SELECTED ESSAYS ON PERSPECTIVES OF MAN AND ENVIRONMENT

A harmonious co-existence



Edited by

Dr. Abhijit Ghosal, Dr. Kathakali Bandopadhyay, Palash Mondal, Dr. Ratan Kumar Samanta, Dr. Sonali Mukherjee

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ISBN 13:978-93-90976-02-7 ISBN 10:93-90976-02-2

Printed in India and published by BUUKS.

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Dr. Abhijit Ghosal, Dr. Kathakali Bandopadhyay, Palash Mondal, Dr. Ratan Kumar Samanta, Dr. Sonali Mukherjee. In collaboration with Subarnarekha Mahavidyalaya, Jhargram.

IMPACT OF NATURAL ENVIRONMENT ON MATERNAL AND CHILD HEALTH CARE AMONG THE KHERIAS RESIDING AT DAICHAKURIA VILLAGE OF JHARGRAM DISTRICT

Nabendu Bera

Govt. approved Part-Time Lecturer, Dept.of Anthropology, Seva Bharati Magavidyalaya, Kapgari, Jhargram Email: nabendubera@hotmail.com

Abstract:

Environment is the prime concern of human life today. It has great impact on human health. Environment includes all living and non-living components on which human beings are directly or indirectly dependent for their survival whereas health is "a state of complete physical, mental and social well-being of human beings". All human communities are dependent on the natural environment for their food, nutrition, respiratory system, etc. Tribal people particularly the primitive tribal communities like the Kherias are completely dependent on their natural environment for their socio-economic and health care system. This paper attempts to assess the impact of natural environment on maternal and child health care of Kheria's residing at Daichakuria, a remote village surrounded by forest. Keeping in mind that children are the future leader of our nation, the topic, Maternal and child health care of Kherias is selected for this study. Safe child birth, proper maternal and child health care help to increase the number of members of endangered Kheria community.

Keywords: Environment, Maternal and Child Health Care, Kheria, Daichakuria, Jhargram,

Introduction

The word "Environment" has been derived from the French word "Environ" which is synonymous to "Around" or "To Surround" in English.

According to environmental scientists "Environment includes all those things on which we are directly adjrectly dependent for our survival, whether it is living component like animals, plants or non-living apparent like soil, air, water.

The social and economic life and culture, food, health and disease, technology and mental state of human beings get importance in environmental studies these days. Because humans are the only living who can control and change their surrounding environment. The type of change and its extent appeal on human culture and socio-economic environment. As an example, we can consider the direct appeal on between poverty with population explosion and pollution of environment.

This paper attempts to understand the relationship between environment and maternal and child

Bealth is defined by World Health Organisation (WHO) as "a state of complete physical, mental and soil well-being and not merely the absence of disease or infirmity"

According to environmental scientists, absence of physical, mental and environmental comfort makes beings sick. Human beings collect food for nutrition and oxygen for respiratory system from environment for their living. Hence, health depends on socio-economic as well as environmental condition of buman beings. If there is any change or pollution in the natural elements of environment, it badly affects the human health.

Public health is treated as one of the main indicators of development in today's world. It is also a prime more of economics, social sciences, medical sciences and environmental studies. Public health or more perifically Women and Child Healthcare has gained most importance in all the countries because children are the future citizen and human resource of any nation. In order to secure the future of a nation to important to keep the children healthy. Women carry their child in their womb for nine months and the also perform their family duties. So, their well-being secures the future of their family and children. The present field based study collects data about an endangered and environment dependent tribal population in their natural surroundings in regard to maternal and child healthcare and its relationship with twironment. The government has declared the Kheria tribal population as endangered because of their femasingly low population. Besides Socio-economic development it is also important to develop material and child healthcare system for this tribal community from being annihilated.

Kheria community depends on forest resources for their livelihood. Their lifestyle, food habit, nutritum and health, treatment of diseases, etc have direct relationship with their natural environment.

Materials and Methods

There are two different ways to collect field data in social sciences. These are:

- Lollecting data from books, reports and other records
 In this method I have collected some information on matter of study, aims and objectives of Environmental studies, relationship between human being and natural environment, preliminary ideas about maternal and child healthcare and its relation with the environment.
- Subject specific data collection, analysis and presentation through field survey
 in this method we collect subject specific data on a place or community. In order to collect data
 for this paper I have taken help from subjects like anthropology, demography, sociology, botany,

 Brography and medical science, etc.

i. Observation Method

For non laboratory based data collection, observation method is the primary or main method
in scientific field surveys.

a. Participant Observation: It actually indicates the intimate participation and observation of target community.

- b. Non participant Observation: It is based on collection of data through interview and hear, say evidences.
- ii. Interview method: In this method members of target community are interviewed in a systematic way.
 - a. Panel Interview Method: Here a group of members from target community are interviewed panelwise.
 - b. Individual Interview Method: It includes the interview of a particular member.
 - Questionnaire Method: It is based on topicwise questions the answers of which are collected from the members of target community.
 - d. Case Study Method: It is applied to collect cases based on informant's own experience.
 - e. Census Survey: It is conducted to study the demographic aspects like population size and composition, marital status, economic activities, etc of the target community.

Discussion

a. About the target community: The Kherias are also known as Sabor and according to 2001 Census they constitute only 1% of the total ST population of the State. In Jhargram district, the Kherias generally residing near forest areas. The Kherias of Daichakuria village speak in local regional Bengali.

The Daichakuria villge is situated under gram panchayat – Lalbandh, Block – Jamboni, PS-Jamboni, Sub Post Office – Daichakuria, Dist – Jhargram.

The village is surrounded by paddy fields, Palpala canal and Kadmashol forest. It also has a natural source of water known as Keya Jharna.

It is a multiethnic village consisting of Mahata, Bagal, Santal and Kheria tribe. The 41 Kheria households having 164 members of this village are selected for the present study. This village has a primary school and an Anganwadi centre. For the treatment of the villagers there is a one bedded sub-health centre. There is no market in the village. The nearest railway station is Kanimouli which is 5 kms away from the village. But to travel by Bus or Trekker, villagers need to go to Chilkigath Barunshol, 2 kms away from the village. Secondary and Higher Secondary students go to a school in

Electric connection is there in the village but not sufficient light on the roads. There is no drainage system in the village. The source of drinking water is four wells and three govt tubewell. There are four ponds in the village which villagers use for their bathing, washing clothes and bathing their cattle. The village has no sanitation system, so the villagers use the pond side, forest and the canal side for this purpose. Some women use the govt tubewells for bathing and washing clothes these days.

Kheria families reside in mud built houses covered with asbestos or straw. These one roomed houses are surrounded by a varanda which is used for cooking and keeping cattles. No house has any arrangement for bathing and sanitation.

They were totally dependent economically on forest resources in the past. Kheria women and men work as daily agricultural labourer these days for their livelihood. Only two families have agricultural land. When there is no agricultural work, the Kheria men work as daily labourer in lect wood, food, Kendu leaves, Shal leaves, etc from the forest. Kheria men depend on fishing and work very hard for their livelihood but still poverty exists. One Kheria girl from this village has appeared for Higher Secondary exam in 2017.

Their literacy rate is very low. 60% of the total population is illiterate. Compared to men the literacy rate is very low among women. One male student has completed graduation from this village.

They have got electric connection free of cost because of their BPL status. But they are deprived from 100 days work, senior citizen pension, widow pension and other govt provided facilities for BPL. Due to their low literacy rate they are unaware of the facilities provided by the govt for them. Some Demographic Information and its relation with the present study:

The Age and Sex Composition - Total population of the Kheria community of this village is 164. Out of 164, 47.57%, i.e., 78 are women and 53.37%, i.e., 86 are men.

To find out the women and children population from total population, the age groups of 0-4, 5-9 and 10-14 are defined as children. Because according to UNO and Govt, of India, children below 14 years should not be involved in any kind of income generating work. In Daichakuria village the total number of children is 54 which is 32.93% of total Kheria population. Total number of women aged 15 years and more is 54 which is exactly equals to total number of children and 32.93% of total Kheria population. The majority of the Kheria population are women and children (108), i.e., 65.15% of the total Kheria population. As number of children constitute 32.93% of total population and the number of male children is more (30) in this village the possibility of population increase is very high.

It is clear from the census data of Daichakuria village that this endangered community's possibility of population increase is very high as the number of children is more and through marital relationship the number of Kheria population will be increased. So, it is important to take care of the health of the Kheria children of this village. As 65.85% of the total population is women and children it is extremely essential to be concerned about their health. Otherwise, the family and economic life of the total community will be disturbed and population will be decreased.

Marital Status and Age at Marriage - Out of total population 84 people (51.22%) are married. The average age of marriage for men is 25-29 but for women it is 15-19 years and women aged between 24-29 are all married. There is evidence of women getting married at the age of 14 also. Marriage at a tender age has increased the reproductive age of women and the number of child birth also increases but as they conceive at a tender age there is possibility of risk at the time of delivery and increasing health problems. Due to poverty, mother and child do not get sufficient mutrition, child does not get sufficient breast milk and poverty is also a constraint for treatment

during illness. So, it is important to take proper maternal and child healthcare in order to save them. during illness. So, it is important to take proper use of surrounding environment can save them for community from being annihilated. Proper use of surrounding environment can save them for community from being annihilated. the diseases caused by malnutrition, water pollution, etc. Preliminary Ideas about maternal and child healthcare

- The main indicators provided by UNO for maternal and child healthcare are:
 - e main indicators provided by Cree in and the fetus, vaccination to protect from disease, de Proper nutrition for pregnant women and the fetus, vaccination to protect from disease, de surrounding environment, diagnosis of the diseases and proper treatment
 - surrounding environment, day Proper treatment facility to the sure sufficient breast feeding to the child, vaccination to proper for mother and child, to make sure sufficient breast feeding to the child, vaccination to proper for mother and child, to make sure sufficient breast feeding to the child, vaccination to proper for mother and child, to make sure sufficient breast feeding to the child, vaccination to proper feeding to the child. from diseases, proper diagnosis of the disease in case of illness and arrangement for treatment of the disease in case of illness and arrangement for treatment for the format for the f
 - iii. To protect women and children from HIV/AIDS
 - iv. To ensure sufficient nutrition for children aged between 5 and 14. Proper immune system from the surrounding environment, treatment for illness, opportunities for education and specific activities for their mental development and to keep them healthy not to allow them to work a child labour.
 - x. Counseling women to adopt family planning system, avoiding abortion, use of clean dothers avoid infectious diseases, use of sanitary system, etc
 - vi. Preventing women from getting married at a very young age.
 - vii. Keeping women aware of the physical and mental changes that happen after menopasses preventing any kind of health issues.

Like other countries Indian Govt has also taken initiative to secure maternal and child healthcare

Findings

Relationship of maternal and child healthcare of Kheria Community with their Narural Environment Human health depends on the lifestyle, i.e., culture, socio-economic environment and natural environment ment. Maternal and child healthcare is not an exception to this. In a country like India, the culture at the socio-economic environment are most important to secure maternal and child healthcare. Por est nomic condition can cause malnutrition, ill health and death due to avoidance of treatment of discochild labour. Houses without proper sanitation system also affect health condition.

Exploitation and improper use of natural environment make the environment polluted. General land, water and air are the much utilized components of environment. Use of chemical in agricultures industries polluted all the three industries polluted all the three components of environment. Use of chemical in agreement as a result of which residents of a as a result of which residents of concerned area get in touch with harmful bacteria, viruses, chestages are entered into human backets. These are entered into human body either through food and water or through respiration. Pollucial water and food causes diseases like along the effect of water and food causes diseases like cholera, typhoid etc. Influenza, mumps, pox etc are the effect of

However, proper utilization of environment prevent human beings from malnutrition and discomman beings concentrate on forest area will be a seen that the second se Human beings concentrate on forest area still depend on natural environment for food and water, particularly fisher and the fi societies like Kherias of Daichakuria village take sufficient protein from hunted animals, fishes and mins from collected edible roots and fruits. The mins from collected edible roots and fruits. These foods prevent anaemia. They use medicinal heads preating cases of wounds, anemia, cold and cough, dental problems etc. Before and after delivery special mixture of two or three medicinal herbs are given to the pregnant Kheria women at a definite interval. According to a Kheria mother "Eta khele shorire bol thake, bachcha hote asubidha hoi na, pet katte hoi na". Along with these medicinal herbs they also take vitamin, Iron tablets, vaccine which are given by the asha health workers. All pregnant women are taken to Chilkigarh Hospital for their delivery. In case of complication they regularly visit Jhargram Hospital. Traditionally the pregnant women are not allowed in go outside their home alone. From seven months of pregnancy they are not allowed to go for forest resource collection, carry water. Usually, they are not allowed to take bath before ninth day of their delivery. The new mothers are not allowed to take much water, egg because they believe that it will prevent the new born baby from cough, cold and allergy. Therefore, the present study reveals that now a days the word we have the system of maternal and child healthcare.

Conclusion

The relation between environment and maternal and child healthcare of Kherias residing at Daichakuria sury important. This study clearly shows that when environment secures the traditional system of maternal and child healthcare, the Kherias fight against poor socio-economic condition and lack of modern infrastructure. The Kherias of this village are able to maintain some of the maternal and child healthcare indicators by preventing malnutrition, continuing traditional healthcare system and accepting medical system. Besides, the three major components – land, water and air are still unpolluted here. So, the dance of diseases caused by pollution of physical environment is less here. However, continuous support of ASHA Health Workers increases the cases of delivery in hospital which ultimately results in decrease in number of maternal and child mortality.

It can be concluded that, government and non-governmental efforts to make the Kherias aware about transitious value of naturally available food, utility of medicinal herbs, increase in the age at marriage of the transition system, etc may secure the maternal and child healthcare system of the therias. It also prevents them from being annihilated.

Adknowledgement

Daichakuria is the name of the village surveyed for collecting data for this paper. I am indeed grateful to many residents of this village directly or indirectly for conducting field survey. It is not possible to express the said of this village directly or indirectly for conducting field survey. It is not possible to express the said of this village for said of this village for the said of the said