HEALTH STATUS OF VILLAGE BAJEKAN IN HARYANA STATE

Himanshu Grover*

Abstract

This research paper is focused on the health aspects of village Bajekan in Haryana State. The main purpose of this study is that how a community is affected by geographical factors, which are directly influencing their health or how the social-economic factors are affecting the health of the community. Mostly people of this village are suffering from various types of diseases like Diabetes, High and low blood pressure, Stress, Obesity, Thyroid and so on. Almost half of the population is engaged with agricultural activities and they face some severe problems like Malaria, Dengue and Allergies. The people of the village are not aware about their health status and lack of information regarding how to maintain a healthier state of body and mind. There is a need of encouraging the local schools and dispensaries to develop executive training programs in health care, which will effectively increase the knowledge about health in villagers. A proper medical check-up of the villagers should also be done time to time by a team from dispensary/local government hospitals.

Keywords: Health status, Socio-economic aspects, Diseases, Dispensary, Anganwadis.

Introduction

Health Geography is an important “new” area of health research that is a hybrid between geography and medicine dealing with the geographic aspects of health and health care. It studies the effect of local and climate upon health. It aims to understanding the various factors which affects the health of populations.

*Assistant Professor-Geography, IASE Deemed to be University GVM, Sardarshahr, Churu (Raj.) email: happygrover786@gmail.com
There have been a number of attempts to define the term “Health”, and public or community health.

According to Alex Jadad (2008); Health has been conceptualized as the ability to adapt and self-manage when individuals and communities face physical, mental or social challenges.

According to WHO, the main determiners of health include the social and economic environment, the physical environment, and the person’s individual characteristic and behaviors. The WHO’s 1986 Ottawa Charter for Health Promotion further stated that health is not just state, but also a resource for everyday life, not the objective of living. Health is positive concept emphasizing social and personal resources, as well as physical capacities.”

J. Ralph Audy (1971) has defined health as a, “continuing property” that can be measured by an “individuals ability to rally from a wide range and considerable amplitude of insults. The insults being chemical, physical, psychological, and social”

Paul. J. Ahmed, in his 1997 book, “Toward a New Definition of Health” psychosocial dimension, maintained that health is a relative term must recognize the specific circumstances of the individual and society.

Health depends on a wide range of factors. A person is born with a range of geneses, and in some peoples, an unusual genetic pattern can lead to a less than optimum level of health. Sometimes the environment alone is enough to impact health. Social- economic environment and cultural issues can affect health. The best way to maintain health is to preserve it through a healthful lifestyle, rather than waiting until we are sick.

Field survey was conducted to find out the gaps and initiative has been designed accordingly.

**Statement of the Problem**

This study deals with the health aspects of the Village Bajekan in Haryana State with the help of field work. The main purpose of the study is that how
a community is affected by geographical factors, which are directly influencing their health or how the social-economic factors are affecting the health of the community. We are concerned with the health condition of the people of the village if they are suffering from any disease, their causes, the medical facilities they are using although rural or urban, and the sewerage and sanitation facilities available in the village. By this research, we come to know about the health status of the village.

**Objectives**

The study has following main objectives:

- To analyze the emerging pattern and level of health services in Bajekan village.
- To find out the influence of socio-economic aspects that affects the health of the inhabitants.
- To analyze that how aware the inhabitants are about their health status and how their education level impacts their health status.
- To reassess the satisfaction level of the patient’s experience with a variety of attributes at the village healthcare centers.
- To know about the health facilities available in this village and how the villagers are utilizing these facilities.
- To analyze the major/minor health problems affecting their current health status.

**Methodology and Source of Data**

This study is based on primary data. The primary data is collected from Village Bajekan. A schedule was prepared for collecting primary data. Both primary as well as secondary data is used.

To study and to understand the problem of study area, in the present study, I prepared the schedule and observed the health problems and health facilities existing in the village. For the field study, I went from home to home and medical center in the village and asked the questions from the people of the village.
After collecting of the data, all the aspects are analyzed and observed, some graphs and pie diagrams are made to make it clear. The data is also tabulated in the form of tables. The village map was collected from the Earth map. Thus, the whole study is organized in a systematic way.

**Study Area**

Bajekan village is located in Sirsa district of Haryana state, India. It is located 8 km towards East away from district headquarters Sirsa. Bajekan is the gram panchayat of village. The total geographical area of village is 1949 hectares. Village has population of 6742 peoples with 1269 household, of which 3452 are males while 3290 are females. (Census of India, 2011)

As per constitution of India and Panchayati Raj Act, Bajekan village is administrated by Sarpanch (Head of village), who is elected representative of the village. The village has a dispensary, chemist shop as well as some mobile health centers.
Location of Village Bajekan in District Sirsa, Haryana

Satellite Image of Village Bajekan, District Sirsa

Source: Primary Census Abstract, Sirsa

Source: Google Earth Map
Spatial Study of Health Ailments and Health Care Services

The health of a nation is an essential component of development, vital to the nation’s economic and internal stability. The wisdom of every culture teaches us that “Health is Wealth”. Ill health creates immense stress even among those who are financially severe. The onset of a long and expensive illness can derive the non-poor into poverty. High health care cost can lead to entry into or exacerbation of poverty. The importance of public provisioning of quality healthcare to enable access to affordable and reliable health services cannot be underestimated.

Child Health Care: Children, especially those under the age five are particularly vulnerable to infectious diseases. They are more likely to be injured, lost, unable to access help or health care, or imposed to greater danger. The communicable diseases and vector borne illness include: acute respiratory illness, diarrhea, malaria and measles and these are the most common causes of child mortality. Malnutrition and micro nutrient deficiencies also play significant impact on child health status.

(i) Vaccination: Vaccination prevents diseases in those who receive them, and protect those who come into contact with unvaccinated individuals. Vaccines reduce the risk of infection by working with the body’s natural defenses to help it safely develop immunity to disease. Vaccines play a key role in protection against dangerous childhood diseases. The vaccine could substantially reduce infant and under-five mortality rate.

In Bajekan village, the facility of vaccination is provided by the village dispensary. Village dispensary also organized healthcare related programs time to time like NVBDCP (National Vector Born Disease Control Program). 16 percent people preferred private clinics for the vaccination of their child. This shows that the great trust of villagers on government provided free vaccination.

(ii) Initial Health Care Preferred for Children – From the observed households only 38 percent families firstly preferred traditional healing methods for minor health ailments. For more serious health issues 78 percent peoples visited the private clinics in the village and rest of 22
percent peoples prefer village Government Dispensary. People of high socio-economic status also preferred private clinics located in Sirsa city for the better health of their child.

**Figure: Initial Health Care Preferred For Children**

(iii) ICDS (Integrated Child Development Services Scheme: It is the world's largest community based outreach programs which offers a package of health, nutrition and education services to the children below six years and pregnant and nursing mothers. The program is a package of six services viz., supplementary nutrition, immunization, health check-up, referral services, and nutrition and health education for mothers. Locally these are also termed as Anganwadis.

From the observed households, currently 40 percent households are utilizing the facility of Anganwadis. The reason is that most of the remaining families had children above 4 years of age. But in the past all of them had utilized the Anganwadi services. Anganwadi provide the facilities like food supplements, Health check – up, Maternal care, Growth monitoring, preschool education etc.

The Anganwadi workers take care of the children between the age group of 1.5 – 4 years. They provide nutrition food like Daal, Dalia, Rice for the children freshly prepared at Anganwadi. The quality of food given by Anganwadi is quite satisfactory.

Prevalent Diseases in the Village: The study demonstrated that the village has a particularly high prevalence of Non-Communicable diseases (NCD). Risk factors were present uniformly without any significant variation in prevalence by age group, gender or place of residence.
After the analyses, it was observed that age group above 39 are facing most health problems like Heart related diseases, Diabetes, Thyroid and some minor health problems like high blood pressure, obesity, frequent headaches and so on. These diseases are as follows:

(i) Heart Related Diseases

Heart related disease refers to various types of conditions that can affect heart functions. From the surveyed households 11 percent are suffering from heart diseases.

By analyzing dietary habits of villagers, it was found that most of the people are fond of junk and oily food. People who have heart problems still prefer to eat fatty and oily foods. They are reluctant to change their dietary habits.

(ii) Malaria

Malaria is a common and one of the most widespread disease in the village. In the study area, there were 5 percent peoples who suffered from malaria. The major causes are working outside in rice fields, suitable grown environment for malaria vector, and lack of sanitation and so on.

(iii) Tuberculosis

Tuberculosis is an infectious disease that usually affects the lungs. In the study area there were only 3 percent persons who suffered from tuberculosis. Smoke consumption, poverty, lack of awareness and limited access to health facilities are some factors that increase the rate of tuberculosis.

(iv) Diabetes

Diabetes is a metabolic disease or a condition in which the glucose levels in the blood will be high over a prolonged period of time.

In the study area, there are 9 percent villagers who suffered from diabetes. High stress, Overweight, obesity and physical inactivity are some causes which can lead to diabetes among villagers.
(v) Thyroid

The Thyroid is one of the largest endocrine glands found in the neck, below the thyroid cartilage. It is caused due to lack of iodine. From the observed households there were 4 percent peoples who had thyroid. People between the age group 30-65 are more susceptible to thyroid. Thyroid can be correlated with includes many other health problems like sugar, weight gain, and depression and panic attacks.

(vi) High Blood Pressure

High blood pressure or hypertension is one of the major causative factors of heart diseases that results from the hardening of the arteries. From the observed households there are 27 percent villagers of high blood pressure. The unhealthy food habits, lack of exercise or physical activities, obesity and mental tension are some major causes of high blood pressure.

(vii) Other Health Ailments

Other prevalent health problems faced by villagers are: frequent headaches, body pain, malnutrition, fatigue, obesity. Out of the total surveyed persons, 46 are suffering from headaches, 7 from malnutrition, 15 from fatigue and 17 from obesity. There are 4 persons who are suffering from polio.

Lack of proper diet, poor hygienic conditions, lack of awareness about health care are some leading factors of these problems.

Figure: Prevalent Diseases in the Village
Type of Medicinal System Preferred: Today Allopathy is considered the main stream medicine. Indian system of medicine has been widely practiced by the Vaidyas and hakims. In Haryana, homeopathy, Ayurveda and folk medicine are widely practiced.

Traditional healing practice is an important and integral part of healthcare system in almost all over the world. Majority of the villagers, especially people of low socio-economic status, first approached to traditional healers with their medical problems. Only after failure of such treatment did they move to qualified physicians for modern treatment. Interestingly, if this failed, they returned to the traditional healers. This study identified, both religious and non-religious healing practices.

After surveying the village, it has been analyzed that mostly the people preferred Allopathy or English medicine system and their percentage is 79. The reason behind this is they believe that these medicines works fast as compared to Ayurvedic and Homeopathy. Only 21 percent families are using Homeopathy and 25 percent people preferred Ayurveda.

Use of Rural Medical Facility: To access primary health facilities, villagers have to approach the nearest availability facility. There is a dispensary in a village where a doctor is available. The facility of lady doctor is also available for female patients. Among the total surveyed population 38 percent are using rural medical facility. In the dispensary Allopathic as well as Ayurvedic doctors is available but visits by doctors are rare because of the shortage of medicines, lack of infrastructural facility, lack of good equipments for treatment and so on.

So, mostly people preferred to go to Sirsa for their treatment. Almost all the people who are using dispensary belong to low income group or they are less aware about their health. Most of them ignore the diseases and do not take treatment, which in turn harm them in long run.

Use of Urban Medical Facility: Maximum families in the village prefer urban medical facility i.e. in Sirsa. They prefer to go city for their treatment although major or minor health problems because of nearest to city. According to the collected data, 62 percent people use urban medical facility.
Overall Health Conditions: The overall health conditions of the people of the village are good and most of the people are suffering from minor health problems. Very few people are suffering from any critical disease.

Mostly females i.e. 46 percent of the total population are facing the major health problems of Diabetes, Thyroid and Obesity as compared to male population. The current study findings on prevalence of low physical activity point towards a growing epidemic of Obesity.

The children who are suffering from Malnutrition and polio are 4 percent. There are 7 cases of Malaria, 3 cases of Tuberculosis and in the minor health problems of frequent headache. Almost in every house, everybody is having common health problems like Blood pressure, Headache, Body pain etc.

Problems, Suggestions and Conclusion

It is a well-recognized fact that the system of public delivery of health services in India is in crisis. The public health care system is inadequate in quality as well as in quantity. In the rural areas where the major chunk of population lives, the main source of health care is the government health centers that includes PHCs, dispensaries, other sub-centers, traditional healers, quacks and the private practitioners. The quality of government services in the rural area has deteriorated to a great extent making these health centers dysfunctional due to lack of medicines and medical staff.

Problems:

After analyzing the data, we find a number of problems regarding health care in the village. The problems are not very complex but the people just need some awareness regarding the health care. Some of the major problems of study area can be discussed below:
• The people of the village are not aware about their health status and lack of information regarding how to maintain a healthier state of body and mind.
• Most of the villagers tend to ignore the early symptoms of disease and do not take treatment immediately which in turn makes their ailments more serious overtime.
• Many people of village easily use any pain – killer tablet for minor problems like headache, body pain, high or low blood pressure without any prescription of any doctor and they are also not aware of the harm that can be caused by their pill-popping behavior.
• Lack of quality infrastructure, dearth of qualified medical functionaries and non-access to basic medicines become a major problem for village patients
• Lack of education and awareness of hygiene and ways to treat water also decrease the level of good health.
• Most of the villagers do not allocate resources adequately for medical care. So they try to avoid visiting doctor in initial stages of disease and when the situation aggravate, they panic and their medical bills also increase.
• People engaged with agricultural activities are more susceptible to many diseases like Malaria, Allergies, High fever or other skin problems.
• There is a lack of good infrastructure in Anganwadis and lack of adequate space for displaying posters related to nutrition and health education.
• There is also a lack of record maintenance and provision of supplementary nutrition, health education and growth monitoring.
• The Panchayat which is the local governing body as general is also ignoring health issues.

Suggestions

The problems which are being faced by people create some impact on their behavior and the overall economic development of the village. Some suggestions are mentioned here which might be helpful in removing these problems:
• Creating the better and hygienic living conditions for villagers with basic necessities like drainage, sewage, good drinking water, proper management of garbage and so on. Such living conditions in the villagers reduce the burden of disease.
• There is a need for providing special incentives to specialized doctors and nurses to attract them to serve in rural areas in general and especially in my study village.
• There is a need of encouraging the local schools and dispensaries to develop executive training programs in health care, which will effectively increase the knowledge about health in villagers.
• Government should also take some steps to create awareness among the people about the health conditions through seminars and through medical camps, etc.
• There is a need for strengthening the infrastructural facilities in the dispensary.
• A proper medical check-up of the villagers should be done time to time by a team from dispensary / local government hospitals.
• Poor class should be given compensation for their treatments by the administrative units of the village so that they can get proper treatment for their health problems.
• Government should provide modern equipment in dispensaries accompanied by a skilled staff.

Conclusion

Paper is devoted to the Health aspects and socio-economic conditions of village Bajekan. After analyzing, all the conditions of the villagers it can be concluded that this paper concentrated on the health status of the villagers and found about the various types of diseases existing in the village due to lack of education and awareness among the people. It shows that mostly people are suffering from various types of diseases like Diabetes, High and low blood pressure, Stress, Obesity, Thyroid and so on. Lack of awareness is also affecting the health of villagers as they are not aware about preventing themselves from seasonal epidemic. Almost half of the population is engaged with agricultural activities and they face some severe problems like Malaria, Dengue and Allergies. The facilities provided by Anganwadis are also satisfactory but there is a need of better infrastructural facilities. The
drainage and sanitation facilities are good but still there is a need to alter some wrong practices like dumping inside the village, open drainage system and so on.

**Bibliography**

1.1 Schedule

**General Introduction**

1. Name of the head of the family: ………………
2. No. of family members: ……………

<table>
<thead>
<tr>
<th>Age</th>
<th>Male</th>
<th>Female</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

3. Education

<table>
<thead>
<tr>
<th>Level</th>
</tr>
</thead>
<tbody>
<tr>
<td>Post Graduate</td>
</tr>
<tr>
<td>Graduate</td>
</tr>
<tr>
<td>+2</td>
</tr>
<tr>
<td>Matric</td>
</tr>
<tr>
<td>In-School</td>
</tr>
<tr>
<td>Illiterate</td>
</tr>
</tbody>
</table>

4. Religious Composition

<table>
<thead>
<tr>
<th>Religion</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sikh</td>
</tr>
<tr>
<td>Hindu</td>
</tr>
<tr>
<td>Muslim</td>
</tr>
<tr>
<td>Christian</td>
</tr>
</tbody>
</table>

5. Cast

<table>
<thead>
<tr>
<th>Category</th>
</tr>
</thead>
<tbody>
<tr>
<td>General</td>
</tr>
<tr>
<td>OBC/BC</td>
</tr>
<tr>
<td>SC</td>
</tr>
</tbody>
</table>

6. Family Structure

<table>
<thead>
<tr>
<th>Structure</th>
</tr>
</thead>
<tbody>
<tr>
<td>Joint</td>
</tr>
<tr>
<td>Nuclear</td>
</tr>
</tbody>
</table>

7. Main Occupation

<table>
<thead>
<tr>
<th>Occupation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Agriculture</td>
</tr>
<tr>
<td>Government Job</td>
</tr>
<tr>
<td>Business</td>
</tr>
<tr>
<td>Other</td>
</tr>
</tbody>
</table>

8. No of earning members ……………

9. Annual income

<table>
<thead>
<tr>
<th>Income Range</th>
</tr>
</thead>
<tbody>
<tr>
<td>Below 50,000</td>
</tr>
<tr>
<td>50,000 - 1,00,000</td>
</tr>
<tr>
<td>1,00,000 – 5,00,000</td>
</tr>
<tr>
<td>Above 5,00,000</td>
</tr>
</tbody>
</table>
10. Have you undertaken any loan for one of the following
   - Agricultural loan
   - Marriage loan
   - Housing loan
   - Medical Emergency loan
   - Education loan
   - Any other

11. Fuel used for cooking
   - Cow Dung
   - Wood
   - Gas
   - Biogas

12. Type of drinking water used
   - Tap water
   - Reverse Osmosis
   - Filtered water
   - Submersible

13. Presence of trees in house
   - Yes
   - No

14. Do you grow your own vegetables?
   - Yes
   - No
   If yes, than you use any kind of fertilizer or pesticides
   Please specify

15. What type of disposal for liquid and solid waste your household uses
   - Closed drainage
   - Open drainage

16. What is done with collected garbage
   - Burned
   - Dumped outside the village
   - Burried
   - Dumped inside the village

17. Type of food preferred by the family
   - Vegetarian
   - Non – Vegetarian
   - Both

18. Do you like to eat?
   - Home made food
   - Fried food
   - Junk food
   - Other specify

19. Number of family members suffering from any disease
   - Yes
   - No

20. Any member of family suffering from any following health
   - Related conditions
   - Frequent Head aches
   - Heart related diseases
   - Obesity
   - Malaria
   - High blood Pressure
   - Aids
   - Malnutrition
   - Tuberculosis (TB)
   - Body pain
   - Cholera
   - Fatigue
   - Diabetes
   - Other specify
   - Thyroid
21. Do you prefer?
   Rural Health facility [ ]
   Urban Health facility [ ]
   Both [ ]

22. Do you prefer
   Allopathy [ ]  Homeopathy [ ]  Ayurveda [ ]

23. Are you satisfied by the health care provided by village dispensary?
   Yes [ ]  No [ ]

24. Is there a lady doctor for female patient?
   Yes [ ]  No [ ]
   Any suggestion …………………

25. Where did the child first received healthcare
   Domestic Healer [ ]
   Government Health center [ ]
   Private clinic [ ]
   Any other [ ]

26. Where do you get your child vaccinated?
   Village dispensary /Government Hospital [ ]
   Private clinic [ ]
   If private clinic is preferred, then why ………

27. Which one are you using out of the following provided by
   The Anganwadi [ ]
   Food suppliments [ ]
   Health checkup [ ]
   Maternal care [ ]
   Growth monitoring [ ]
   Pre- School Education [ ]
   None [ ]

28. Did the Anganwadi supply food to the centers
   Yes [ ]  No [ ]
   If yes, which type of food
   Rice [ ]  Dal [ ]  Dalia [ ]  Any other [ ]

29. Describe the quality of food given by the Anganwadi
   Good [ ]  Satisfactory [ ]  Bad [ ]
30. During the last six months how many times cleaning derive was undertaken
   Once □    More than once □    Never □

31. Any suggestion about health facilities of the village
   …………………………………………………………………………………………………………………
   …………………………………………………………………………………………………………………
   …………………………………………………………………………………………………………………
   …………………………………………………………………………………………………………………
   …………………………………………………………………………………………………………………

1.2 AGE GROUP

<table>
<thead>
<tr>
<th></th>
<th>0 - 14</th>
<th>15 - 29</th>
<th>30 - 49</th>
<th>50 – 69</th>
<th>Above 70</th>
</tr>
</thead>
<tbody>
<tr>
<td>M</td>
<td>38</td>
<td>57</td>
<td>55</td>
<td>47</td>
<td>22</td>
</tr>
<tr>
<td>F</td>
<td>24</td>
<td>46</td>
<td>42</td>
<td>42</td>
<td>30</td>
</tr>
</tbody>
</table>