

Chapter V

Culture and health

In previous chapter I discussed and analysed how social structure of a society determines health of individual or group in general and Patni in particular. I specifically discussed how economy and education influence health status of Patni community in Barak valley. This chapter deals with culture and its influence on health of Patni community.

The term culture has a broader meaning in sociology and social anthropology. Sociologists and anthropologists define and conceptualize culture in different ways. Widely accepted definition of culture is given by **E. B. Tylor** in his book '**Primitive Culture**' (1871). Tylor defines culture as '*that complex whole which includes knowledge, belief, art, morals, law, custom and any other capabilities and habits acquired by man as a member of society*'¹.

According to **Bronislaw Malinowski** (1944) culture is a total way of life having mental, social and material instruments to fulfill and satisfy biological and social needs. His definition puts stress on biological aspects

¹D.N.Majumdar and T.N.Madan, An Introduction to Social Anthropology, Mayoor Paperbacks, Noida, 1986, Pp 12-29

of culture and gives emphasis upon biological characteristics of human behavior. Every biological and social need and impulse has a cultural response for its fulfillment. Cultural response to social need becomes institutionalized and serves function of society². **Sidney** (1953) defines culture as product of agrofact, artifact, socifact and mentifact. Agrofact means products of cultivation, artifact is product of industry, socifact is social organisation and mentifact is language, religion, art and so on. **A.L.Kroeber** (1952) talks about two important attributes of culture namely Ethos and Eidos. Eidos is formal appearance of a culture derived from its constituents. Ethos determines quality, theme and interest of culture. Ethos is emotional part of culture³.

Max Weber highlights importance of culture as value and belief coexisting and shaping social action within micro-cosmos of individual actor as well as at level of collectivities, institutions and larger society. In particular Weber's conceptualization of ethnic group and traditional action offers the most relevant insight into study of culture. Weber's conception of traditional action is relevant to the link between culture and health⁴.

Erving Goffman elucidates how culture affects individual behaviour.

²Ibid 12-14

³Ibid Pp 12-24

⁴William C. Kokerham, The Blackwell Companion to Medical Sociology, (Ed) Willy Blackwell, West Sussex, 2001, Pp1-15

From interactionist view point Goffman focuses on people's subjective definition of situation and stigma. He proposes three-stage of stigmatization process. First stage is individual's initial or primary deviation from normative framework. Second stage is negative societal reaction and third stage is other people's secondary reaction or response to the negative reaction that becomes deviant individual's master status. Goffman's normative framework is socially constructed based on community's predominant culture. Disability and disease particularly mental diseases are typically perceived as stigma and trigger stigmatisation process⁵.

Culture embraces values, belief and judgments about what is good and desirable and how people should behave. Culture defines standards of morality, beauty, tastes and health. Societies vary in their perceptions of what constitutes health and how to achieve and maintain it. Culture prescribes which food to take and which should be avoided in order to be healthy. Culture provides varying prescriptions for men and women, for puberty, pregnancy and old age (Levin and Sorenson 1984)⁶.

⁵Scot Apppelrouth and Laura Desfor Edles, Classical and Contemporary Sociological Theory, Pine Forge Press, Los Angeles, 1965, Pp 478-536

⁶Howard E. Freeman, Sol Levin and Leo G. Reeder, Handbook of Medical Sociology, Fourth Edition, Prentice Hall, New Jersey, (1972), Pp. 59

Edward Suchman works on socio-medical variations among ethnic groups. He finds an association between illness behavior and ethnicity. Group closeness and exclusivity increases likelihood of a person responding to a health problem in a way that is consistent with his sub-cultural background⁷.

There are number of studies documenting association between culture and illness behavior. A prominent contribution on culture and mental disease is made by **Horacio Fabrega** summarising crux of current research in sociology and anthropology states that empirical studies integral to and grounded in sound clinical and epidemiological research methods have succeeded in making clear that how cultural conventions affect manifestations of disorders, aspects of diagnosis and response to treatment⁸.

Perception of physical and mental disorders varies from culture to culture. Americans have more forward perception of mental illness than Vietnamese. In contrast to Americans, Vietnamese traditional culture has a much narrower definition of mental illness. They are more tolerant of

⁷Gregory L. Weiss and Lynne E. Lonnquist, The Sociology of Health Healing and Illness, Prentice Hall, New Jersey, 2000, Pp 31-175

⁸www. Willey.com/ new blackwell companion to medical sociology accessed on 12.09.2012

behavioural disturbance triggered by distress. Vietnamese define someone mentally ill only if the person is so disruptive that he or she threatens social order or safety of others. Person is taken to hospital if family is unable to control him or her (Robert S Mckelvy, David L Sang and Cam T Hoang)⁹.

Scholars find the fact that illness behavior typically involves a wait and see for first reaction to symptoms, followed by self medication. If problem is judged to have worsened, then only person may be prepared to seek expert advice. In this process cultural patterns of behavior may be superseded by formal education. In a comparative analysis of Chinese, Malays and Indians **Stella Quah** finds that education explains practice of self medication with modern over the counter medication better than culture. There is significant difference among three groups in keeping of non-prescription and traditional medication at home. Education serves as an equaliser for self medication with modern medicines. Educated persons, irrespective of ethnic identity, are more inclined to practice self medication with modern over the counter medicines before seeking expert's advice¹⁰.

⁹Robert s. Mckelvey, David L. Sang, Hoang Tu Cam, Is there any Role of Child Psychiatry in Vietnam?, Australian and New Zealand Journal of Psychiatry, Vol. 31(1), Feb 1997, 114-119.

¹⁰Stella Quah, Self-medication: A Neglected Dimension of Health Behaviour", Sociological Symposium, 19, Summer, 1977, Pp 20-36.

Cultural phenomena vary among groups and have impact on health care. These are environmental control, biological variations, social organisation, communication, and space and time orientation. Environmental control is capacity of a particular cultural group to control and to use nature for their necessity including health care. Biologically people of one cultural group differ from another and their health needs also differ. Social environment plays an important role in people's access to health care (Giger and Davidhizar)¹¹.

Modern western health culture is believed to be strongly influenced by modern medical model. Explanations for illness in Western society are rarely couched in religious terms due to spread of bio-medical model of health and illness. Their Culture plays an important role in their perception of good health as well as regulation of health behavior. In western world body is often treated as an intricate machine which must be kept tuned-up and illness is treated as a breakdown of the machine. Western concept contrasts with Ayurvedic concept of body, a concept prevalent in India and South Asia in which health is seen as a state of balance between the physical, social and supernatural environment and illness can results from

¹¹Rachel E. Spector, Cultural Diversity in Health and Illness, Prentice Hall, London, 1996, Pp 63-169

disturbances of any of these sphere. This kind of differential concepts of health illness and health behavior varies in different socio cultural settings due to difference of traditions, social practices and role relationships. Within a great tradition of health culture numerous little traditions of health culture exist which are based on beliefs, values and health practices of this tradition¹².

To understand influence of culture on health in rural social setting it is important to know culture of rural communities or folk culture. The term folkways is first used in sociology by **W. G. Sumner** in his book Folkways (1906). Sumner talks about folkways in comprehensive sense with a view to make a very clear analysis of nature, processes and components of society. Folkways according to Sumner are very gradual creation of an entire network of customary practices which regulate every important activity in community. At any given time in a community, folkways provide all needs of life then and there. Sumner discusses features of folkways as follows. Folkways are like products of natural forces. Their emergence in social life is unconscious, spontaneous and uncoordinated. They come to be uniform and universal. They are imperative and invariable in the group¹³.

¹²Madhu Nagla, Sociology of Medical Profession, Rawat Publication, Jaipur, 1997,Pp 1-180

¹³Ronald Fletcher, The Making of Sociology, Volume 1, Joseph, Michigan, 1971, Pp 502-514

The most important quality is that folkways are not only usages but sanctioned and obligatory usages throughout community which bind upon its members. The body of folkways according to Sumner constitutes a social environment. Everyone who born into it is bound to enter into relation of give and take within it. Folkways always influence him. Folkways are one of life conditions under which he must work out his carrier of self realization. Folkways create standard habit and custom and exert a strain on every individual within its range. Folkways create social forces and help to constitute a society¹⁴.

Robert Redfield uses the term folk to distinguish between folk culture and urban culture. He makes distinction between folk society and urban society by following distinction made by earlier European sociologists between primitive and modern society. Redfield follows distinction between Gemeinschaft and Gesellschaft made by Ferdinand Tonnies and Emile Durkheim's mechanical solidarity and organic solidarity. According to Redfield, folk societies are small, isolated, non-literate and socially homogeneous society. There is a strong group solidarity and kinship, a common culture rooted in tradition. Behaviour in folk society is personal and spontaneous rather than impersonal and law-bound relationship¹⁵.

¹⁴ Ibid Pp 506-514

¹⁵ Jhon Scot and Gordon Marshall, Oxford Dictionary of Sociology, Oxford University Press, New York, 2009, Pp 635

Folk culture is believed to be total way of life of a community. Therefore, to study folk culture of a community it is important to make analysis of agriculture and agrarian history, pattern of settlement, dialectology of folk speech, folk architecture, folk cookery, folk custom, notion of folk time i.e. folk year, folk literature, folk religion, folk recreation, folk arts and crafts, folk play, folk belief, folk medicine and many other folk practices. Some scholars use 'folk life' instead folk culture due to its all embracing character (Dorson 1972, Yoder 1968). Folklore is oral literature pass down from generation to generation from oral tradition. Folklores generally incorporate folk songs, folk dances, folk tales, superstitions, myths etc. But all folklorists do not agree to confine folklore within oral tradition. All folklores are not transmitted orally (Dundes 1966, Islam 1984). Practice of folk games such as playing of marbles or skip stones do not orally transmit from one generation to other. Non-verbal aspects of folklore like gestures, games and dunces cannot be said to be purely oral in tradition. Moreover, some other elements of folklore such as folk customs, folk games and folk medicines are neither purely verbal nor art but these are unavoidable elements of folklores (Islam 1984)¹⁶.

¹⁶Chitrasen Pasayat, Tribe, Caste and Folk Culture, Rawat Publication, Jaipur, 1998,Pp 12-43

Folk medicine represents one of a human's earliest uses of natural environment to prevent and treat diseases. People use herb, plant, mineral and animal substances as medicine to get rid of diseases. Apart from plant and animal substances magico-religious practices such as charms, holy words and holy actions are performed to prevent diseases. Natural folk medicines are widely used throughout world. These forms of medicines are found in old-fashioned remedies and household medicine. Folk remedies have been passed down for generations and are commonly used for therapy. There are cultural variations regarding specific modes of use of folk medicines. Moreover, religious and magical practices are performed by people to protect and restore health. These practices may be regarded as superstitions but for believers these are valuable. Charms, amulets and physical manifestations are believed to be useful for curing certain diseases. Magico-religious practices are prevailing in society due to people's belief on power of evil spirit, ghosts and deities to cause certain diseases which cannot be cured by any other system of treatment¹⁷.

In India folk medicines were practiced during *Atharvedic* period (Lanman 1905) and it is still being practiced in contemporary period. Gods, goddess and spirits are regarded as cause of disease and illness. For cure and

¹⁷Ibid Pp 12-39

protection of diseases god, goddess and spirits must be pleased. Health, illness and cure are conceptualized on basis of sacred values of Indian socio-cultural system. *Karma, Dharma* and *Dua* are linked with health and illness. At the same time secular beliefs also exists. People believe on western medicines due to its prompt result rather than any other system of medicine (Khare 1963). Spiritual healers are prestigious to common people. Spiritual healers are believed to have divine capacity to identify cause of disease and for curing it by chanting of holy words. Folk or traditional system of medicines is linked with people's emotion in India (Henry 1981)¹⁸.

To study culture and health of Patni community is important to study perception of Patni regarding disease and illness. How much traditional belief and value deeply rooted in them. How tradition determine their cognitive orientation to etiology of diseases. What system of medicine they prefer and reason of their preference for a particular system of medicine. All above issues concerning culture and health of Patni are discussed by analysing their faith of folk medicine.

¹⁸Madhu Nagla, Sociology of Medical Profession, Rawat Publication, Jaipur, 1997,Pp 41-42

Folk medicines used in Patni community of Cachar District are both natural folk medicines and magico-religious practices. Folk healers, to whom Patni people seek treatment use herb, plants, minerals and animal substances. Magico-religious practices such as chanting of holy words, giving amulets to wear, doing some magical and religious activities are done for prevention and treatment of diseases. Patni people go to folk healers for certain selective diseases. Patni people view that there are certain diseases for which no system of medicine is effective except folk medicine. These diseases are hardly known to modern medical professionals. One of such peculiar folk disease is Displacement of Navel or *Navi Dula*. Etiology of displacement of navel is carrying heavy load beyond one's capacity, long jump, high jump or sudden fall down. It can occur to any matured individual who is having capacity to carry things or can move and walk freely. Any individual may be victim of this disease irrespective of gender difference. Symptoms of this disease are pain in lower abdomen and loose motion, not so frequent but persisting for longer period of time. If someone feels this symptom he or she initially does not suspect for occurrence of displacement of navel because these symptoms are similar with symptoms of diarrhea, dysentery or any other abdominal complication. People generally seek for allopathic treatment if they suffer

from such symptoms. But if the symptom does not cure after a therapy of allopathic medicine displacement of navel is suspected by patient or family members. For diagnosing displacement of navel folk healer examine patient by taking measurement of lengths his both hands up to elbow. If healer finds difference in measurement of both the hands he suspects for displacement of navel. In fact this test is regarded as dry test for diagnosis. Another test is done to be sure about this disease. A plate made of steel is attached to back of patient by folk healer. If disease is present, plate will fix in back of patient after chanting holy words and this becomes wet test for diagnosis. A folk physiotherapy is done by putting a burning candle over navel of the patient. Candle is covered by a glass pot for some time. If disease is present glass pot will tightly fix over navel and navel will come back to its original position. Apart from folk physiotherapy, root of a kind of herb is given to wear and some holy words are chanted to cure disease. Patient has to follow some restrictions in terms of taking food, coming out of house in selected time of a day and not to carry heavy loads for some days. Patient is advised to wear root of herb as many days as possible so that disease does not relapse again. There are some variations among healers in methods of diagnosis and treatment of displacement of navel. Some healers do not conduct both the tests at a time. There is difference in

use of holy words by healers; all healers do not chant same words for healing this disease. Action of holy words of a healer is assessed on the basis of time taken to get rid of disease. In fact social prestige of folk healer depends upon action of his chanting. Cost of therapy is within affordable range of poor patients.

Another folk disease, sexual disorder of male particularly absence of libido or erectile dysfunction is termed as *gachmura* by Patni. Sexual disorder can be diagnosed and its treatment is available in modern system of medicine. But *gachmura* is to be treated as folk disease due to perception of Patni people regarding its etiology. Patni agree on occurrence of sexual problem due to physiological disorder but *gachmura* is not due to physiological disorder. Male sexual organ is regarded as a *gach* or tree when it erects. If a *gach or tree* is molded or broken it cannot grow further. Similarly erectile function of male organ of a person can be permanently stopped by his enemy through magical activity. Patni perceive that action of a magical activity can only be destroyed by counter magical activity. Therefore, *gachmura* cannot be cured by any other system of medicine. Folk healers with magical activity and chanting treat this disease. Some folk healers give juice of a plant (name not disclosed to researcher) to these patients along with chanting and amulets. These healers believe that juice of this

plant can destroy action of all magical activity to some extent. One healer discloses its colour and said he shows neither this plat to people nor its branch from where milk like juice is produced.

Ban is another magical activity which acts on lungs and chest of persons to whom it is applied. *Ban* is so powerful magical activity that its action can cause sudden death of a person. Death due to *Ban* will take place by vomiting blood or sudden attack with chest pain. *Ban* is sent through air by giving a time limit. If patient does not take shelter of healer within time period, his or her death is certain. Treatment is sending back *Ban* towards *guni* or person who has done it or destroying its action on spot by chanting powerful holy words and performing counter magical activity. All healers do not agree to destroy action of *Ban* because it may attack healer instead of patient. Therefore, it is very difficult to get a healer in such situation. While a folk healer is asked how many patients of such kind he gets in a year. He replies that indeed *guni* or people who can do such a harmful activity are not available now like past. People hardly appreciate learning evil magic for destroying someone's life. Perhaps no one inherits this magical activity due to social stigma. That is why such an evil *guni* is hardly found in society now. Another healer is of view that learning black magic is not so difficult than its maintenance and keeping patience for its

application. Black magic may destroy even entire generation of a person who knows it. Therefore, *gunis* who knew this magical activity were reluctant to teach it to their descendents. Magical activities are still persisting in society. *Thama* is another magical activity although not so severe like *Ban* but harms people in various ways. It is a common magical activity known by many people but its effects can be destroyed easily. *Thama* lingers injury of any person to cure. It delays delivery of pregnant women and delays jackfruit to ripe in tree. It can be applied to animals like buffalo and cow. Effect of *Thama* is made inactive by chanting water. Healers easily understand during chanting water whether effect of *thama* is persisting or not. Extra medicine is not required to be taken except chanted water to get relief from effect of *thama*. Therefore, to cure *thama* no money is required to be spent, it requires only familiarity with healers. There are other back magic which can cause unconsciousness of person. A person may become *fit* or unconscious due to its effect. But according to healers this problem is not so severe. Its treatment can be easily done.

Evil eye or *najar* is believed by Patni. Look of evil eye causes disease. Look of every people is not harmful but there are people whose look effects health. Food cannot be digested evil eye looks that food. If a healthy baby is looked by evil eye, baby's growth may be hampered. For destroying

action of *najar* one common home remedy is to burn a dry chilly. In case it is not curing by burning chilly folk healers gives common salt by blowing and whispering. This salt is to be taken by patient to get rid of effect of evil eye. Blowing and whispering of salt is known by many people therefore, *najar* is not difficult to be cured.

There are numerous diseases for which Patni people prefer folk medicine. Jaundice or *olmi* is regarded as a disease by patni but as per medical science jaundice is a symptom of disease. Folk healers diagnose jaundice by observing physical symptoms of patient. Jaundice induced physical symptoms are loss of appetite, weakness with mild fever, yellow colour urine, yellow eyes and nails of patient. Folk etiology of jaundice is irregular life style. There are four types of folk treatment for jaundice. These are *bharan*, *tika*, *mala* and *jhara*. *Bharan* means putting paste of leaves of a plant over head of patient, *Tika* or sticky juice of a plant is attached to forehead of patient, *mala* is made up of stem of a small herb which patient wear on neck and *jhara* means chanting holy words to cure disease. Folk healers view that through *jhara* or chanting disease is transferred from body of patient towards earth. In all four methods of treatment diet restriction is given to patient. Patient is advised to avoid oily foods and to take boiled vegetables without using oil and turmeric. It is

observed that for treatment of jaundice, Patni people prefer folk medicine than any other system of medicines. Particularly *bharan* along with diet restriction works wonderfully to cure jaundice. Some folk healers advise patients to take juice of sugarcane early in morning. Ripe banana, fish, meat, dry fish or fermented fish are restricted for jaundice patients. Around one month is required to cure jaundice completely. Cost of therapy is also within affordable range of patients.

Post delivery complexity of women or *sutika* is treated by folk medicine. Etiology of post delivery complexity is loss of blood and its symptoms are edema, loose motion, lack of appetite and tremendous weakness. Disease is treated by folk healers by giving folk medicine made up of leaves and roots of herbs. Some healer gives charmed amulet along with leaves and herbs. Joint pain or *gatbat* occurs due to old age which causes problem in movement. This disease is treated by dust of a kind of rice mixed with juice of a small living organism (name not mentioned). It is said by a healer that only three dose of medicine can completely cure joint pain. Piles or *arsha* is also treated with folk medicine. Etiology of piles is life style and food habit of individuals. Symptom of disease is rectal bleeding during evacuation. This disease is treated purely with herbs. One folk healer treats kidney stone. He is of view that symptoms of kidney stone are pain in

lower abdomen, backache and obstruction of urine passage. This disease is treated purely with leaves of herb. White discharge of women is treated with herb, using charms and amulet. Asthma or *shwas* particularly of children is treated with folk medicine. A piece of iron is purified by chanting and is given to wear on neck. Instead of iron piece teeth of tiger, copper coin or bittle nut is chanted and given patient to use it. Blowing and whispering is also done to cure this disease. Hydrocele or *eksirais*, a problem of scrutum is treated by making a hole on ear along with chanting and incantation. Apart from above mentioned diseases, there are other diseases like chickenpox, snake bite, bite of animals like dog, cat and rat etc., dental worm, green stool of babies, diarrhea and dysentery, cough and cold are treated with folk medicines. There are bone setters who treat fracture of bone with purely herbs and leaves. These above mentioned diseases are treated mainly with herbs, roots and leaves of plant. For chicken pox different kinds of leaves are given to use. Patient is advised to take only vegetarian food without using oil. Patient is kept in a separate room and advised not to come out of room for three weeks. After three weeks goddess *Shitala* is worshiped. There is a common faith among Patni that goddess *Shitala* provides chicken pox and for curing this disease *Shitala puja* or worship of goddess is mandatory. For treating snake bite

herb, roots and leaves are used but chanting is mandatory for curing snake bite. Healers with help of chanting restrict movement of snake venom throughout body. Chanting destroys venom of snake on spot and patient gets relief. Bite of animal like dog and cat is treated with herbal components along with chanting and whispering. But all healers do not chant, they treat only with medicines. Dental problems particularly dental worms are removed from site of gum by blowing and whispering with herbs and roots. Diarrhea, dysentery, cough and cold are treated with herbs and leaves. But these are commonly used by community people and known to all. These medicines are used as home remedies for diarrhea, dysentery, cough and cold.

It is observed from study that elder members of family have much knowledge on home remedial medicines as compared to younger members. Older family members have command on other members regarding use of traditional medicines for minor illness.

Table V.1**Respondent's perception of health and illness**

Perception of Health	Number of respondents			Total
	Socio-economic status			
	Illiterate Poor	Literate Poor & Lower Middle Class	Educated Middle Class	
Health is gift of god and disease caused by supernatural forces	66	33	Nil	99
Gift of god but needs maintenance. Disease caused by both supernatural and environmental factors	21	112	21	154
Not gift only but needs maintenance. Disease not caused by supernatural forces.	Nil	9	38	47
Total	87	154	59	300

Perception of health and illness differs among respondents under study. Perception of health and illness of respondents is recorded on the basis of their socio-economic status. Thirty three percent of (33%) of respondents, who belong to lower socio-economic status, hold that good health is gift of God and illness is caused by disgrace of God. Ghosts, devils and magical activities influence on health. Occurrence of disease depends upon of physical strength. Good quality diet and sound sleep is required to maintain it. To them, some people acquire good health by birth. They believe on

karma and *dharma* which determines one's capacity to acquire and maintain physical strength as well good health. Around fifty one (51%) percent respondents, who are in little better social position, hold dual perceptions of health. According to them, good health although is gift of God needs maintenance by taking diet timely, having sound sleep, taking bath and taking good quality food. Disease according to them is caused by interaction between human and environment, physical and behavioural causes and old age. They believe on modern medicine for treatment of disease and illness. But they hold that there are certain diseases caused by supernatural forces which cannot be cured by medicine. For treatment of such diseases one must to healers who can to cure it. They keep faith upon these healers and respect them. Only sixteen percent (16%) respondents who are educated and economically sound do not believe on influence of supernatural forces upon health. According to them, health solely depends upon maintenance. Illness is caused by intrinsic and extrinsic factors like physical malfunction and environmental causes. For illness due to any of factors one must seek advice of medical professionals on time. Majority of respondents of this group do not have faith on traditional healers. It is observed that there are educated middle class respondents who still have faith upon traditional medicine.

Table V.2

Reason for preference of folk medicine

Reason for preference	Number of respondents			Total	% age
	Socio-economic status				
	Illiterate Poor	Literate Poor & Lower Middle Class	Educated Middle Class		
Economic consideration	23	56	4	83	27.6%
Easy accessibility	9	7	3	19	6.4%
Effectiveness of system	11	23	8	42	14%
Immediate relief	5	4	1	10	3.4%
Combination of all	39	64	8	111	37%
Disagree on all	-	-	35	35	11.6%
Total	87	154	59	300	100%

It is observed from above table V.2 that folk medicine is preferred by 27% respondents due to economic consideration and majority of them are poor and lower middle class. Folk medicine is comparatively cheaper than any other system of medicine. Folk medicine is easily accessible to patients but very few respondents (6.4%) prefer folk medicine due to its easy accessibility. Effectiveness of folk medicine is acknowledged by 14% of respondents. Folk medicine does not have prompt action as like as other system of medicine. Only 3.4% of respondents reported to get immediate relief from disease by using folk medicine. It is observed that 37%

respondents prefer folk medicine considering its all dimension. Out of this 37% respondents majority belong to poor and lower middle class background. Majority of educated middle class respondents do not have faith upon folk medicine. Out of three hundred respondents 11.6% respondents disagree with all qualities of folk medicine. But there is good number of educated middle class respondents who keeps faith upon folk as well as other system of medicine. These respondents still hold their tradition and believe on action of folk medicine. Out of total educated middle class respondents more than forty percent of them have faith upon folk medicine and prefers it by considering various dimensions. It is observed that none of the respondents who belong to poor and lower middle class category disregard action of folk medicine. Except few respondents who are educated middle class all respondents have faith on folk medicine.

It is found from study that spread of modern education is helping people to have more faith on modern medicine instead of traditional system of medicine. Respondents who are more educated favour modern medicine instead of traditional medicine or folk medicine. Those educated people still keep faith on folk medicine have stronger link with their family members living in rural areas.

Table V.3

First Preference to system of Medicine

Preference for system or medicine	Number of respondents			Total	% age
	Socio-economic status				
	Illiterate Poor	Literate Poor & Lower Class	Educated Middle Class		
First preference Allopathic	50	110	50	210	70%
First preference Homeopathy	5	9	8	22	7.3%
First preference Ayurveda	Nil	Nil	1	1	0.4%
First preference Folk	32	35	Nil	67	22.3%
Total	87	154	59	300	100%

From above table V.3 it is observed that 70% of respondent's first preference is allopathic medicine. 22.3% of respondents prefer first folk medicine. Homeopathy is preferred for first time by 7.3% and first preference for ayurvedic medicine is negligible. Illiterate and literate poor as well as lower middle class do not prefer ayurvedic medicine. It is observed from study that first preference of system of medicine depends upon accessibility and availability of system of medicine. Majority of respondents reported that they go for second and third options also if first option is not available and affordable. In table V.4 respondents second preference of system of medicine is analysed.

Table V.4**Second preference to system of Medicine**

Preference to system medicine	Number of Respondents			Total	% age
	Socio-economic status				
	Illiterate Poor	Literate Poor & Lower Middle Class	Educated Middle Class		
Second preference Allopathic	37	44	9	90	30%
Second preference Homeopathy	15	39	36	90	30%
Second preference Ayurveda	Nil	10	5	15	5%
Second preference Folk	35	61	9	105	35%
Total	87	154	59	300	100%

From above table V.4 it is observed that allopathic medicine is second preference of 30% respondents who prefer first either homeopathic or folk medicine. 30% of respondent's second preference is homeopathy and 35% of respondent's second preference is folk medicine. It is observed from both V.3 and V.4 that first choice of medicine for illiterate poor respondents is either allopathic or folk. Poor illiterate respondents either prefer allopathic or folk medicine. Very few respondents within this group prefer homeopathic or other system of medicine. Good numbers of respondents who are literate poor and lower middle class prefer folk medicine. Homeopathic medicine is preferred as a second choice by some

respondents within this group. Majority of educated middle class respondents first prefer allopathic medicine and their second preference is homeopathy. However a good number of respondents within this group prefer folk medicine as second choice.

Conclusion: Culture plays an important role in numerous ways in determining health of Patni in Cachar district of Assam. Traditional belief and value determines their perception of health and illness vis-à-vis their choice for system of medicine. Belief on supernatural forces, ghost and magical activities still prevail among them. They prefer folk medicine and folk healers not only due to their economic backwardness but due to cultural backwardness too. Education plays important role in changing people's traditional world view. This fact is true in case of Patni. Majority of educated middle class do not hold traditional belief and value as like as illiterate and little literate Patni. Scientific belief is developed among educated patni and they keep faith upon modern scientific system of medicine. However, for rural illiterate Patni folk medicine and folk healers play important role. Folk healers help to overcome their psychological crisis due to their deep rooted belief on magic, sorcery and witchcraft.