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Pattern of disease and treatment among the Oraon community under Midnapore municipality: An anthropological assessment

[*1] Santanu Panda, [2] Moumita Saha, [3] Kaushik Bose

[1] ICSSR Post-Doctoral fellow Dept. of Anthropology, Vidyasagar University, Midnapore, West Bengal, India.
[2] Student, Dept. of Anthropology, Vidyasagar University, Midnapore, West Bengal, India.
[3] Professor, Dept. of Anthropology, Vidyasagar University, Midnapore, West Bengal, India.

Abstract
In this paper we have made an attempt to study the pattern of disease and their treatment. This study was conducted in a ward (25) under Midnapore Municipality inhabited by Oraon tribe. These data was collected from 52 families by using simple open-ended question and case history method. Total number of population is 263. About 64 percent are literate and most of the families depends on day labourer for survive their livelihood. The findings revealed that the occurrence of the disease forms patterns in terms of age and sex. The frequency of disease is less early ages but the boys and girls become affected by various diseases like Cold/Cough, Fever, cold, Jaundice, Typhoid, Menstruation problem, and etching etc. as soon as they reach ten years old. The girls come across menstrual problems during their teens. Serious disease like Tuberculosis, Gastric ulcers, Diarrhea, Hypertension and Heart disease, Eye problem and gout pain begin to occur after 40 years old among the Oraon. The treatment of disease also are flows a pattern. In this studied populations no families were found to apply the traditional herbal medicine. A good number of families were also found rush to hospital and Quack doctor whenever they were affected by any aliments. The whole scenario reveals a varied and varied condition rather than a uniform consistent pattern.

Keywords: Ethno medicine, Pattern of disease, Oraon, Tribe, treatment, Midnapore

Introduction
An attempt has been made in this article to record the patterns of disease and treatment among the Oraon community of Midnapore Municipality in Paschim (west) Medinipur District. Pattern is a written document that describes a general solution to design problem that recurs repeatedly in many projects. Software designs adapt the pattern solution to their specific project. Patterns use a formal approach to describing a design problem its proposed solution and any other factors that might affect the problem or the solution. There is various type of disease pattern. The Oraon had been suffering various type of disease.

Health is the level of functional or metabolic efficiency of a living organism. The World (WHO) defined health in its broader sense in 1946 as "a state of complete physical, mental, and social well-being and not merely the absence of disease or infirmity.'' Although this definition has been subject to controversy, in particular as lacking operational value and because of the problem created by use of the word "complete," it remains the most enduring. Other definitions have been proposed, among which a recent definition that correlates health and personal satisfaction. Classification systems such as the WHO Family of International Classifications, including the International Classification of Functioning, Disability and Health (ICF) and the International Classification of Diseases (ICD), are commonly used to define and measure the components of health. (http://en.wikipedia.org/wiki/Health: accessed on 12.08.2014)

A disease is a particular abnormal, pathological condition that affects part or all of an organism. It is often construed as a medical condition associated with specific symptoms and signs. It may be caused by factors originally from an external source, such as infectious disease, or it may be caused by internal dysfunctions, such as autoimmune diseases. In humans, "disease" is often used more broadly to refer to any condition that causes pain, dysfunction, distress, social problems, or death to the person afflicted, or similar problems for those in contact with the person. In this broader sense, it sometimes includes injuries, disabilities, disorders, syndromes, infections, isolated symptoms, deviant behaviors, and atypical variations of structure and function, while in other contexts and for other purposes these may be considered distinguishable categories. Diseases usually affect people not only physically, but also emotionally, as contracting and living with many diseases can alter one's perspective on life, and one's personality. (http://en.wikipedia.org/wiki/Disease, accessed on 12.08.2014).

Knowledge of the treatment of diseases is another sphere where we find a close relation between the Oraon community and its environment. Treatment of diseases is invariably based on the use of medicinal herbs found in the region. There are about 34 kinds of disease which are treated with such medicines. These include pain (headache, toothache, stomachache, eye pain, ear pain, and migraine), fever (high, ordinary, and malaria), wounds, constipation, diarrhea, dysentery, epilepsy, rheumatism, insomnia, tetanus, eczema, etc. These are treated with medicines based on leaves, roots, the bark of trees, and with plants which grow wild in the jungle. Some of them are grown in their fields by the people themselves.

About the community
Tribal in India constitute around eight per cent of the total population. Oraon is one of the tribal communities found in

India, which mainly depends on agriculture for earning their living. They are also known as Kurukh tribes. These tribes are mainly found in the states of Jharkhand, Bihar, West Bengal and Orissa. In the ancient days, Oraons used to make their living by chopping timber and selling forest products. Majority of the population of Oraons can be found in Northeastern states engaged in the occupation of tea cultivation.

Oraons are considered to have the second largest population of tribes in Bihar and Jharkhand. Efficient, particularly in tea garden works, Oraons are believed to have settled in the Chotanagpur Plateau centuries ago. Oraons speak Kurukh language related to Dravidian family. Majority of the Oraon tribes are Hindus and are religious minded people. They worship Gods and Goddesses but a great number of these tribes have adopted Christianity. In the ancient days, this community used to follow Sarna religion. Oraons are further divided into sub-castes like Kudas and Kisans, who follow patrilineal family customs. There are a total of 14 clans in Oraon tribal community like, Gari, Lakra, Kispotta, Runda, Tirky, Toppo, Linda, Ekka, Kuzur, Bek, Kerketta, Bandi, Minz and Khalkho. This tribal community in India is also known worldwide as they still believe in following age old custom of human sacrifice. These sacrifices are carried out during the famous Sarhul festival celebrated before cultivation of crops, as a mark of respect to please the local deity. The festivals have been a part of life for tribals since ancient time. Sarhul and Karma are the two main important festivals of these tribals. They are also very fond of music and dance. Karma, Jadur, Dassai and Kagha Parva are their most favorite dances. Traditional instruments like Nagara, Kartal and Mandar are still used by these people.

Objectives of the Study

To know the socio-economic status of the Oraon tribe in the Medinipur Municipality.

Secondly to study the pattern of disease and treatment among the Oraon Community of Tantigeria Madhyapara.

Literature Review

There are many people who study various diseases and their pattern of treatment. Rituparna Ghosh and Sumana Sarkhel in their study "Ethnomedical practices of tribal communities in Paschim Medinipur" show various diseases and their treatment pattern among the tribal communities. B. Banerjee and O.N Mandal studies malnutrition among infants in tribal community of west Bengal. Dr. Chitra Bahadur Budhakthoki studies perceptions of Malaria and pattern of treatment seeking behavior among the Tharu and Pahari communies of Nepal. R.S Balgi researches on various health problems, diseases burden and ameliorative changes in tribal communities of Orissa. His research shows that there is a heavy burden of communicable, non communicable and silent killer genetic diseases prevented in tribal community. Panda & Guha's article on Tribal health bulletin on disease and treatment pattern among the Lodhas. A search of a literature virtually there is no empirical research on Oraon's regarding their disease and treatment.

Methodology

This study mainly depended on direct intensive observation and interviews with the inhabitant affected by various types of disease and their treatment. The demographic and socio-economic surveys were conducted among all the households of the study area with the help of structured and open-ended questionnaire schedules. Questionnaire included regarding various type of disease and their treatment. The qualitative information regarding the feeling and attitude of the suffered persons were collected through repeated conversations with those persons over long period of time. Various type of disease and their treatment have been collected from individual family members by the case study method.

Study area

The study area is located near the Eastern side of the railway track of southern eastern railway. This was gone through the Medinipur municipality. The ward number is 25 viz. Tantigeria Madhyapara. The study area is situated was also very near to Vidyasagar University. The population is predominantly populated by the oraon tribal community whose total member of soul is 263 distributed in 52 families. The Madhyapara is a nuclear type of village where houses are arranged linearly on either sides of the road. Most of the hours hone mud wall with root thatched by paddy straw. However, a number of houses have brick wall and the root covered by corrugated advents sheet most of well as heat and clean. The study population depends on tube wells for their drinking water, a number of tube wells have been installed by the municipality office. The study ward is electrified by the concerned authority department but all the families have not been able to get electricity connections even today some of them really on indigenous kerosene lamp. The ward is devoid of sanitation and drainage system. There are only four household who have latrine in their houses.

Result and Discussion

The socio-demographic scenario of the study population

The overall sex ratio of the oraon's under study is 919.70, which is lower than the state of west Bengal or national 940 level as per 2011 census report of India. The community shows a considerable number of persons above the age of 64 years. It shows for a long life span for the community. The age-sex composition of the sample population reveals higher number of younger persons including children belonging to 0-4, 5-9, 10-14 and 15-19 age groups. (Table 1)

The overall educational scenario is not so good. The literacy rate of the community is 63.88% which is well below that of the country 74.4% as per 2011 census report of India. Among the literates, females are outnumbering the males. We have found in the higher age group the literacy level is low. Meanwhile; most of the old age people has no education. (Table 2 & figure 1)

The occupational activity of the community shows about same pattern among male and female of the employed persons. It is found that the earning member of the community started their occupation from the age-group 10-14. They have started occupation as a day labour and study revealed that the females' percentage is higher than males. Most of the people were engaged in day labourer (about 80%). Only 1.08% have own agricultural land. About 7% of males and 4% of females are engaged in service. Few females were engaged in cooking in the student mess (10.09 %) and 7.27% were engaged in the own business. (Table 3, 4 & figure 2, 3)

Discussion on disease and treatment

The study population has been suffered various type of disease Cold/Cough, Itching, Malnutrition, Dehydration, vomiting, Diarrhea, T.B, Fever, cold, Jaundice, Typhoid and Appendix, Food Poisoning, Typhoid, Menstruation Problem and Gastric ulcer. They have been suffering from various diseases due to their poor economic condition, low education and negligence of treatment. The older people have not gone to the doctor for treatment easily; when they suffered in a critical disease at that time went to the doctor. (Case study 2).

Age and sex wise Distribution of Disease

We have found that there is no disease among the Oraon's in the age group 40-44 & 70+ of male and 0-4, 60+ of female. Their major disease is Diarrhea, T.B, and Menstruation. Because they used to alcohol whole day without any food but they could not take any solid food for survive. They are hard worker. When they went to day laborer work at that time they used tobacco like *Biri, Khaini* etc. Maximum male are affected by the critical disease in the age group of 10-14 & 15-19, because in this age groups boys are always outside the home. The most of the females has been affected by the serious disease in the age group of 15-19, 20-24, 25-29, 30-34 and 35-39. (Table 5)Reasons behind the serious disease that about 79 percent females went to day labour work every day at that time they drink water very little and some of the spending whole day in empty stomach. (Case study 3).

Pattern of treatment of disease among the Oran tribe

The treatment system of the study area is peculiar. There are two types of treatment system. Majority of the villagers is used to quack doctor.71.05% of the villagers are used to quack doctor.24.05% of the villagers used to go to the hospital. Only 4.80% are unable to treatment for their poor financial condition. (Table 6)

Two representative case studies

Case study 1

Name of the informant: Kajol Sing Age: 49 Sex: female

I have been suffering thyroid problem since 2011. I also have placental infection and for that reason I became obese and experienced monthly cycle 2 times in a month. In times of monthly cycle I also experienced too much bleeding and blood clot and abdominal pain. Because of these I felt too weak. Almost 4 years I have been faced these problems.

At first I went to Dr. Kanchan Dhara at Medinipur Medical college hospital for my menstruation problem. But he could not recover me. So after that I went to Dr. Khagen Khamrui at Golekua chak in his own chamber. Dr. Khamrui refers me to the gynecologist Dr. P.K. Bhowmik. He also could not improve my problem; so I stopped the treatment. At present, I am under treatment of a homeopathy doctor and I respond to his treatment. Some of my problems are reduced, but doctor says it takes time to fully recover.

Case study 2

Name of the informant: Jogai Sing Age: 49 Sex: male

I have been suffering from spinal cord pain since 2010. I could not do any work. After suffering 6 months I went to Midnapore hospital along with my brother. I took medicine from Hospital for 6 months but no improve. After that I had decide should go to the Katak (Odisha) to get better treatment. So I went to Katak along with my brother. The doctor told me its need to operation and admitted me in the Hospital. After operation I have been spent 7 days at Katak hospital. Now I am fully cured and work hard.

Conclusion

In conclusion, the studies people are economically are very poor. Most of them are engaged in day labour. Their health condition is very low profile and their education scenario is lying in middle position.

The study revealed that the study people were suffered various diseases in whole year such as Tuberculosis, Diarrhea, Dehydration, Anemia, Tumor, Hypertension, Itching, Typhoid, Gastric ulcer, Pox, Menstruation problem, Common cold, cough & fever in this village. The villagers have been also affected by the above disease in each age group of both sexes. The female members of the village are more affected than the male. Most of the peoples were affected by Itching, Dehydration, Common cough and cold, problem of menstruation.

The treatment of disease also are flows a pattern. About 72 percent effected people were chosen the quack doctor for their treatment. In our field observation the population of the study area was belief the quack doctor. A good number of families were also found rush to hospital whoever they were affected by any aliments. There are also both numbers of families who are going to costly private clinics, but in little number. The whole scenario reveals a varied and varied condition rather than a uniform consistent pattern.

Table 1: Demographic scenario of the study population

Age group	Male	Female	Total
0-4	(8.76)12 [4.56]	(6.35) 8 [3.04]	20 (7.60)
5-9	(10.22)14 [5.32]	(6.35)8 [3.04]	22(8.37)
10-14	(11.68) 16 [6.08]	(9.52) 12[4.56]	28(10.65)
15-19	(17.52) 24 [9.13]	(18.25)23 [8.75]	47(17.87)
20-24	(11.68)16 [6.08]	(11.91)15 [5.70]	31(11.79)
25-29	(8.03)11 [4.18]	(9.52)12 [4.56]	23(8.75)
30-34	(5.84) 8[3.04]	(6.35)8[3.04]	16(6.08)
35-39	(8.76)12 [4.56]	(7.14)9 [3.44]	21(7.98)
40-44	(2.92) 4 [1.52]	(4.76)6 [2.28]	10(3.80)
45-49	(5.84) 8 [3.04]	(9.52)12 [4.56]	20(7.60)
50-54	(4.38) 6 [2.28]	(2.38)3[1.14]	9(3.42)
55-59	(0.73) 1 [0.38]	(2.38)3 [1.14]	5(1.90)
60-64	(0.73) 1 [0.38]	(1.59)2 [0.76]	3(1.14)
65-69	(1.46) 2 [0.76]	(1.59) 2 [0.76]	4(1.52)
70+	(0.73) 1 [0.38]	(2.38) 3 [1.14]	4(1.52)
Total	(52.09)137	(47.91)126	263

() percentage represents the total [] percentage represents the column

Sex ratio: F/M x 1000, 126/137 x 1000=919.70.

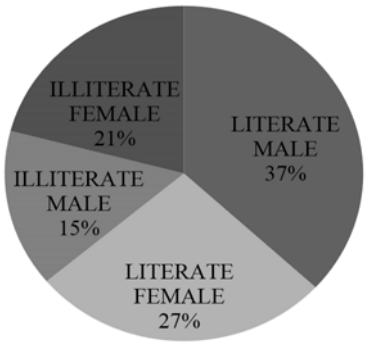

Fig 1: Pie chart showing educational status of Oraons at Madhyapara

Table 2: Educational level of the study population

Age Group	Literate				Illiterate				Total	
	Male		Female		Male		Female			
	N	%	N	%	N	%	N	%	N	%
0-4	2	0.76	-	-	10	3.80	8	3.04	20	7.60
5-9	11	4.18	8	3.04	3	1.14	-	-	22	8.37
10-14	14	5.32	12	4.56	2	0.76	-	-	28	10.65
15-19	20	7.60	16	6.08	4	1.52	7	2.66	47	17.87
20-24	11	4.18	14	5.32	5	1.90	1	0.38	31	11.79
25-29	8	3.04	6	2.28	3	1.14	6	2.28	23	8.75
30-34	7	2.66	3	1.14	1	0.38	5	1.90	16	6.08
35-39	8	3.04	2	0.76	4	1.52	7	2.66	21	7.98
40-44	3	1.14	3	1.14	1	0.38	3	1.14	10	3.80
45-49	7	2.66	5	1.90	1	0.38	7	2.66	20	7.60
50-54	3	1.14	-	-	3	1.14	3	1.14	9	3.42
55-59	1	0.38	1	0.38	1	0.38	2	0.76	5	1.90
60-64	1	0.38	-	-	-	-	2	0.76	3	1.14
65-69	1	0.38	-	-	1	0.38	2	0.76	4	1.52
70+	-	-	1	0.38	1	0.38	2	0.76	4	1.52
Total	97	36.88	71	27.00	40	15.21	55	20.91	263	100

Occupational patterns of the study population

Table 3: Male

Age Group	Owner Cultivator		Service		Labour		Business		Total	
	N	%	N	%	N	%	N	%	N	%
10-14	-	-	-	-	2	2.06	-	-	2	2.17
15-19	-	-	-	-	12	13.04	-	-	12	13.04
20-24	-	-	1	1.08	14	15.21	-	-	15	16.30
25-29	-	-	1	1.08	13	14.13	1	1.08	15	16.30
30-34	-	-	3	3.26	5	5.15	-	-	8	8.69
35-39	-	-	-	-	15	16.30	-	-	15	16.30
40-44	-	-	1	1.08	4	4.12	1	1.08	6	6.52
45-49	-	-	-	-	12	13.04	-	-	12	13.04
50-54	1	1.03	-	-	3	3.26	-	-	4	4.34
55-59	-	-	-	-	1	1.08	1	1.08	2	2.17
60-64	-	-	-	-	1	1.08	-	-	1	1.08
Total	1	1.08	6	6.52	82	89.13	3	3.26	92	100

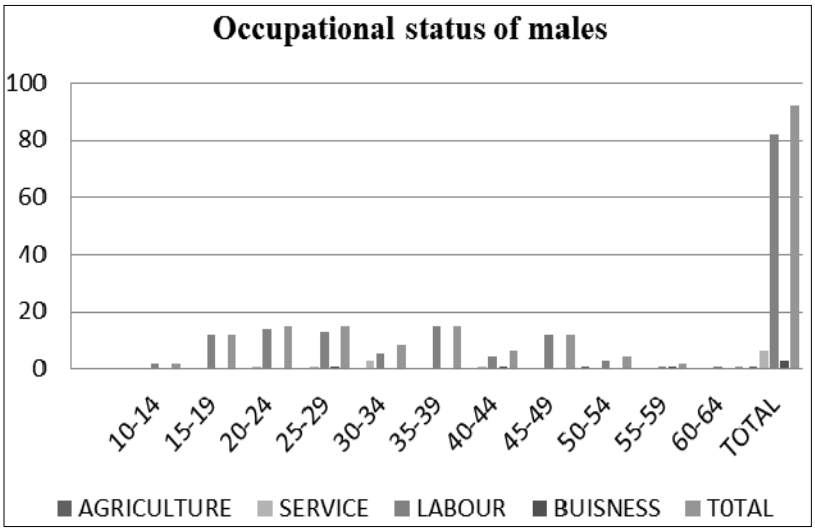

Fig 2: Bar chart showing occupation status of Oraon males

Table 4: Female

Age Group	Service		Labour		Business		Cooking		Total	
	N	%	N	%	N	%	N	%	N	%
10-14	-	-	4	7.27	-	-	-		4	7.27
15-19	-	-	5	9.10	-	-	-		5	9.10
20-24			13	23.63		-	-		13	23.63
25-29			7	12.72	1	1.81	-		7	12.72
30-34			2	3.63	-	-	1	1.81	3	5.45
35-39	-	-	3	5.45	1	1.81	2	3.63	6	10.09
40-44	2	3.63	1	1.81			2	3.63	3	5.45
45-49	-	-	2	3.63	3	5.45			5	9.10
50-54	-	-	3	5.45	-	-	1	1.81	4	7.27
55-59	-	-	2	3.63					2	3.63
60-64	-	-	1	1.81	-	-			1	1.81
Total	2	3.63	43	78.18	4	7.27	6	10.09	55	100

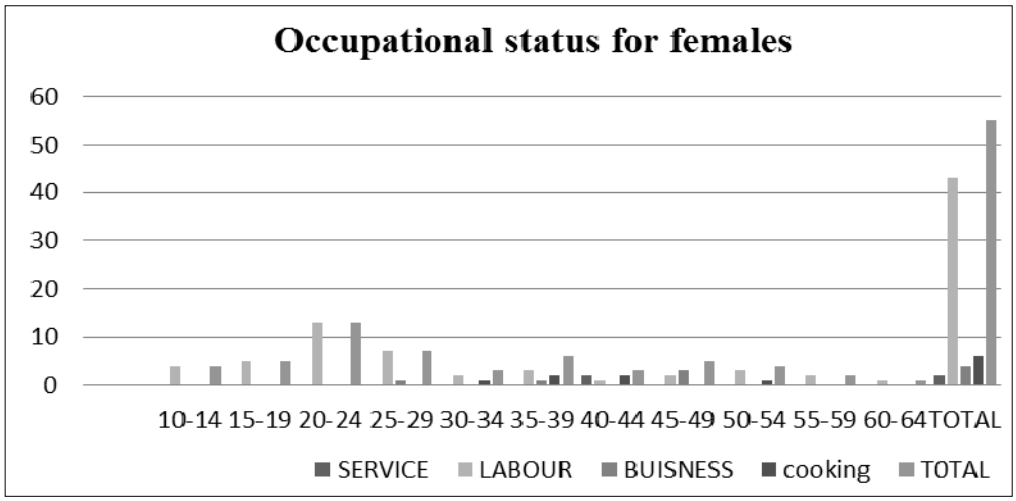

Fig 3: Bar chart showing occupation status of Oraon females at mdhyapara.

Table 5: Age and sex wise Distribution of Disease

Age Group	Male	Female
0-4	Cold/Cough, Itching	Cold/Cough
5-9	Cold/Cough Malnutrition, Dehydration	Cold/Cough, Vomiting Fever, Pox
10-14	Cough/Cold, vomiting, Diarrhea, Itching	Cold/Cough Vomiting Fever. Diarrhea
15-19	T.B, Fever, cold, Jaundice Typhoid,	Fever, Food Poisoning, Typhoid, Menstruation Problem
20-24	Cold/Cough Vomiting Fever. Typhoid,	Diarrhea, Jaundice, Menstruation Problem
25-29	Diarrhea Fever. Jaundice	Fever. Jaundice, Typhoid, Menstruation Problem
30-34	Diarrhea Fever. T.B, Appendix	Diarrhea Fever. Gastric ulcer, Menstruation Problem
35-39	Diarrhea Fever. T.B, Typhoid,	Jaundice, Menstruation Problem, Gastric ulcer.
40-44	._	Fever, Menstruation Problem
45-49	Diarrhea Jaundice	Diarrhea Fever. T.B,
50-54	Fever.	Typhoid, Cold, Fever
55-59	Fever, Joint pain	Diarrhea Fever, Eye problem
60-64	Heart disease	_
65-69	Fever.	_
70+	_	_

Table 6: pattern of treatment

Tribe Name	Hospital	Quack Doctor	No Treatment	Total
Oran	25(24.05%)	74(71.15%)	5(4.80%)	104(100%)

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