ROLE OF TRADITIONAL HEALERS IN EASTERN UTTAR PRADESH

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ABSTRACT

Health is considered one of the basic needs of human being and access to health services an undeniable right of every one. Improvement on human health front have not occured equally every where and benefits have not percolated to every one. The rural population has least benefitted from the advancements of modern sciences. The health condition of rural area is very poor. To achieve the goal of 'Health for all' the confidence and accumulated wisdom of traditional healers are to be used in proper direction. If proper facilities are provided to traditional healers they may help in easing pressure on over burdened clinics by treating minor, self limiting psychosomatic and certain other kind of ailments in which traditional therapies are effective and appropriate.

INTRODUCTION:

Health is considered one of the basic needs of human being and access to health services an undeniable right of everyone. Conversely, protection from illness is an incontrovertible prerogative of every one. The improved access to health services and the protection from illness are essential for the full participation of people in the community life and for general improvement in their quality of life, if rural area health is an important factor to access the

socio-economic condition of people. Health has not been considered solely with psychological or physiological approach². Health has a broader meaning refering to 'a state of complete physical, mental and social well being and not merely the absence of disease and infirmity'. The health is related to the internal conditions of a society. Industrial development has created environmental pollution and multiple diseases on the one hand and has revolutionalised medical science on the other.

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In the recent past there has been tremendous improvement in human health as well as in conditions congenial to its betterment in India. The improvement in health can be witnessed in the fall of mortality rates; changes in the age-structure of the population; effective control over the major infectious and parasitic diseases and enlargement of the average life span of human beings.

Improvements on human health front have not occured equally every where and benefits have not percolated to every one. The rural population has least benefitted from the advancements of medical sciences. The situation of rural area turns out to be further worse due to shortage of health personnel and facilities. In such area people experience a greater degree of malnutrition. The health condition of rural area is very poor.

Several attempts are being made to improve the health conditions of people in the villages. Government administrators and some of the medical experts see the major health problems of the rural area due to insufficient supply of equipment and But rural people have nersonnel. their own beliefs about the causation and treatment of disease which fit perfectly in their social structure and traditions. They have their traditional healers who have become the part of the village life. There are several types of people in the village who practise the healing art. They are the grocer-herbalists, priests, exorcists, removers of evil eye, those who make and talismans, amulets charms. snakebite curers, bone-setters, boil and wound experts, those who put salve in the eyes, thorn pullers. barber-surgeons and village dais who deliver babies4. Such village people and their predecessors practised their profession in full zeal and proved useful to the people. These healers have their own vocation. Mostly they are farmers and healing as a speciality is only a side business for them. Their earthly rewards are praise and respect and they believed to earn a better place in the heavens.

The *purohit*, the domestic priest belongs to the *Brahmin* caste. He generally advises his clients to perform different religious rituals as a mean of obtaining good health prosperity and children. His medical practice is regarded as ancient and sacred. In his prescription he includes a charitable gift such as food, money or a cow for himself.

For rural people, modern medicine has existed only in the outer realm beyond family and beyond caste and village. It has remained in the realm of fundamental distrust and inspires more fear than confidence. Mödern medicine practitioners have remained in the outer realm of village life; and they are unaccepted to villagers.

It is well known fact that, in India, village people are generally poor and illiterate. Agriculture is their main profession. They extract hard work for cultivation but some times crops fail due to the vagaries of the weather. In many times they depend on the mercy of God and lack a sense of security. In rural area the security of health is provided to them not by modern medicine practitioners but by the traditional healers. The modern and sophisticated dress of modern medicine practitioners and their way of dealing create a gap between them and the patients of the village. Such doctors exploit villagers by means of their technical superiority. The patients and their relatives in rural area freely talk to traditional healers of the village. Traditional healers in rural area understand the essential family contribution in the realm of health and disease. Whereas modern medicine practitioners only need to examine the patients. According to them the relatives of the patients create nuisance in the way of treatment and diagnosis. There is no 'personal touch' which would be so satisfying to the patient and his relations.

Traditional healers always point out to the village patient about what is wrong with him. Such patients have high regard with traditional healers. Traditional healer himself prepares the medicines for the patient.

Village patients know the efficacy of the medicine because it has been made by the blessed hands of the practitioner. They believe firmly in the 'virtue of touch'.

Traditional healers are paid by patients for their services on a fee for service basis and according to a sliding scale based on the ability of patients to pay⁵. Most traditional healers have had no formal schooling in indigenous medicine. In most instances their training has consisted of a short period of training or apprenticeship under another healer.

PROFILE OF THE UNIVERSE

The present study is the out come of the result conducted in the Gazipur, a backward city of *Poorvanchal* (eastern part) of Uttar Pradesh. Though this city is very well connected by roads and rail some part of this district is remote and crudely backward. In this city there is Mohammadabad Yusufpur Tehsil in which Barachanwar block is situated. This area has a bunch of traditional healers. One hundred traditional healers have been interviewed.

EMPIRICAL FINDINGS LISEASES SUFFERED FROM

The curative dimension of health connotes to alleviation and treatment of diseases. Here we will pay our attention on the various aspects of health and illness/diseases rural people suffer from. When the

traditional healers were asked about the diseases rural people suffer from. Their responses show that 50% of the rural people suffer from headache and fever, 21% from tuberculosis, 5% from bone trouble. Relatively a good percentage (19%) of rural people were affected by the night blindness. Rest of them suffered from skin diseases such as scabies, boils and ringworm.

When respondents were further enquired in depth about the diseases. it has been reflected that the poor conditions of the rural people are very much responsible for health problems. Different diseases reflect differing deficiencies, some diseases indicate nutritional deficiency. Most dangeof all the diseases is the rous tuberculosis. There are some other diseases among the rural women which are not mentioned by them. The most prevalent diseases among women are diarrhoea. dysentry, ringworm, malaria, influenza, anaemia, measles, whooping-coughs.

TREATMENT

With regard to the line of treatment traditional healers recommended for the ailments of the rural people, interestingly 41% respondents pointed out that they recommended herbal treatment, 19% respondents preferred sorcery and exorcism, 30% of them stressed Ayurvedic treatment and 10% of them recommended no treatment. They awaited for the diseases

to be cured automatically in due course. Traditional healers also preferred locally called 'Khar-Biraiya' (herbal treatment).

CAUSES OF DISEASES AND THEIR TREATMENT

The traditional healers of the villages have highlighted their opinion about the kind of illness and the type of treatment they prefer and the attitude they hold towards modern medicine. We must pause to reflect on more subtle aspects of disease and treatment which do not transpire from the tabular data but surfaced in the course of interview and observations.

The response of the traditional healers clearly depict the sociocultural context of the village and defines the norms of health and physical fitness of the villagers. It is commonly held that health and longevity are rewards for a life of honesty. religious purity. rectitude and sexual restraint. In other words, the rural people relate physical health with morality, religiousity and social conformity conversely, disease is seen as the result of wrong deeds; it is associated with sin (papa) and fault (dosha)6.

Whatever be the kind of disease, traditional healers are of the view that it is attributed to the moral guilt and the past *karmas*. They believed that both illness and cure are

manifestations of the will of God. Thus, traditional healers also hold essentially religious view of disease and health.

According to Traditional healers

the ultimate cause of illness is traced back to the supernatural forces. Some of the diseases and their treatments are presented in the following table.

DISEASES AND THEIR TREATMENTS

S.No.	Diseases	Prescriptions
1.	Small-pox	to make restriction on use of oil, turmeric in the food and soap for bath. To worship Goddess 'Shitala' daily.
2.	Cholera	Community worship of the Goddess.
3	Leprosy	Propitiation of Brahma.
4.	Jaundice	Wear Jantar (a magical bead) in the hand or around the neck.

AFFORDABILITY OF MEDICINE

Poverty is stark in villages. The cost of medicine is very high. Since rural people lack financial resources they might not be able to afford modern medicine. In order to confirm, this traditional healers were asked to ascertain the affordability for medicine among rural people. There were 63% respondents who expressed their view that the rural people were not able to purchase modern medicine. As against this only 37% rural people were able to afford modern medicine.

NUTRITION

The close relation between nutrition and good health is widely recognised by modern medicine experts. To some extent the traditional healers also accept this

view. Nutrition is said to affect both mental and physical well-being⁷. The lower nutritional status is found to be associated with poor health which is related with low levels of work efficiency, low productivity and low income. Nutrition has special significance for the rural people. Under nutrition saps the victims' ability to survive even simple infectious diseases⁸.

Keeping in mind the significance of nutritional food or balanced diet we attempted to understand the affordability and the availability of it to rural people. The respondents (traditional healers) pointed out that sometimes rural people take the balanced diet (31%). Majority of the respondents expressed their view

that they did not get food stuffs (56%). Some respondents pointed out that often they got it (13%).

VIEW REGARDING CONTROL OVER REPRODUCTION

Control of reproduction refers to the control over procreation through knowledge of the process and the financial and legal access to services and technology which enable rural people to have few children as they want, when they want. The planned life of the rural people raises the standard of life and enhances the social. geographical and career mobility. Conversely the long run consequences of unregulated fertility are horrendous. The growth numbers eats all the benefits, derived from the planned development. Hence there is a need for family limitation and keep control over reproduction.

Keeping this fact in mind the traditional healers were asked to express their view regarding the family planning. Majority of the respondents (69%) were of the view that they instruct rural people regarding the family planning. Only 31% respondents were of the view that they did not favour it.

CONCLUSIONS & GENERALIZATION

Analysis of the facts clearly reveal that traditional healers enjoy the confidence of the rural setting in

which they live and function. Their relationship with their patients seem to be cordial and friendly and they have considerable degree of influence in their surroundings. These traditional healers approved the preventive health activities carried out by the government health workers such as vaccination against small pox, cholera and tuberculosis. Though traditional healers want to provide their full cooperation to Government health workers but they are always treated as outsiders regarding the implementation of various health programmes.

To achieve the goal of 'Health for all' the confidence and accumulated wisdom of traditional healers are used in proper direction. Limited financial resources, the acute shortage of health professionals, willingness to serve in the rural areas, the vast distances to be covered etc. are the main influencing factors with regard to this new look at the traditional healers.

Traditional remedies have been listed for the purpose of providing primary health care. The practitioners of traditional medicine are actively involved in the health care delivery programmes. They are considered as well as respected for the important part of the national health system.

The analysis of the data on various aspects of health, clearly points out that they have deep

existence in the sociocultural matrix of the rural areas. They are of the view that modern medicine has not changed the mental attitude of the people in rural areas. Even today rural people have inclination towards magico religious way of cure of diseases. Traditional healers are noted as the core of the primary health care in their own community.

In most cases they are the first contact for health care and they are already offering frontline medicine. If proper facilities are provided to traditional healers, they may help to ease pressure on overburdened clinics by treating minor self limiting psychosomatic and certain other kind of ailments in which traditional therapies are effective and appropriate.

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सारांश

पूर्वोत्तर प्रदेश में पारम्यरिक चिक्तिसकों की भूमिका

ए एल. श्रीवास्तवएन. के. श्रीवास्तव

मानव की मूलभूत आवश्यकताओं में स्वास्थ्य को भी एक माना जाता है तथा स्वास्थ्य सेवाओं की प्राप्ति पर हर व्यक्ति का अखंडनीय अधिकार है। मानव स्वास्थ्य की बेहतरी की दिशा में सभी स्थानों पर एक समान उन्निति नहीं हुई है तथा इसके लाभ भी हर एक व्यक्ति तक नहीं पहुंचे। आधुनि क विज्ञान में हुई प्राप्ति से ग्रामीण लोग सब से कम लाभान्तित हुए हैं। ग्रामीण क्षेत्र में स्वास्थ्य दशा बहुत ही खराब है। "हेल्थ फोर आल" के लक्ष्य की प्राप्ति के लिये पारम्परिक चिकित्सकों के विश्वास और संचित ज्ञान का उपयोग सही दिशा में करना चाहिये। बिद पारम्परिक चिकित्सकों को उचित स्वीधायें उपलब्ध कराई जायें तो वे प्राथमिक चिकित्सा कार्यक्रम में सहायक वन सकते हैं।

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