facilities and infrastructure related to health, to know the awareness among the people regarding hygiene and to find out the governmental role in improving the health and hygiene.

DATA ANALYSIS

1. Facilities and infrastructure related to health

Government has introduced several health schemes for urban as well as rural areas. All the respondents said that they neither have private nor government health center in Kantharpura. They are even deprived of a regular visiting doctor to the village. 60% of the respondents said that they go to the nearby town for even general checkups. 40% respondents are not visiting any doctor or medical expert for treatment. While discussing with them it is revealed that the respondents would prefer traditional treatment/home remedies rather than modern medicine for their illness. Moreover, villagers strongly believe in "Hindu God and Goddess" for their wealth as well as health. On the other hand, it might be possible that the respondents could not afford the modern treatment due to their lack of awareness and weak economic status. It is observed that even for common cold, aches, flu etc. there are neither the doctor nor the medicines available. They have to go to the nearby town for all medical purposes whether they are big or small. Majority of the respondents indicated that they are deprived of transport facilities to reach to the nearby towns or cities in times of medical emergencies. 90% respondents stated that their major problem is safe drinking water. They would bring drinking water mainly from wells and other sources available in the village. They have to use that water for multiple activities such as bathing, drinking, household chores etc. It is also observed that villagers do not have toilet facilities in most of their houses, panchayat house and even in Anganwadi center.

2. Awareness among the people regarding hygiene

From the data gathered it was clear that the level of knowledge regarding hygiene is high (80%) in Kantharpura. However, this knowledge is not translated into practice, for a number of reasons. The major reason seems to be the affordability. People in Kantharpura do not have enough money to build toilets for themselves. Thus, people would prefer to live without toilet facility, including women and girls. Another reason seems to be the lack of sufficient safe drinking water facility in Kantharpura.

According to the data the respondents said that do not have sufficient water to take bath once in a day. Coming to the primary hygiene habits 90% of the respondents do not wash their hands with soap after the natural calls or before meals. 80% respondents do not even change their bed sheets once in a while. From the respondents' view point, sanitation and bathrooms do not seem to be a high priority in the village. Electricity, education and jobs are articulated as major needs, above health and sanitation. 70% of the respondents would prefer to have bath in an open place. The people who have facilities like toilets and bathrooms also experience problems with social and cultural norms. For instance, a man stated that he and his daughter-in-law are not supposed to use the same bathroom and toilet.

30% respondents stated that they have not heard about major diseases like Cancer, T.B. and Heart Attack; 50% respondents do not have any knowledge regarding the transmission of HIV and AIDS in person. The reason for the low level of awareness is due to the lack of specific

knowledge regarding the causes, transmission and prevention of diseases. Majority of the respondents do not have any knowledge about the causes of cancer. In fact very few have knowledge and it has been obtained from electronic media (Radio), government schemes and doctors and nurses when they went outside the village to consult them for their illness.

Majority of the respondents realized the importance of health and hygiene guidelines from various sources. 90% of the respondents said that they do not have health and hygiene related facilities and infrastructure in the village. Majority of the respondents do not even know whether the government schemes related to health and hygiene are implemented or not in the village. Majority of the respondents would like to learn more about the issues related to Malaria, Cholera, Primary Health Care and Household Hygiene. According to the respondents primarily the Gram Panchayat and then the factors like illiteracy, lower socio-economic status, lack of medical facilities etc. are responsible for their lack of awareness about health and hygiene.

3. The governmental role in improving the health and hygiene

The State and Central government of India have undertaken different schemes to provide infrastructure and to improve the level of awareness among the people regarding health and hygiene. The programmes and schemes are National Rural Health Mission, Swasthya Gram Yojana, Nirmal Bharat, etc.

The National Rural Health Mission launched by the Government of India is a leap towards establishing an effective integration and affecting architectural correction in health care delivery system in India. Swasthya Gram Yojana is introduced in the village by giving financial assistance to undertake cleanliness and to purchase sanitation items. Total sanitation campaign also organized in village areas. Toilets should be constructed in schools, Anganwadi centers and health centers. Awareness slogans related to health and hygiene should be displayed at the public places outside the village areas. Nirmal Bharat Yojana was launched by Rajiv Gandhi National Drinking Water Mission, Government of India. The aim of this Yojana is to cover all households with water and sanitation facilities and promote hygiene behavior for overall improvement of health and sanitation in rural India. Health of school children is prime concern for the government and hence, with the co-operation of WHO, UNICEF, and UNESCO the Gujarat government is undertaking several health and hygiene related schemes and implementing World Bank Health Developing Programme.

All these schemes by central as well as state governments could not full fill their goal in rural areas of Gujarat. A majority of the respondents (70%) said that they are not getting any medical facilities in their village. 100% of the respondents said that they do not have a single private as well as government health center in the village. Thus, they have to go outside the village to visit doctors, when a person is ill. A number of governmental schemes could not provide safe drinking water for the villagers. 100% respondents said that they do not have any source for safe drinking water. The data clearly shows that the problems related to their health and hygiene is because of their lack of awareness regarding governmental schemes. While discussing with the respondents the researcher came to know that no NGO is working for their village.

Conclusions

Above analysis and findings of the study clearly indicate the various issues related to their health and hygiene in Kantharpura village. Rural Health care services suffer from a shortage in public sector infrastructure. However, majority of doctors and nurses do not want to work in rural areas because of the unattractive incentives, lack of facilities and also because of losing exposure to outside professional world. Lack of medical infrastructure facility is also responsible factor in following health and hygiene practices. Majority of the respondents are facing drinking water and Health center problems in the village. But, a number of government schemes cannot help people to improve their living standards as they are still continuing to be on paper, but not in action or implementation process. It is also understood that the main problem is on one hand the lack of concern of the government officials to implement the various schemes and the attitude of villagers towards health and hygiene conditions on the other hand. According to M.K. Gandhi sanitation is more important than independence.

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