



# AN ANTHROPOLOGICAL STUDY ON HEALTH CARE SEEKING BEHAVIOR OF THE PEOPLE IN RURAL AREA OF NORTH KARNATAKA

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**Abstract:** The level of education and income of the people play a crucial role towards health care seeking behavior in rural area of north Karnataka. The different socio-economic equations are present and these are affecting on individual's health care seeking behavior and the socio-economic, political processes are the complexities which influence planning and implementation on health. All these factors are analyzed critically in order to understand health care seeking behavior system in the rural setting of north Karnataka. Further there is presence of multiplicity in the health system 'medical pluralism'. There is presence of indigenous system along with biomedical system and therefore to understand the health care seeking behavior, one has to also focus on beliefs and practices of indigenous medical system of the rural people. Hence the present study has been trying to focus on health care seeking behavior of the people in the rural area of north Karnataka.

**Index Terms** - Health care; beliefs; indigenous practices; health seeking behavior

## INTRODUCTION

It is difficult to classify diseases on the basis of a single influencing factor or causative factor because the causes of diseases are at times associated with more than one influencing factor. Further, the same disease may be caused to do one causative factor at one time and another cause at another. For example, vomiting may be due to evil-eye or it may also be due to indigestion (ajeerna) at another time. That means supernatural causes as well as environmental factors can both result in a single disease.

Similarly, tuberculosis and paralysis are believed to be due to sins committed in the previous life of a person but people also say that, these problems are also due to consuming of tobacco products and alcohol. Sins committed in the previous life come into picture when a person has no bad habits yet he suffers from TB or paralysis. Thus people of *Mallapur* try to diagnose illness based on causation theory they hold, and depending on this causation theory the course of treatment is decided upon. In all contemporary societies, a wide variety of health-care options exist. This is referred to as the medical pluralism by medical anthropologists.

## STUDY AREA AND PEOPLE

The present study is based on an ethnographic field-work conducted in *Mallapur* village of Athani taluk in Belgaum district, Karnataka during the year 2005. *Mallapur* lies in the plains (*bayalu simi*) of Karnataka. The village is connected with some of the big towns and cities like Athani in Karnataka and Miraj in Maharashtra. *Mallapur* is a multi-caste village. There are three religious groups such as Hindu, Jain and Muslim are residing. The total numbers of households are 684, out of which 611 households Hindus are, 35 belong to Jain and the remaining 38 households belongs to the Muslims. Within the total 684 number households, the hamlet had about 3568 population.

## OBJECTIVES

- To know the health seeking behavior of the villager
- To know the role of education and socio-economic status of the people regarding health seeking behavior

## METHODOLOGY

The data presented in this study is based on intensive and first-hand field work carried out in the village of *Mallapur* from November 2005 to June 2006.

### The Methods that Were Used To Collect Data Were

Census schedule, Interviews, Structured as well as unstructured, Observation: participant-observation, non- participant-observation, group discussions, case studies, discussions with key informants were also employed.

## HEALTH CARE SEEKING BEHAVIOR

Contemporary medical anthropologists use the concept to focus attention on people as active, rational decision makers who select from a range of alternative behaviors depending on their knowledge, resources, experiences, network interactions and other sources (Hardon 1995). Treatment seeking behavior of people of *Mallapur* includes indigenous, and allopathic/ biomedical system of medicine. The indigenous system includes natural as well as supernatural healing.

Allopathic treatment is provided by both public health-care sector as well as private doctors. Those practicing homeopathy and ayurveda system also provide allopathic medicines in the village. Public health-care system as a provider figures at different levels in the treatment seeking of the people. It depends on their diagnosis of the disease and the need of the hour and affordability and also level of education. People seek the public health-care as soon as one is found to be ill in certain instances and in certain instances at a later step. This becomes clear as one understands the treatment seeking behavior pattern for different diseases. Even though home remedies are taken as the immediate step depending on the situation decisions are taken as to whether other kind of treatment is required or not.

### There are two types of treatment seeking behavior pattern found among people:

- 1 Simple path to restoring health and
2. Complex path to restoring health

**Simple path to restoring health:** In case of simple path to health seeking behavior, people begin with treatment in one system of medicine and they find relief and the path ends there or in case if there is no relief, they shift to another system of medicine. This path can be represented in a straight line, because there is shifting from one treatment to another. Generally there are no confusions regarding the causation of these illnesses in case of simple path. Whereas, in **complex path to health seeking behavior**, people begin treatment simultaneously from more than one system of medicine and try all possible ways and means of restoring health. The path may be crisscrossing and or even be going in parallel lines. Complex path of health seeking behavior indicates that the illness is severe and also indicates that there could be lack of certainty with regard to causation.

Simple path to health seeking behavior is generally in case of cough (kemmu) and cold (negadi) or fever (uri) or mouth ulcers (bayee novu) for example. In these cases, people are certain of what has caused the disease and by doing what the condition will be cured. Most often, the path to cure begins with home-remedies/indigenous medicine and ends there itself in case of minor illnesses. In case the condition is severe the person may directly seek treatment from modern medicine and get cured. Therefore there is only one step (involved) towards seeking cure. For instance, when a person is suffering from mouth ulcers, he associates it with increase in heat. He therefore consumes poppy seeds (kasakasi) and cardamom (yalakki) soaked overnight either in curds (masaru) or milk (halu). This is believed to reduce heat in the body because, poppy seeds, cardamom, curds and milk are all considered to be cold producing in nature. For two days, he follows this regimen and is cured and the path ends there. In case he does not find relief, he goes to allopathic doctor and seeks treatment and finds relief. Thus the path moves in a single direction and there can be shifts from one system to another depending on the success of the treatment.

The people of *Mallapur* start treatment for any ailment with indigenous system of medicine particularly in the form of home-remedies (traditional and modern). If there is no relief, depending on the perceived nature of illness cure is sought from other system of medicine. If the illness is very severe, they directly seek treatment from modern medicine. This can be seen with an example. If a person is suffering from stomachache (hottinovu), he takes a concoction called *kaade* and then takes rest. If he is not cured in a day or two, he goes to the doctor for treatment. In case, for instance, there is high temperature and the person is suffering from high fever (uri), he directly goes to the doctor and takes treatment. The path taken to restore health is therefore straight forward with just one or two stops depending on the severity of the illness.

**Complex path to restoring health:** Here in order to restore health, all possible steps are taken and sometimes they are taken simultaneously, even though the remedies are from different medical systems.

The pattern of treatment seeking behavior to cure ailments like paralysis is an illustration for such a pattern. In case of paralysis, people start treatment simultaneously from indigenous, and then seek allopathic treatment. If there is no visible difference, they also simultaneously take ayurvedic or homeopathic treatment. According to people, paralysis is a serious ailment. The complex pattern reveals that for serious ailments, more than one system is required for cure. As people say, it is not possible to cure serious diseases using single system of medicine. Hence people use multiple systems of medicine. In case any one of these systems is found to be effective then again the simple path of restoring health comes into picture.

There is some variation in treatment seeking behavior among people depending on their level of education, economic status, and knowledge about modern health care services. People who have education up to high school or junior college level manifest awareness about modern health care services and they give preference for modern health care services. People who are not educated have less awareness about modern health care services and they give preference for indigenous treatment.

The people who are not educated begin their treatment with indigenous home-remedies and warding-off of evil-eye for all health problems. If they do not get relief from this, they go to doctors. People who are educated start treatment with modern home-remedies and if not cured, they go to hospital for treatment. They consult priest to know whether the problem is due to supernatural causes. As one of the educated informants says, people take modern as well as supernatural treatments simultaneously because there is no harm, if both the treatments are taken together.

The pattern of treatment-seeking behavior becomes more meaningful when the people's notions of severity of ailments are understood. People categorize diseases (roga or byani or jaddu) as minor (sanna) and major (dodda). According to them, those ailments which are cured by indigenous home-remedies (traditional and modern) are considered to be minor ailments (sanna jaddu). Whereas, ailments which are not cured by indigenous home-remedies and they find a need to go to hospital are considered to be major ailments (roga or byani or jaddu).

According to the people, there is no particular fixed duration for the major ailments to get cured. Time taken for the disease to get cured depends on the basis of severity of the ailments. Whereas, minor ailments remain for a shorter duration of time like, approximately for one or two days to about a week. The ailments, which exist for a longer duration and are severe in nature are considered major ailments. People say that, at times it is not possible to draw a definite line between minor and major ailments, because sometimes minor ailments may become major diseases.

A person suffering with running temperature (mai bisi aged), the person takes rest and applies cold swab on his forehead and in case if the whole body is burning (mai uriyuvadu), then, the entire body is rubbed with wet cloth (hasi arabi) to reduce body temperature. If fever continues, medicine is taken. In case there is no medication at home, people buy from the druggist by explaining the symptoms. The person is given medicines for a day or two. If fever is cured within a week, it is considered to be a minor fever (mai bisi aged). If fever continues with high temperature, people go to hospital for treatment and this condition is called "balla uri bandavu". And in case if the fever turns out to be typhoid, then it is said to be one of the major diseases. It not only requires expert treatment but also requires longer duration for cure. In order to cure the condition, therefore options are available for people. They choose the option which they see as best suited for the present condition depending on a number of factors like, severity, availability of treatment, ability to spend, past experiences, advice of the social network. The primary goal of any medical system is to organize the health services so as to optimally utilize the available resource, knowledge to cure the sufferings of the people.

Home-remedy in the form of indigenous medicines is often the first-step taken by the people. People say these medications can be effective, and do not cost much and are also effective because they do not cause any side-effects as modern medicine do. Therefore indigenous medicines play a significant role, an effort has been made to understand the medicines used along with different sorts of health resorts. The symptoms guide the treatment seeking behavior.

Home-remedies also include modern allopathic medicines along with the indigenous remedies. They may include a range of remedies viz, pain killers, basic paracetamol tablets, various balms and ointments and also medicines stored from previous visits to the doctor for particular problems. Home-remedies have been discussed in detail here because the first resort is the home-remedy. People use various indigenous medicines and often these are the basic things found in any kitchen. They say these things are easily available in any house and experience shows that they are effective in curing different conditions. Further, the next steps in the treatment seeking depend on the people's understanding of the causation as discussed in the pathway to health restoration.

For all the diseases that are discussed here treatment from PHC is taken or the private doctor is sought at some point or the other. Because sometimes the illness may be cured by home-remedy alone and at another time it may require further treatment. Therefore, both public and private sectors figure in the treatment seeking picture. Depending on the perceived severity, ability to afford treatment, availability of the doctor, previous experiences, and suggestions from the social network decisions about who should be sought is made.

## FINDINGS

Irrespective of socio-economic background of the people in rural area of north Karnataka, has given more priority for home remedies rather than the other treatment for example in the case of simple path and in case of complex path they go for multiple systems of medicine.

## CONCLUSION

People of *Mallapur* village are following both simple and complex path of treatment seeking behavior. Because of poor economic condition majority of the people are not able to go for modern treatment. Hence there is necessary to create public awareness among people particularly to take treatment in the stage of beginning. People are not completely aware of the health programmes and are not utilizing these health services even though those services are completely free of cost by Government. Hence there is necessary to create public awareness among people particularly about using of treatment from government hospital in rural area of north Karnataka.

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