

Tribal Health in India: A Need For a Comprehensive Health Policy

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ABSTRACT

Health is an important determinant of the well-being of any community. Health is considered one of the essential elements of human development and progress. India has the second largest tribal population in the world. Tribal populations are one of the most socio-economically deprived sections. Because of its vulnerability and deprived condition, tribal population faces a lot of problems of varied aspects in which health is one of the significant issues that makes them more vulnerable and deprived. Tribal health is in the state of continuous debate and deliberation over a period of time. Tribal population in the country is one of the most vulnerable and marginalized section and has been in the continuous state of ignorance and negligence. The socioeconomic condition along with poor health and sanitation condition makes it more vulnerable and susceptible to disaster and change. The present paper is an attempt to highlight the various dimensions of the tribal health and health care facilities available in the tribal areas of the country. This paper is also an attempt to discuss the need for comprehensive health policy to meet the health requirement for the indigenous population of the country. It is felt that there should be a comprehensive and national level health policy to mitigate the problems of health among the tribal population. It is need of the hour to have a comprehensive national policy on tribal health to address the issues related to health and its correlates in the country.

Keywords: Tribal Health, Vulnerability, Comprehensive, Health Policy, Well-Being

INTRODUCTION

Health is an important determinant of the well-being of any community. Health is considered one of the essential elements of human development and progress. The health of a person is defined as a state of their physical and psychological well-being. The word health has a different sense and meaning for the individuals and the groups. Health as a word used to denote 'a condition or a state of well being' (Dolfman, 1973). The concept of health was more precisely associated with the mental and moral soundness and well-being rather only concentrating more on the physiological functions of the body of a human being. The earliest and foremost notion of health was a state of disease-free which represents the

traditional medical concept. It was accepted among the physician and medical personnel. Health was defined solely in terms of the lack of diseases, symptoms, signs or problems. This definition of health has emphasized illness rather focusing specifically on individual well-being. Individual well-being should be a central theme around the health and its notions.

The World Health Organization defines the health "a state of complete physical, mental and social well-being and not merely absence of disease and infirmity." i.e. health is not just the nonexistence of disease in the body but also a condition in which an individual is physically fit, mentally sound and socially active. In this connection, well-being is

defined as a state of the harmonious and congenial environment and the relationship of an individual to its of physical, biological and socio-cultural environments. The definition of WHO on health conceptualized and emphasized on more in terms of the presence of physical, mental and social well-being and their interrelationship. Health is a pre-requisite condition for any development and growth of human civilization. It constitutes the well-being of an individual on the account of physical, psychological and social level. Health is also a significant indicator of social development. If health of the nation is well and sound enough then it progress on the right path of development. Therefore, health is a precondition and very significant index of overall-development of the nation.

Dimensions of Tribal Health

India is home to a large number of tribes which represents a varied form of economic backwardness and a state of impoverishment. India is one of the single largest populations of indigenous people in the world (approximately 10.2 crores). There is 8.6 percent of the tribal population in India according to Census 2011 which lives in different geographical terrain and spread over all over the region of the country. There are about 700 tribes (with overlapping categories in some States/UTs) as per notified Schedule under Article 342 of the Constitution of India (Annual Report, Ministry of Tribal Affairs, 2012-13). Most of the tribals live in a hilly or forested area where illiteracy tough, physical environments, malnutrition, inadequate access to potable water, lack of personal hygiene and sanitation make them more vulnerable to diseases and as result of they have worse health indicators than the general population (Saha & Saha, 2018). Tribal health is one of the important and essential components of tribal lives and way of living. Tribal health is considered a very crucial way to understand the living pattern of the indigenous people. Tribal health is in bad shape and conditions in the present world. A host of infectious and

communicable diseases are still widespread among the tribal population. Health condition is furthermore compounded by lack of awareness among the tribal population and inaccessibility to the health care services. Though tribal people represent the heterogeneous groups yet they have one commonality in terms of poor health indicators, a greater burden of morbidity and mortality and very limited or no access to health care services (Report of the expert committee on Tribal Health, Ministry of Health and Family Welfare, n.d.).

Health is a precondition to human development, and it plays a pivotal role in the development and growth of any communities or nations. Socio-political and economic organization among the tribal populations plays a very significant role in shaping the future and present health aspects of the communities and its members. The tribal population has a unique yet different form of socio-political organization which strongly believes in chieftainship. Tribal health has a very different yet comprehensible relationship with nature and its power. They are very much akin and belief to supernatural powers in curing or treating any sort of health-related issues and problems on the one hand, on the other hand, they are a greater degree of inclination towards the forest and nature which has a direct impact upon the health conditions of the masses particularly women population. Women because of their close tie and relationship with the forest, they are the most susceptible to the various health vulnerability and exploitation. Because of the extensive cutting of trees by the vested interest the distances between the villages and the forest areas had increased, forcing the tribal women to walk long distances in search of minor forest produce and firewood (Basu, 2000). This makes their lives more miserable and lots of issues related to health surfaces. Tribal women have to face the serious implications of lopsided development and growth.

It is not a surprising fact that the incidence of health-related issues is found more among the tribal women and children because of their biophysical attributes and the state of vulnerability which further makes them more vulnerable group among the tribal people. The state of malnutrition is also a grey side of the tribal health. Studies show incidences of malnutrition among the tribal population is very high. The malnutrition among the children below 5 years of age is also reported very high. The recently released NFHS-4 report again brought home the widely anticipated truth that, despite improvements, the undernutrition among STs has remained poor, and much higher than that for all groups taken together. As per the report, in India, 44% of tribal children under five years of age are stunted (low height for age), 45% are underweight (low weight for age) and 27% are wasted (low weight for height) (Shrivastava, 2018). Nutritional deficiency leads to diseases like endemic goiter, anemia, pellagra, and beriberi. Problems like in-sanitary food supplies, water contamination, and poor food intake reflect on the health status of tribals (Murthy, 2011).

Health care facilities

There is a consensus that the health condition of tribal people is very abysmal. This state of health is further complicated by their remoteness of the areas and inaccessibility makes it furthermore compounded and complex. Most of the tribes in India live in hilly terrain where health care facilities or system cannot be reached and it automatically becomes impossible for the health care personnel and system to reach there. The health of any communities can be understood by the availability of the health care system and facilities available within the border of their reach. Tribal health care system heavily resides over the magico-religious health care system. It is evident from the many studies that health care system in the tribal areas is largely dependent on the traditional health care system, i.e., magico-religious.

Tribal people have their own system of medicine and health care which is based on their own knowledge of herbs and shrubs and the traditional system like shamans (traditional medicine man) for diagnosing the diseases and treatment if the same. Their knowledge of medicinal plants makes them strong in fighting diseases. There are belief and practices about the health care in the tribal community that makes them real custodian of the medicinal plants. The knowledge of medicinal plants is transferred from one generation to other generation through an oral culture. Their dependency on the herbal treatment is due to unavailability of health care services in the village and nearby areas and their belief and conviction in the herbal treatment for centuries (Negi & Singh, 2018). There are numbers of ethnomedicine studies which reflect the tribal people dependency and relationship with the natural medicinal plants which are used for the treatment of many health ailments starting from cold to malaria also (Prasad & Sinha, 2012; Singh, 2008; Reddy, 2011; Rajpramukh, 2012).

The modern health care system in the tribal areas is in a state of absolute negligence and ignorance. Though Govt. Initiatives of National Rural Health Mission was able to establish the health fracture into the most of the remote areas of tribal population, yet there are very few or no medical personnel is there to look after the people coming for treatment. The shortage of medical staff and personnel put an extra burden on the paramedical staff and the private clinics in the areas resultantly making health infrastructure very poor and negligible. Number of Studies show there is a shortage of staff in the tribal areas in the country. The system of modern medicine has made a stay among the tribal population and it flourishes along with ethnomedicine which is still strong in the tribal universe. Both play relevant roles in their health care and the tribal people are making use of it in its possible ways. (Verma & Shah, 2014). Although in tribal areas the government has provided for the establishment of primary

health centers for every 20,000 population and sub-centers for every 3000 population, health care is not available to the majority of the tribals. There is a number of factors for this ranging from inaccessibility to the health care system to the traditional practices and superstition and beliefs.

Health Care Challenges

There are some health care challenges that can be easily traceable in case of the tribal population at large. Tribal population because of their close link with the environment and nature makes it very complicated to understand. One of the most prevalent diseases among the tribal population is malnutrition. Tribal populations are particularly vulnerable to malnutrition due to their traditional socio-cultural practices and low literacy level (Kapoor & Dhall, 2016). Though deaths due to undernutrition among these children are hardly uncommon, only a few catch the headlines. This situation is a reflection of multiple deprivations that the tribal population has faced over the years. Poverty rates among tribals are high (at 47% in rural areas and 30% in urban areas) and nearly every second tribal family is food-insecure, with low calorie and protein consumption 25% to 53% below the recommended dietary allowance (Arsenault, 2014). Health problems prevalent in tribal areas include endemic infectious diseases like malaria, tuberculosis, and diarrhoeal diseases, apart from malnutrition and anaemia (Swaminathan, 2014).

Another factor for health care challenges is a lack of awareness among the tribal communities. It is almost impossible to deal with the health-related issues and challenges without having knowledge and awareness about the very root cause and etiology of the health problems. Unfortunately tribal communities due to its low literacy they are the more unaware about the health-related issues. In the past, most health awareness campaigns, which need significant investments over long periods of time for noticeable impact, were planned by the medical community instead

of by communications experts (The World Bank, 2012). Lack of health care facilities is another reason for the poor health status of tribes. Tribal by so far has been living in the forest and hilly areas which makes it further compounded for them to access the health care facilities and poor health care infrastructure add more difficulties to them. Since tribes are living into far-flung areas which resultantly affect them the most making transportation more difficult and there is lack of mobile transportation in case of emergency due to which many cases of deaths of the people are recorded. There is also a deep-rooted cultural rift between the tribal population and nontribal health personnel which affect the entire health care system. Tribal people face discriminatory behavior on the account of non-tribal health personnel. Resultantly, tribes remain unattended making life more difficult and ultimately they have to depend on local health care practitioner for the treatment of diseases or on the private health care system which is also less in numbers in these far-flung areas. One of the major issues of the tribal communities in accessing health care is their poor economic conditions. Most of the tribes live below the poverty lines which makes them more vulnerable to the diseases. Low income and financial constraints influence what and how much health care they receive. Resultantly, making them unattended and in a constant state of illness and more deaths are recorded.

Strategies for improvement in tribal health: Policy imperatives

Health care and practices among the tribal populations are in the stage to be imperiled especially the traditional health care system. The traditional and indigenous knowledge which tribes carry with them are also in a state of transition and touch and go. Therefore to mainstream the tribal health and medicine and the practices, sincere efforts should be undertaken. Tribal communities at large are more of a state of shyness to the contact of the modern world. Therefore a vigorous step should be taken to mainstream them with the modern ways of

life. It should be the responsibility of all sectors of society and all stakeholders to promote the well-being and health of the human being. The national tribal health policy should be initiated and implemented on the lines of national health policy. It should trigger towards bringing change in human behavior and lifestyle. The following are the steps to be taken for improvement of tribal health and also for implementation of comprehensive tribal health policy:

- The issues related to social, economic marginalization and deprivation of indigenous knowledge needs to be addressed through appropriate methods of interventions like systematic and scientific evaluation, planned and phased intervention and policy advocacy and also sustainable utilization and mobilization of resources at large level.
- The proper documentation of local and traditional knowledge and practices related to health care need to be done and awareness about the scientific ways of health care has to be ensured.
- The modern health care system particularly primary health centers should be equipped with all modern facilities and the health personnel should be appointed in these areas to the minimum standard of the national health policy and their regular services should be taken.
- The magico-religious ways of health care practices should be on the lines of modern and scientific ways of treatment. Though magico-religious ways of treating the diseases are very common and popular among the tribes. It should not be perished away completely but need a more scientific way to deal with them. We cannot uproot their magico-religious practice. It should be rather protected.
- Since traditional knowledge has its own relevance in the context of health among the tribes. And the modern ways of health care are also more significant in the contemporary world. Therefore, the modern system of health care practices and traditional ways has to integrate and merge into a new system of medicine and health.
- The awareness campaign and programmes should be conducted with the help of community-based organizations (CBOs) and Non-Government Organisations (NGOs) to raise the level of health care awareness and utilization of health care simultaneously.
- Mobile-based outreach programmes should be conducted at a regular interval of at least once a month where there is no health care infrastructure and accessibility of the same is not possible. In these ways, the question of inaccessibility would be solved to the extent.
- Given the areas of inaccessibility and far-flung areas with no or less public transport, the frontier medical personnel i.e. AWWs, ANMs, MPWs etc. should be given at least two-wheeler transport facility so that they can ensure the minimal health coverage.
- Health literacy should be carried out at a massive level. So that the benefits of the same can be percolated to the everyone i.e to children, women, old age population and widows etc. To improve health literacy, a comprehensive plan of strategies should be adopted at the local governance level.
- Since the incidence of communicable and non-communicable diseases are on the rise among the tribal population. Therefore, more mobile health camp should be organized and it should be integrated into the policy level.
- Children are the easiest and one of the trusted stakeholders in the community. Hence, school level health literacy and knowledge generation programmes should be conducted and integrated into the policy level. By inducting programmes with the school children we can be assured about the maximum change in the community.

- Since child nutrition is very high among the tribal population. Therefore, Anganwari Centres should be strengthened to mitigate the problems of child malnutrition. More budgetary allocation to the Anganwadi centers would definitely be able to deal with the child's health issues particularly the problem of malnutrition.
- Special health programmes should be conducted to deal with various problems such as Malaria, Tuberculosis, HIV/AIDS and other health problems.
- More responsive and transparent governance to be promoted at all governance level for tribal health.
- Tribal population finds it very difficult in having accessibility to the health care because of negligence and ill-behavior of the medical staff. Therefore to deal with it more medical staff should be appointed from the tribal community itself. It will bridge the gap between the health care services and tribes itself.

CONCLUSION

It is clear that tribal health is in a state continuum. Efforts are being done by the various govt. and non-government organizations to deal with the issues of tribal health. Hosts of innovations are being applied for the development and making health care available to the most vulnerable population. Govt. is committed to bringing out positive changes. But the health issues and challenges of this population would be in a state of indolence until and unless people from the communities are not involved in the process of health care development. Tribal health care system especially their indigenous knowledge has to be explored and promoted at every level of health operation and execution. It is high time for the government to bring out and implement a comprehensive health policy at the national level to address the issues of health and related phenomenon among the tribes. Tribal medicine and health though in a state of oblivion yet it has potential scope to developing into a more complete

medicine system for future not only in India but worldwide. There is a need for more comprehensive training and development for the restoring and spreading the health culture and ethnomedicine system to the large population among the tribes and suitable convenient methods of research and development on scientific lines to widen the scope of tribal health and medicine. The present paradigm of development needs to be focused more and more on restoring and rejuvenating the medicinal plants which are in abundance in tribal areas. It is only possible when there is a strong policy at the national level to tackle the issues of tribal health and medicine. Therefore a comprehensive tribal health policy at the national level will surely address the issue and challenges of tribes and their health-related practice. Tribe's indigenous knowledge about the medicine (ethnomedicine) needs to be clubbed with the modern scientific ways of medicine system.

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