A Study on the Health Status of Tribal People in Gajapati District of Odisha

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ABSTRACT
Many tribal communities in Odisha are unevenly distributed in forest and hilly areas. They mainly depend on gathering of forest products and shifting cultivation. Gajapati district is being selected as it is the most tribal district of Odisha. Tribal people in general are highly diseases prone. Their misery is compounded by poverty, illiteracy, ignorance of causes of disease, poor sanitation, lack of safe drinking water and blind beliefs etc.

Keywords- Infirmity, shifting cultivation, isolation, remoteness

INTRODUCTION
The state of Odisha, the most picturesque state in Eastern India, occupies a unique position in the tribal map of India having many tribal communities, unevenly distributed in forest and hilly areas. They mainly depend on gathering of forest products and shifting cultivation. According to the World Health Organization (WHO), the definition of health is a state of complete physical, mental and social well being and not merely the absence of disease or infirmity. Health is an essential component of the well-being of mankind and is a prerequisite for human development. The health status of any community and especially of tribal people is influenced by the interplay of health consciousness of the people, socio-cultural, demographic, economic, educational and political factors. Ill health of tribal people is mainly associated with their existing environment, social isolation, poverty, inadequate housing, mental illness, widowhood etc.. Generally, at household level, cultural norms and practices and socio-economic factors determine the extent of health problems among tribal. Tribal communities in general are highly disease prone. Their misery is compounded by poverty, illiteracy, ignorance of causes of disease, poor sanitation, lack of safe drinking water and blind beliefs etc.

The topic is being selected as the health status of tribal people is poor because of the isolation, remoteness and being largely unaffected by the developmental process going on in India. Gajapati district is being selected as it is the most tribal district of Odisha. In 2011, Gajapati had population of 5777,817 of which male and female were 282,882 and 294,935 respectively. Main objectives of health and family welfare in Gajapati is,

- To ensure adequate, qualitative, preventive and curative health care to people of the Gajapati district and state.
To ensure health care services to all particularly to the disadvantaged groups like scheduled tribes, scheduled castes and backward classes.

- To improve health care facility in the KBK and Gajapati districts.
- To reduce maternal, infant and neo-natal mortality rates.
- To improve hospital services at the primary, secondary and tertiary level in terms of infrastructure, drugs and personnel.

OBJECTIVES

- To identify the health problems of tribal people
- To find out the reasons responsible for their ill health
- To study the socio-economic characteristics of the tribal people

REVIEW OF LITERATURE

The work reviewed and analyzed in the present investigation includes Ravindranath Rao’s “Tribal Social Transformation” [Article in Samaja Shodhana Vol-I, No-2 Oct 1992]; Ram Ahuja’s Social problems in India; Read Margaret’s “Children of Their Fathers”, Holt, Rinehart and Winston, New York, 1960 etc

METHODOLOGY

The study was conducted in the Gajapati district of Odisha. Interview schedule was prepared for the collection of data. Information was collected from primary and secondary sources.

HYPOTHESES

1. As they are less educated they have less idea about the health consciousness programme.
2. Most of the tribal people are suffering from disease due to the poverty.

ANALYSIS OF DATA

So far as the health status of tribal people in Gajapati district of Odisha is concerned tribal people are in ill condition. The health status of tribal people is poor because of the isolation, remoteness and being largely unaffected by the developmental process going on in India. Most of the respondents are not conscious about the health programmes as they are less educated and are suffering diseases due to their poor socio-economic conditions.

CONCLUSION

Tribal people in general are highly disease prone. Good health of tribal people will take a great change not only in their community but also the society.

References:

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