Beliefs regarding Causes of Diseases and Healers among the Baiga

Jitendra Kumar Premi

Associate Professor, School of Studies in Anthropology,Pt. Ravishankar Shukla University, Raipur,

Chhattisgarh-492010.jitendra_rsu@yahoo.co.in

Abstract

Various conceptions and misconceptions prevail in human society about causes of diseases. In different human societies in different human cultures, opinions and criteria regarding causes of diseases vary. Such opinions and criteria become perceptions in that particular society. The universe of our sample is 400 married Baiga males belonging to age 18-49 years were selected through multistage random sampling. Structured interview schedule and non-participant observation were used for collection and cross validation of data. most of the respondents (i.e. 75.8%) believed that sorcery of the witchcraft is the main cause of illness followed by 58.5 %, 58.2 %, 46 % respondents simultaneously accepted that acts of devils, evil eye, evil touch and evil mouth and good goddess were responsible for spread of diseases among them. On the light of above findings more or less all respondents believe that supernatural beings are the main factors for causing diseases, apart from that they think some natural factors also play vital role. It was found that in the choice of their healer whom they appealed as 'Baiga', two prime reasons that worked- they had profound faith in him, and secondly, he was readily available.

Keywords: Belief. Causes. Disease. Healers.

The Baiga

Introduction

Numerous conceptions and misconceptions prevail in human society about causes of diseases. In different human societies in different human cultures, opinions and criteria regarding causes of diseases vary. Such opinions and criteria become perceptions in that particular society. Jaiswal and Premi (2014) stated, it is quite difficult to define the concept about health and disease of any culture because these are commonly known as relative terms. The notions and concerns regarding health and disease vary from culture to culture; it could be possible that any physical, mental and social conditions which are called healthy state in our culture may be considered unhealthy by some other ones. It is very difficult to be familiar with the notions and attitude of the semiliterate or illiterate and indigenous society.

Tribal concept of health, disease, treatment, life and death is different in different culture and tribal societies follow traditionally laid down customs and every member of the society is expected to conform to it" (Premi et al., 2010). Chaudhuri (2004) has stated that every culture has its own beliefs and practices concerning diseases.

According to Parsons (1972) health is a state of optimum capacity of an individual for the effective performance of the roles and tasks for which he has been socialized. Before asking a group of people to assume new health habits, it is

wise to ascertain the existing habits, how these habits are linked to one another, what functions they perform, and what they mean to those who practice them (Paul, 1955).

Certain people are choosy -very selective in their healers- their medico men. In their exclusive preference for their physicians, there are certain important factors that play a decisive role in their choice. Such factors, behind them are specific experiential reasons. They definitely have had to feeling of being benefitted in the pasting the matters of treatment, easy availability, the affable nature, affordable-not exorbitant or expensive and above all, implicit trust in the curing method.

Objectives of the study

1. To explore notions about causes of diseases among the Baiga males of Chhattisgarh.
2. To find out myths regarding perfect healer among the Baiga males of Chhattisgarh.
3. To examine the causal factors concerning notions and approaches about causes of diseases and perfect healer among the Baiga males of Chhattisgarh.

Methodology

The universe of our sample is 400 married Baiga males belonging to age 18-49 years were selected through multistage random sampling. These 400 Baiga males i.e. 235 males from Bodala and 165 males from Pandariya development blocks of Kabirdham district of Chhattisgarh, India were randomly selected as the respondents in the manner of stratification by age, education, occupation etc. Structured interview schedule and non-participant observation were used for collection and cross validation of data. Prospective respondents were informed about the purpose and nature of the study. The results were analyzed using the 16.0 SPSS package. Multinomial logistic regression analysis was used to understand linkages between variables and to predict the responses of the Baiga males' vis-à-vis causes of diseases and causes of dominion of the healers.

Results and Discussions

Perception regarding causes of diseases

It was attempted to investigate the causes of diseases. Table no. 01 revealed that most of the respondents (i.e. 75.8%) believed that sorcery of the witchcraft is the main cause of illness followed by 58.5 %, 58.2 %, 46 % respondents simultaneously accepted that acts of devils, evil eye, evil touch and evil mouth and good goddess were responsible for spread of diseases among them. While 12 % responded that the diseases are the results of our misfortune or bad luck. Although 38.8 % and 34.5 % respondents believed that illness or diseases occur due to the supernatural forces but are caused due to natural causes like –cold , hot, lack of nutrient etc and our irregular meal respectively.

Table No.01: Perception regarding causes of diseases

Perception of causes	No. of respondents	Percent n=400
Natural causes (factors)	155	38.8
God and Goddess	184	46.0
Witchcraft	303	75.8
Devils	234	58.5
Evil eye, touch and mouth	233	58.2
Misfortune	48	12.0
Irregular meal	138	34.5

Dominant (preferred) healers among the Baiga

Attempts were made, how the Baiga were drawn to particular healers and underwent their and their inmates' treatment. As regard table no. 02 reveals that little bit half of (i.e. 47.5%) respondents believed that "*Baiga*" or "*Vaidya*" is their perfect healer, secondly just more than one third (i.e. 25.2%) respondents told government doctor is the best for curing their diseases followed by 6.5 %, 4.6 %, 9 % and 7 % respondents said that street doctor, private doctor, compounder of government hospital and nurses of government hospitals are their best healer respectively. On the basis of the date collected, the conclusive finding was, the"*Baiga*" went for healing to their traditional doctors, whom they named as "*Baiga*". They found this process safe and secure than any other processes.

Table No.02: Dominant (Perfect) healer among the respondents

Dominant healers	No. of respondents	Percent n=400
"*Baiga*" /"*Vaidya*"	190	47.5
Street Doctor	26	6.5
Private Doctor	19	4.8
Compounder	36	9.0
Nurses	28	7.0
Govt. Doctor	101	25.2
Total	400	100.0

Causes of dominion of the healers

Giving, special preference to a particular healer, taking up remedial treatment from him- falling into such a convention- behind such habitual practice, certain rationale work. It was found that in the choice of their healer whom they appealed as '*Baiga*', two prime reasons that worked- they had profound faith in him, and secondly, he was readily available. Easy availability meant a big

thing. In emergency- in the dire state of critical condition, immediate medical attention is the first priority. It is better to be attended promptly than die in waiting. As *'Baiga'* is a healer of their, own community and liver in closer vicinity and a member of the same fraternity, it was prudent to consult him and avail easily accessible remedy.

Table No. 03: Causes of dominion of the healers among the respondents

Causes of dominion	No. of respondents	Percent n=400
Easily available	109	27.2
More conversant	51	12.8
More favorable	100	25.0
More trustworthy	128	32.0
Don't know	12	3.0
Total	400	100.0

Then the second and the main reason is the Baiga men's faith in their healer. Such faith is an extension -a ramification of the faith in the deities of their tribe. For the faith in the deities is the core of tribal culture as deities are regarded as the main cause of all diseases the cause of witchcraft and sorcery, held as divine dispensation . Because of such inalienable relation- bonding between the healer and the gods and goddesses, only the traditional healer could take up the work of healing. He is the trustee of the faith and the custodian of culture for the tribal people (Table no.03).

Dominant or preferred healers among the Baiga and their associated factors from multinomial logistic regression analysis

For the purpose of causing their various physical ailments, how the Baiga males give preference to indigenous healers and witch doctors - 'what factors insidiously or openly influence their, such predilections, the present analysis was undertaken to ascertain such purpose. The answers obtained from them showing their liking (for *'Baiga'* or *'Vaidyas'*, indigenous apothecaries, street doctors, private quacks, compounders of the government hospitals, government hospital nurses, and government hospital doctors) - on such criterion, their economic status, family types, occupation types, educational status, age and age at marriage, residential pattern and the area or development block, where the respondents resided - all the phenomena was examined. The table no.04 shows the findings, which show, on their choice of healers, their occupation, educational status, age and age at marriage and the residential pattern, development block as the locale - hold a puissant influence. The findings thus obtained for result private doctors regarded as best healers, relative to *'Baiga'* or *'Vaidyas'* were the best healers according to the Baiga men is found to be negatively affected by predictors agricultural occupation, illiteracy of the Baiga women (respondents' wives and less than 36 years age of the respondents with associated values of β =1.574, -1.601 and -1.194 at 99%, 95% and 95% level of confidence each respectively. Apart from that this result is also positively influenced by predictors avanculocal type of respondents' residence and belongingness of the respondents in Bodala development block with

International Journal of Research
Available at https://edupediapublications.org/journals

e-ISSN: 2348-6848
p-ISSN: 2348-795X
Volume 04 Issue14
November 2017

Table No. 04: Dominant or preferred healers among the Baiga and their associated factors from multinomial logistic regression analysis

Independent variables	Street Doctor			Private Doctor			Compounder			Nurses			Govt .Doctor		
	β	df	Sig.	β	df	Sig.	β	df	Sig.	β	df	Sig.	β	df	Sig.
Development blocks Bodala	.589	1	2.561	1.285*	1	.027	.139	1	.692	.751	1	.059	2.352	1	.095
Pandria	0[b]	0	.	0[b]	0	.	0[b]	0	.	0[b]	0	.	0[b]	0	.
Economic status <20,000.00 rupees	1.030	1	.177	.515	1	.498	-.297	1	.500	-.095	1	.853	-.443	1	.138
>20,000.00 rupees	0[b]	0	.	0[b]	0	.	0[b]	0	.	0[b]	0	.	0[b]	0	.
Type of family Extended family	-15.951	1	.999	-15.999	1	.	-15.844	1	.998	-16.149	1	.999	-16.177	1	.997
Joint family	-1.130	1	.288	-.943	1	.397	.398	1	.483	-.291	1	.714	-.272	1	.537
Nuclear family	0[b]	0	.	0[b]	0	.	0[b]	0	.	0[b]	0	.	0[b]	0	.
Occupation of the Respondents Laborer	.141	1	.886	-.832	1	.351	-1.491	1	.182	-1.324	1	.243	-.146	1	.775
Agriculture	.285	1	.665	-1.574**	1	.007	-.605	1	.186	-.669	1	.181	-.596	1	.068
Govt. service	-14.710	1	.997	.174	1	.903	-.579	1	.644	-16.110	1	.996	-1.878	1	.114
Agriculture Laborer	0[b]	0	.	0[b]	0	.	0[b]	0	.	0[b]	0	.	0[b]	0	.
Educational status of the respondents Illiterate	-.093	1	.849	.370	1	.562	.317	1	.486	.160	1	.749	-.672*	1	.014
Literate	0[b]	0	.	0[b]	0	.	0[b]	0	.	0[b]	0	.	0[b]	0	.
Educational status of respondents' wives Illiterate	-.526	1	.535	-1.601*	1	.033	-.163	1	.819	.479	1	.661	-.071	1	.884
Literate	0[b]	0	.	0[b]	0	.	0[b]	0	.	0[b]	0	.	0[b]	0	.
Age at marriage for male <18 year	.281	1	.513	-.067	1	.904	-1.266**	1	.008	-.961*	1	.050	-.533	1	.052
≥18 years	0[b]	0	.	0[b]	0	.	0[b]	0	.	0[b]	0	.	0[b]	0	.
Respondents' age group < 36 years	-.447	1	.315	-1.194*	1	.031	-.429	1	.290	-.660	1	.126	-.318	1	.257
≥ 36 years	0[b]	0	.	0[b]	0	.	0[b]	0	.	0[b]	0	.	0[b]	0	.

The reference category is: *'Baiga'/ 'Vaidya'*. b. This parameter is set to zero because it is redundant.

associated values of β = 3.159 and 1.285 at 99% and 95% confidence level, respectively. What are learnt from the conclusion is, those Baiga males who are engaged in agriculture, their wives are illiterate, and those who are below 36 years in age, they do not depend much on private doctors for medical treatment. Instead, they rely mainly on *'Baiga'* or *'Vaidyas'* - the indigenous healers. Diametrically opposite of this is, those who reside in avanculocal residential pattern and in Bodala development block, and they opt for private doctors. This is followed by for result compounders (Male multipurpose health workers) were the best healers relative to *"Baiga or Vaidyas"* is found to be negatively affected by less than 18 years age at marriage of the Baiga males at 99% confidence level and this result is also positively affected by belongingness of the Baiga males in Bodala development block at 95% level of confidence. What can be gathered from this reading is, those Baiga whose marriages take place below 18 years they do not prefer for treatment compounders of government hospitals in comparison to *"Baiga or Vaidyas"*, whereas the respondents of Bodala development block opine it's just opposite.

Another finding from this analysis leads to, for result nurses of the government hospitals were the best healers relative to *'Baiga or Vaidya'* is found to be negatively influenced by predictor less than 18 years marriage age of the respondents with β= -.961 at 95% confidence level and this result is also positively affected by predictors avanculocal residence pattern and belongingness of Bodala development block, respectively, with β= 2.396 and 1.516 respectively

at 95% and 99% confidence level, respectively. The conclusion deduced is - those Baiga whose marriage is held below 18 years, they do not show much preference for nurses, as compared to *'Baiga'* or *'Vaidya'*. On the contrary, those Baiga males who adopt avanculocal residential

pattern and reside in Bodala development block, show their preference just the other way round Besides, according to another finding, for result doctors of the government hospitals were regarded as the best healers relative to *'Baiga'* or *'Vaidya'*, is found to be negatively influenced by illiteracy of the Baiga males with β = -.672 at 95% level of confidence. The result is also positively affected by patrilocal residential pattern of the Baiga male with β = .517 at 95% level of confidence.

Conclusion

On the light of above findings more or less all respondents believe that supernatural beings are the main factors for causing diseases, apart from that they think some natural factors also play vital role. The illiterate Baiga men, compared to *'Baiga'* and *'Vaidya'*, prefer less the government doctors from the government hospitals. This is because due to their ignorance they are unable to know that in the medical system such doctors with a bare minimum eligibility degree of M.B.B.S. are qualified and recognized practitioners and health specialists. Just opposite to such ignoramus condition, those respondents who reside under patrilocal typed residential pattern, they prefer doctors from government hospitals as healer, to indigenous *'Baiga'* or *'Vaidya'*. Its prime reason is, the elders and senior relatives are readily available with their maturity and experience and expert guidance and the government doctors are considered safer zone of treatment and the residents are benefitted by the direction and proper line of action

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