Abstract

'Health is of universal interest and concern' (Forest Clement, 1932). Health care practices are indispensable for human survival. The socio-cultural dimension is the integral part of the health care practices of a community belonging to specific ecological surroundings in which they reside. More often the traditional health care practices continue in the day-to-days life style of a particular community and it is conspicuously evident among the tribal population. The perceptions of health, disease and treatment s vary according to the culture of anexact locale depending on ecological settings. Moreover, a particular culture of tribal area is led by the traditional belief systems which are guided by the environment and cultural value systems.

The cause of diverse nature in traditional tribal societies is due to various ecological surroundings, economic, religious and traditional faith in their own cultural pattern. My present medical anthropological research deals with etiology of disease, study of health care practices in light of socio-cultural dimensions, exploration of religious and supernatural practices related to health and focus on diagnosis with traditional method of remedial process among the Hill Kharia of District Purulia and Bankura, West Bengal. It highlights on the infrastructure and implementation of modern health care programmes of said tribal population in the particular areas.

The introducing chapter discusses about the components of medical anthropology the basic components of health, disease and treatment pattern along with the illness and sickness behavioural pattern. This chapter also emphasises on the role of social-cultural anthropology for understanding traditional and modern health care practices and programmes. Analytical discussions have been done on scope, aims, objectives

and hypothesis of the present research. The most significant part of the chapter is methodology applied for the present study. The section deals with the cause and consequences of administering various anthropological research techniques for exploring the present quarries.

The main objective of chapter-2 is to discuss about the villages and people emphasising on demographic particulars. The chapter explores the socio cultural life along with nature of habitational places of Hill Kharia population. This chapter also emphasises on the administrative location of the areas including state, district, blocks and panchayats. Location of villages, historical backgrounds of the villages, character of the villages, ethnic pattern of the villages, infrastructural facilities in the villages are also provided in this chapter.

Moreover, the detail occurrence of festivals along with the role and participation of the Hill Kharia villagers are stated in this chapter. From this chapter, reader can go through about the beliefs in supernatural entities, especially gods, spiritual power related with the traditional way of treatment. Name of the deities and their role in association with health and treatment procedure are also discussed in this chapter. The exploration on indigenous knowledge of the said tribal communities regarding perception of health and treatment in different ailments has also been emphasised in this chapter. Detail knowledge about traditional medicine and role, activities of traditional healers are also documented in this chapter. The Chapter also elucidates the case study of traditional healers and the patients availed the traditional method of treatment. The life cycle rituals, concept of taboo, totem and magico-religious practices related to health are also pointed out in this chapter. Moreover, the list of

available medicinal plants and their uses by the said tribal communities are also documented in this chapter.

Chapter-4 consists in two divisions. In Division-A, the details of health profile of the country is given in this division. Latest Government policies regarding health are also discussed in this section. Moreover, the health infrastructure of the country has been stated in this section.

In Section-B, the discussion has been done on the health care facilities and infrastructure in the areas under the study. The section discusses elaborately the selected case studies of modern medical practitioners and the patients who have availed modern medical system. This chapter also provides the detail idea about the infrastructure of Sub-centre, Primary Health Centre (PHC), Block Primary Health Centre and nearest State General Hospital. A section of the chapter, discussions have been done on the role of Registered Doctor (MBBS), quack, staffs and *Asha Karmee* and health workers in the villages. Another very important issue, the maternal and child health care practices among the said tribal population are also written in this section.

The study has been done to describe the health, disease and treatment, belief system, magico-religious practices related to health and indigenous knowledge regarding diagnosis procedure among the Hill Kharia in the districts Purulia and Bankura, West Bengal, India. Altogether five villages of two districts were covered under this study where Hill Kharia people inhabit in above mentioned districts. The villages are categorised in two types. The supernatural belief system has largely influenced the health as well as traditional way of treatment pattern of Hill Kharia in those five villages in Purulia and Bankura districts. Both traditional and modern method of

treatment was found among them. Now the Government has initiated various health related programmes to attract the population towards modern medical system. But it was observed that home births are still prevalent among them in two types of villages.