

## **GALAXY OF HEALTH HAZARDS IN VARIOUS SOCIO-CULTURAL SCENARIO**

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### **ABSTRACT**

The word 'Health' has enjoyed an enormous popularity with writers during the past quarter century. It was only during the second world war, the term 'social medicine' came into wider use. The concept of social medicine has given a new orientation of medicine to the changing needs of man and society. The vast majority of the population of the world still have no access to decent health care.

### **Health in Various Perspectives**

The word 'health' has enjoyed an enormous popularity with writers during the past quarter century. In 1911 Grotjahn published his famous book '*Soziale Pathologie*' in which he advocated a systematic study of human disease with special reference to social factors. He further emphasised the need for sociological analysis of health problems making use of the methods of Statistics, Demography, Anthropology, Economics, and Sociology. But it was only during the second world war, the term 'social medicine' came into

wider use. In this century the social conscience of world society, particularly developing society, needs an awakening because human race has reached to a crossroad where its own achievements, ambitions and developments claimed its feet. The enjoyment of the highest attainable standard of health is in danger.

The World Health Organization has done great service to mankind by ushering an era of international cooperation in the field of health and promoting the concept of 'one world health' and 'health care for all' by the year 2000. 'Health denotes a state of complete physical, mental

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and social well-being, and not merely the absence of disease or infirmity.<sup>1</sup> The W.H.O. sets the standard of 'positive health' as a goal to be attained by the people. The W.H.O. definition of health envisages three dimensions-physical, mental and social well-being. A person who enjoys health at these three planes is said to be in a state of 'positive health'. The attainment of positive health implies that a person should be able to express as completely as possible the potentialities of his genetic heritage, and, this is possible only when the person is allowed to live in healthy relationship with his environment - an environment that transforms genetic potentialities into phenotypic realities.<sup>2</sup> This means that in order to promote and preserve health at the optimum i.e. the 'positive health' social services have to be developed ranging from "womb to tomb".

Ideal health will, **however**, always remain a mirage because **every** thing in our life is subject to change. Health in this context may be de-

scribed as individual's ability to adopt and modify according to the changing condition of life. In working or positive health the doctor and the community health expert are in the same position as the gardener or farmer faced with insects, moulds and weeds. Their work is never done.<sup>3</sup>

Relationship between health and environment has become a debatable subject. This subject comes under the periphery of ecology of health. According to ecological approach, health is a state of dynamic equilibrium or adjustment between man and his environment.<sup>4</sup> It can be explained graphically as a balanced scale with the pans representing the 'agent' and 'human host' and the fulcrum. The 'environment' and 'health' as a state of equilibrium between the disease agent and the human host. When the balance is disturbed for any reason, ill health results. As new ways of living have been developed by man, new ecological systems, including pathogens

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1. Who - 1948

2. Dabosrene, WHO Chronicle: 23,499,1969

3. Prasad B.G. Medical Education Bulletin WHO, SEAR 3,3 1959

4. Dubos Rane Ibid.

have been formed. Urbanization, industrialization and other patterns of social processes have their effects upon the composition of ecological system.<sup>5</sup>

The concept of social medicine has given a new orientation of medicine to the changing needs of man and society. It is not only concerned with community health but also with the organization of medical care within the community and with factors that influence its distribution, utilization and effectiveness.<sup>6</sup> Coe<sup>7</sup> has ably stated 'Social Medicine stands upon two pillars medicine and sociology. Therefore, social medicine is concerned with the health of groups of individuals and individuals within these groups with a view to create, promote, preserve and maintain optimum health. The rapid growth of industrialization has encouraged the desire to produce and earn more. It has brought immense degradation in health of the population because unplanned rapid

industrialization has adversely affected the living and environmental conditions. In other words it can be said that health hazards are the product or rapid industrialization in the developing country like India.

The vast majority of the population of the world still have no excess to decent health care. Rural population in developing countries are particularly under privileged with respect to health care. There is a maldistribution of health resources not only between countries but also within countries. The world health organization has set the goal of 'Health for All by the year 2000' that is an acceptable level of health for everybody within next twenty five years.<sup>8</sup> Its achievement depends upon urgent action by individuals, communities, the health professions and national governments. It calls for a new economic and social order.

### **Disease**

The concept of disease is closely associated with health. Disease is

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5. Dubus, Rene WHO chronical 23, 499, 1969

6. WHO, Health aspects of human settlement, Public health papers No 66 - 1977

7. Col. Rodney, Sociology of medicine MC.Graw Hill company New York - 1970

8. Srivastava, A.b., Human relations in social organisation, chugh publication, Allahabad 1979.

considered as a maladjustment to the environment to which numerous factors contribute. Physical environment factors likely to impair health and promote disease include water supply, air, climate, weather radiation and nature of soil. Biological influences embrace bacteriae, viruses, rickettsiae, protozoa, —their immediate hosts and vectors each of which has its own specific environmental requirements. Socio-economics factors of environment include diet, occupation, density and movement of people, sanitation, habits and customs. Disease in any given place is the result of a combination of geographical circumstances which bring together such environmental hazards to man at the most suspicious time. Geographical conditions and association with environmental produce various disease such as improper water supply develops cholera, viral hepatitis diseases, atmospheric pollution creates chronic bronchitis, lung cancer diseases, type of soil develops endemic goitre, hook worm diseases, or micro-organisms and their vectors.

### **Health Hazards in different Socio-cultural Scenario**

Hazards related to health are essentially a biological and physiological phenomena but it has very close affinity with culture. It occurs in a social context and reflects the intimate association with other human beings. In each level of culture the attitude of people towards health and its related hazards are governed by customs, traditions, values, pattern of interaction directly or indirectly. In Indian context the problem of health hazards are guided by religious beliefs, dogmas and practices. These practices have pervaded the life of average Indian.

In Indian situation the problem of health hazard is related to social stratum which has its own mode of living, habit, attitude and taboos. In India it is generally found that the poor are the worst affected by epidemics and contagious diseases while the upper class people suffer from heart diseases, blood pressure and other sophisticated diseases<sup>8</sup>.

In India the problem of health hazards is very wide spread and the

masses are deeply steeped in the culture of silence and poverty. Not only the people are ignorant but they also accept exploitation and oppression very meekly. The poor and the down trodden section of the masses have accepted their pathetic situation in the name of divine providence, karmphal and socially and culturally sanctioned taboos, precepts and traditions. The socio-economic inequality, the exploitation of the low-caste, the oppression of the high caste have developed such a cultural trait in which the depiction of health hazards can be tolerated easily.<sup>9</sup>

The multinational financial, industrial and agricultural corporations are today's, most powerful agents for extending the business in developing countries. Such agencies at the time of crisis control the country and identify themselves with ruling class. They create dependencies. Without thinking on the health hazards they refer pernicious economic as well as health effects.

Thus, health hazards become the important part of the life of the developing countries.<sup>10</sup>

### **Facets of Health Hazards**

Health hazards can be seen in different spheres of society.

### **Nutrition and Diet**

Good nutrition is the basic component of health. The terms food and nutrition are sometimes used synonymously, but it is not strictly correct. The term foodstuff is defined as 'anything which can be used as food'.<sup>11</sup> Nutrition on the other hand, signifies a dynamic process in which the food that is consumed, is utilised for nourishing the body.

Malnutrition and undernutrition have complex links with fertility, infection, family size, physical and mental growth, development and immunity mechanism of the body. The basic etiological factors of protein-energy malnutrition are : (1) an inadequate diet, both in quantity and

9. Toha M, and Srivastava A.L. A study in the Politics of literacy Paper Presented in National Seminar Jodhpur, March 7.10.1989.

10. Ray H. Elling The Capitalist world system and international health. International, Journal of health services New York Vol II No1, 1981,

11. Brock J.F., Recent Advances in Human Nutrition, Churchill, London 1961

quality (this is primarily due to poverty and ignorance) and (2) infectious and parasitic disease, notably diarrhoea, respiratory infections, measles and intestinal worms.<sup>12</sup> There are numerous other contributory factors in the web of causation viz. poor environmental conditions, large family size, poor material health, failure of lactation, premature termination of breast feeding and adverse cultural practices relating to child rearing and weaning, such as the use of over diluted cows milks and cooking water from cereals and delayed supplementary feeding.<sup>13</sup>

The emerging nutritional problems are obesity and related health problems, nutritional blindness etc. The average Indian suffers from protein calorie malnutrition, caused by insufficient intake of food and non-availability of protein rich food, particularly growing children, pregnant and lactating mothers etc. Nutritional diseases are as follows. Protein-

energy malnutrition, a vitaminosis, obesity and other hyperalimentation, disease of blood and blood forming organs.

There is no doubt that the 1981 I.C.M.R. diet is relatively less costly, but this may still be beyond the reach of the poor. Narrating the nutritional importance of pulses, Gupta says that pulses are a rich source of protein. It serves as a low cost food to meet the needs of a large section of our people who cannot afford the costly animal proteins.<sup>14</sup> The average Indian diet is not only insufficient in calories, it is also unbalanced in composition. Therefore it is necessary that there should be a national nutritional uplift programme which should emphasize balanced cereal-pulse oriented diet. Efforts should also be made to popularize nutritious low cost, balanced foods based on cereal-pulse green vegetables combinations.

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12. Mayer E.M. Nutrition - Preventive Medicine W.H.O. Geneva.

13. Shah P.M., Early detection and prevention of protein calorie malnutrition, popular Prakashan Bombay 1974

14. Thankamma Jacob, Food adulteration, Macmillan, Delhi 1976

## Food Adulteration

Adulteration of foods consists of a large number of practices—mixing substitution, abstraction, concealing the quality, putting up decomposed foods for sale, misbranding or giving false labels and addition of poisons. For most part, food adulteration has an economic rather than a sanitary significance.<sup>15</sup>

Our knowledge about the current practices of food adulteration is meagre. Some commonly adulterated

foodstuffs in India are as follows.<sup>16</sup> (a) milk (b) ghee (c) cereals (d) flours (e) pulses (f) edible oils (g) tea and coffee (h) honey, the list is endless. The condition is actually a cumulative poisoning and sometimes lapses between the starting of consumption of the contaminated oil and the clinical manifestations.<sup>17</sup>

The Central Committee for Food standards frame rules under the Prevention of Food Adulteration Act 1954. The Agmark and ISI standards gives

Foodstuff	Adulterating	ingredients	Effect
1. Mustard oil	Arziman oil		blindness, heart trouble, tumours and debilitating diseases like beri-beri.
2. Edible oils mustard oil groundnut oil and coconut oil	Machine oil		Liver trouble and the possibility of cancer.
3. Lentils and ( grains arhar & besan).	kesari Dal and		Paralysis lathyrism and leprosy
4. Turmeric	Yellow lead chromate		Blindness, epileptic fits and loss of blood
5. Sweetmeats areated drink and soda water	Unpermitted artificial colouring		Cancer and liver trouble
6. Condiments	Sawdust		Stomach ailments

15. Ibid

16. Published by the Dept of Preventive and Food adultration.

17. Bhat. R., Nutrition, Hyderabad, July 1977; W.H.O./ F.A.O Tech Reports 1955 Sr No 97.

the consumer an assurance of quality in accordance with the standards laid down. The purpose of the PFA act is to protect the health of the consumer and to assure foods of honest nutritive value.

### **Food additives**

Modern science of food technology employs more than 3000 substances, natural, artificial or synthetic known as 'food additives'. Food additives are non-nutritious substances which are added intentionally to food, generally in small quantity, to improve its appearance, flavour, texture or storage properties.<sup>18</sup> This also includes animal feed adjuncts which may result in residues in human food and components of packing materials which may find their way into foods. Uncontrolled or indiscriminate use of food additives may pose health hazards among consumers, but still it prevails even in the most expensive hotels and restaurants because favourite foods attractively served, assist in restoring lost appetite. This food is enjoyed, rightly or wrongly because of the conceived idea that they are

nice ignoring the quality of food provided.<sup>19</sup> In India the Prevention of Food Adulteration Act and the Food Products order govern the rules and regulations of food additives. Any food that contains unpermitted food additives or if the permissible limit exceeds, then the food is considered adulterated. In spite of the acts the adulteration continues unabated and the adulterators mint money and go scot free at the cost of human health and life.

Thus, this nutritional problem is peculiar in having a social crime as the etiological factor. Therefore, the prevention involves law enforcing machinery. Once there is an epidemic, speedy training of source, confiscation of the stores of oil and confirmation of adulteration by chemical tests have to be done in shortest possible time. It would not be out of place to emphasise here that in our experience routine official channels and formalities for proving the adulteration are complicated and time consuming and, therefore not very effective so far as apprehending the culprit is concerned.

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18. Welby. W : Psychology of Food, life and outlook Vol 2 No 8 Aug 1980.

19. Times of India, Sunday review, June 1988.

## **Recent Striking Revelations about Food**

Developing country faces the multifarious problems of health. Here people have the problems of deficiency of vitamins, proteins etc. It is observed that lack of proteins and vitamins effects the behaviour and intellectual performance. The deficient diets have its effects on optimum brain function.<sup>20</sup> In United States a criminologist, Dr. Stephen Schoenthaler has demonstrated that improving the diet of delinquents reduces their anti-social behaviour.

To provide modern packed food for baby has become a fashion. Doctors in Britain have called for baby foods containing high level of aluminium to be banned. It is increasingly suspected of causing Alzheimer's disease, a form of senility-brain damage.<sup>21</sup>

Weaning with artificial milk is unwise. Infant formula food contains plenty of harmful substances, besides the danger of contamination and infection. It is devoid of iron, fills the infant's stomach easily but does not provide enough nutrition. The child virtually starves. It is

wise to insist on home made nutritious semi-solid food.

**Eat fresh :** In our country these days there is a mad rush for processed and canned foods. The government is also giving a lot of incentives to such industries in the name of remunerative prices for the farm produce and job potential. This revolution in processed and canned foods took place in the west some 15 to 20 years back and now they have realised their after effects.

The more processed the food, the greater is the contamination with synthetic chemicals. The containers for packing these have either a metallic coating inside or one of plastic origin in the course of time, some harmful chemicals find their way into the contents, either because of leakage or due to ageing, and ultimately to human body which is already under the attack of external pollution.

Further, during processing a large portion of the fibrous material, necessary for easy bowel movement, is thrown out. Besides strict quality control and shelf line are still a far cry in our country. Considering all this, we should be cautious in our

20. The Times of India- Sunday review Feb 11, 1989.

21. The India Today : April 30 1986.

approach to these let us learn from the western experience there, too, the trend favours eating fresh, as far as possible.

### **Alcoholism and drug addiction**

Science 'health education' is concerned with promoting health as well as behaviour induced disease, it becomes essential to discuss alcoholism and drug addiction while dealing with 'health'.

The picture of health hazards can be seen in the above said area. A tidal wave of alcoholism is engulfing the country. While in the sixties 1 in 300 drinkers were alcoholics, now 1 in 25 drinkers have become addicts. In 1980 the W.H.O. estimated that 3 million or one in 25 - of the 80 million Indians who consume alcohol had become severely addicted.

Earlier the problems was traditionally associated with tribal areas where the people brew their own liquor, then the problem spread to the hilly areas and the north-east, and to industrial townships and the coalfields. Now other areas too have got enshared, hitting people from all walks of life : professionals, businessmen, industrial workers, government servants, armed forces

officers and farmers.

Drinking now extends from bars to road side bhattis the poor man's bars, which have become popular drinking places; they came from all social groups - rickshaw puller, factory workers, professionals and even police constables in civilian dress.

The toll, in fact has already become starkly evident :<sup>22</sup>

1. In major hospitals alcoholics new from 20% to 30% of the patients in the psychiatric wards when five years ago they constituted only 0.2%

2. The 1985 I.C.M.R. study indicated that half the industrial workers surveyed, drink regularly, and companies report that alcoholism has become one of the major causes of absenteeism and falling productivity.

On an average 200 people are killed in the country from liquor poisoning every year. The statistics reveal that 98% of the Patients are predominantly male and usually in the prime of their lives at 25 Years and above. they are the only breadwinners in the family. A recent study of workers at the Madras port trust, conducted by Sankaran S.

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22. Grinder, Robert E: *Adolescence*, John , Wiley & Sons New York 1993.

shows how damaging alcohol can be. of the 162 workers surveyed, more than half of them drank heavily and a third were addicts. Heavy drinkers were absent every sixth working day. As a result, the nondrinkers took home 50% more money than the drinkers, spent 8% more on food, 30% more on clothing, 16% more on health care and a whopping 300% more on children education. Whether it is poverty, malnutrition, marital disharmony or delinquent children, alcohol seems to have been the major cause of all their miseries

**The Drug Alert** - Unlike alcoholism, drug addiction is a more recent and a much more graver issue as it is spreading like wild fire. Its victims are from all age group and all strata of society the poor slum dwellers to the elite, the illiterate to the literate, from minor children to the old. In its initial

stages drug addiction was limited to the rich college going teenagers as they only could afford to pay the exorbitant price of the drugs; lent gradually the net work of the drug-peddlers lured the weaker sections of the society like labourers, rickshaw-pullers and children by providing drugs at cheaper rates. Once hooked, the addict cannot easily keep away from taking drugs and

thus drug peddling became a thriving business.

Getting hooked is easy, a try at drugs just a couple of times is enough the person feels peaceful, relaxed and 'blissful'. After a short while an increase of dosage becomes necessary to retain that 'special feeling'. A stage comes when an addict 'has to take drugs' to remain 'normal' In other words, an addict will be taking drugs to feel 'normal' and to be able to go about for the days work or study. Eventually he will have to buy twice or may be three times more of the amount he first used.

Studies on drug addicts have revealed that most of them are the result of broken homes, strained relationships, depression or at times escapism from the realities of life.

There is nothing 'cool' 'high' or 'blissful' in taking drugs. The only thing the use of drugs creates, more profit, hordes of rupees. Such people have one thing in common, a streak of self destruction. Use of drugs drain one's body mind and pocket. The 'Chase' for drugs leads to commit theft or murder to procure money. Consumption of excess drugs can lead to instant death or contraction of such diseases as viral hepatitis, and most alarming now a - days -

AIDS. If an addict cannot refrain from his habit or "Kick off" hte habit, he will not become a burden for his family only but for society also.

To eradicate this health hazards de-addiction process must be conducted under strict medical supervision the strict enforcement of law

against the drug peddlers is the only cure for this wild spreading disease. If the law does not deal severely with the smuggling of drugs, its chain of distribution and consumption and turn a blind eye towards the drugs peddlers, this business is going to thrive at the cost of people's life.

## विभिन्न सामाजिक सांस्कृतिक द्रुष्यविवरणों में स्वास्थ्य के प्रति बाधाओं का समूह

—ए.एल. श्रीवास्तव

— अनिता नाथ

गत चतुर्थांश शताब्दि में स्वास्थ्य शब्द लेखकों में बहुत लोकप्रिय हुआ है। दुसरे महायुद्ध के दौरान ही से सामाजिक चिकित्सा — विज्ञान संज्ञा का व्यापक रूप से पयोग होने लगा था। मानव तथा समाज की बदलती आवश्यकताओं के प्रति सामाजिक चिकित्सा— विज्ञान के विचार ने चिकित्सा विज्ञान को नया दिशा— निर्देशन दिया है। विश्व की एक बहुत बड़ी जनसंख्या को अभी भी उचित स्वास्थ्य रक्षा प्राप्त नहीं है।