

Chapter IV

HEALTH SEEKING BEHAVIOUR

In this chapter an attempt has been made to discuss the health seeking behaviour of people in general as well as sufferers of hepatitis and gall bladder stone in particular. Each and every society is at liberty to define illness in its own way. It evolves the system of treatment and medicine. It also patterns the illness behaviour as well as coping strategies. At the very outset a brief account on health seeking behavior is given followed by general discussion on health seeking behaviour in Barak Valley. Period of suffering is also a variable of health seeking behavior and hence an account of the period of suffering of hepatitis and gall bladder stone respondents have been given followed by health seeking behaviour of the respondents.

Health seeking behaviour is the action and practices undertaken by individuals to be healthy and remain safe from the occurrence of both communicable and chronic diseases. That in turn implicates the ways of living that promote a sound health and mind of an individual. Growing importance of studying health seeking behaviour in the field of medical sociology is owing to the fact of life that health oriented behaviour does not pertain only to curative aspects rather it also entails the preventive action undertaken by the agent to be healthy. As Kassl and Cobb defines “The activity undertaken by a person who believes himself or her self to be healthy for the purpose of preventing health problems. while illness behaviour is the activity undertaken by a person who feels ill for the purpose of defining that illness and seeking relief from it”(Kassl and Cobb,1966 :19-38). And in this way health has been distinguished from illness.

Health seeking behaviour has two facets: health life style that includes seeking the help of health care from medicos or other non formal medicos, that is, from healer, and the practices like doing exercise, playing games, rest and relaxation and so on. Healthy life styles as well as healthy practices are influenced by society at large, yet they are not free from the influence of an individual's socio-economic status, age, ethnicity peer group, religion and above all family which plays a key role to promote healthy practices and healthy life style.

Health oriented behaviour is an important component in the societies of west. It is reported by World Health Organization (1986) that significant improvement in the health in nineteenth century brought about by “engineering method”—the building of safe water supplies and sewers and the production of cheap food for urban areas through the use of mechanized agriculture and the method continue to improve the health of people in under developed world. The first six decades of twentieth century is identified by WHO as “medical era” and the remaining four decades as “post medical era.” In the “medical era” *prima-facie* was given on mass vaccination along side extensive use of antibodies to combat infection while in “post medical era” primary thrust of policy maker is to provide better medical care. WHO proclaims that advanced societies are marching ahead towards post-medical era and that exhibit physical well being as largely undermined by the social and environmental variables. The social and environmental factors include certain types of individual behaviour such as smoking over eating and so on, failures of social organisation and economic factors like poverty and the physical environment, that is pollution, (WHO;1986C:117).

Cawford put forward three causes that push the societies to switching over towards healthy life style of physical well being: firstly, pattern of disease has

turned from infectious to chronic that have no curative aspects, secondly numerous health disorders such as AIDS, lung cancer and so on are caused by life styles of individual, thirdly there has been an increasing stress to change lifestyle and focus on individuals' responsibility towards health by mass media as well as the people of health care provider (Cawford, 1984)

It is seen that attaining good health has become an embedded part of the culture that plays a pivotal role in the early nineteenth century in west. As Green observes "amongst the Protestant Ethics under the influence of religious doctrine healthy practices concerning good health are practiced across all classes as it was believed that Christ may likely to reappear with the advancement of mankind and good health was one of the objectives of human advancement" (Green, 1986:10). Good health – avoidance of disease, debility and 'premature' death, thus, took an extra - ordinary importance states Green. He further observed that healthy practice is performed to attain good health under the influence of patriotism and beauty are key to success in business and war and for upward social mobility (Green; 1986). Thus when health seeking behavior is discussed from Weber's perspective of class and status, party good health has become an object but when it is visualized from the cultural-holistic point of view. Good health has its subjective meaning. And when good health is a subjective and cut across society, it can analyze from the Durkheim's theory of social fact. Healthy practices are a bundle of "social facts" and external to an individual that can not be avoided when good health is to be maintained in order to reach to any broader objective.

Although good health is being attained under the influence of religious and other values of patriotism, business and beauty, and patriotism was prevailed in traditional society; but good health it self has become a social values of modern

society. As studies of Cawford (1984) implicate that individual self control and improvement of quality of life has become an integral part of culture and has spread across all social boundaries in the countries of USA, Germany and Denmark.¹

Hence a sketch on how illness is defined, illness behaviour is taken for granted, what type of treatment they seek and why that system is sought, who takes decision for treatment in Barak Valley have been drawn. Proper sleeping, avoidance of day sleep, doing regular physical exercise, playing games and domestic work are also considered as healthy practices. Taking help of professional doctors, frequency of consulting doctors, motivations or intention of treatment are all different facets of health seeking behaviour of any disease. And will be studied in context of health seeking behavior of people in general and hepatitis and gall bladder stone respondents in particular in Barak valley.

In Barak Valley, disease as well illness is seen as interface of natural and supernatural elements. On the basis of which curative and preventive aspects of disease and sickness also exist in combination with natural and supernatural activities. Natural causes are attributed to modernity while super natural explanation of disease is carrying out the traditional artifacts of society. Because, every simple society has tendency to provide a supernatural explanation of illness because medical cultural pattern are not identical rather they are integrated in to a complex network of beliefs and values that are embedded as part of culture of any society. In simple societies people express super natural explanation of agriculture, politics, war and the activities of daily living including disease as well as illness because people's mastery over the nature is limited. When there is no way to

¹. Cultural influence on medical beliefs and practices is seen among the Spanish Americans in South Western United States (Crockerham;1994.)

explain the natural and physical world mankind has no option left with but to provide a supernatural explanation of these events. In this regard Malinowski (1948) has pointed out, these magical and religious explanation tend to supplant naturalistic and scientific phenomena preciously in the most unpredictable and scientific areas of life where events are most unpredictable and least amenable to control, where fate plays a key role and to achieve goal is not at the hand of human will rather on the fate of it. Thus, in Barak Valley the diseases which are the attributes of pre-literate society have been providing supernatural explanation while many diseases seem to be the product of growth of medical science and are incapable of providing any supernatural explanation and hence regarded as natural and physical phenomena. In the midst of these, there are categories which are believed to have supernatural phenomena in traditional society and integrated with the cultural whole of the society but the impact of modernization, growth and development of health care services have been able to make people understand that these are purely physical phenomena and the treatment of which lies on both physical factors and magical practices. Since treatments of such type of diseases are integrated in to cultural complex of society, people can not depart from the activities which are embedded as part of their cultural values. And hence these phenomena are often deal with from the point of view of both physical forces and cultural elements.

Heat, cold, wrong combination of food and impure blood are some of the popularly recognized natural causes of disease in Barak Valley. Supernatural causes include (i) disease caused by breach of taboo, (ii) evil eye, (iii) spirit intrusion, (iv)wrath of God and Goddess, and (v) ghost intrusion. On the basis of peoples' perception of diseases may be further classified in to: (i) natural cause and

supernatural curative activity, (ii) both cause and remedies as supernatural, and (iii) both cause and curative aspect as natural. Certain disease are assumed to be caused by natural phenomena cure that are depended upon supernatural aspect while both cause and curative aspects of certain disease are attributed to purely supernatural and there are certain diseases the cause and remedies of that are attributed to be purely natural.

The diseases which are regarded as natural causation but lay on supernatural aspects for treatment. These diseases are fever, measles, malaria, headache, asthma, piles and jaundice too.

Natural cause super natural treatment:

Fever:

In case of fever as well as cough and cold, generally health care is given by the knowledge of the community. Home treatments are given for remedy by people and people are not expected to deviate from normal duty much. This process will continue for three or four days. Even after three or four days if disease is not cured people approach a healer or formal institute of health care subject to the accessibility of formal health care centre as well as economic condition and educational status of the people. This attitudinal aspect further varies in terms of age because in case of occurrences of disease those who are young male they feel reluctant to go to doctor and take medicine from pharmacy because some of the common medicines are known to people.

Measles:

Since measles break out during the month of March-April, it is conceived as caused by natural phenomena occurred during that particular season. The disease is generally recognized by the elderly members of the family. In order to prevent measles people are habituated to take preventive measures from the

cultural perception of the community. It is believed that no treatment can be useful in small pox as well as chicken pox rather use of drug may be harmful. Small twig of *neem* tree is cut and the leaves are gently moved up and down on the body of the patient so as to ease the itching sensation. One of the essential part of health seeking behaviour for measles is all the family members including patient have to take vegetarian diet for three days. On the fourth day patient has to take bath with *neem* leaves and can take non-vegetarian food.

Malaria:

Malaria, a kind of fever is believed to have been caused naturally. Without the help of formal institute of health care practices the disease is not diagnosed. It is believed that malaria is cured with the help of root of a tree. Priority is given on to clad talisman made of that root than to take medicine.

Headache:

There are different causes of headache. Headache may be due to cough and cold, sinusitis, migraine and so on. Acidity also causes headache. Of all the types of headache, migraine is the most acute followed by sinus. Since headache is not regarded as a disease in cultural arena of Barak Valley, people in general have not heard about migraine also. Instead of resorting to doctor for migraine and sinusitis that caused headache, talisman made of root is used to get relieve from headache.

Asthama:

Asthama, a chronic disease generally does not get cured for ever. As regards the causes of the disease, there is neither any superstition nor any known fact. But since this chronic disease does not get cured for ever and reoccurs frequently, the people lost confidence on allopathic treatment. Instead, seek help

from healer who gives talisman, advised to offer *puja* to Mahadeva, Kali and other deities in order to get relief of the agony of asthma.

Piles:

Like asthma piles is also a chronic disease which is not cured forever except surgery. Since the days of pre-modern society people are accustomed to use herbal medicine and talisman to get relive from the piles. Besides, there is also a belief that wearing ring in the ring finger made of silver would help in getting relief from the problem of piles. The silver ring is designed as two and half round. It is observed that in people's perception prawn is harmful for piles and hence prawn is prohibited item of consumption for the patient of piles. Regarding the causal aspects of piles, there is no superstitious belief. But as regards to curative aspect, it is the concern of people to rely upon more on herbal medicine and talisman methods than on allopathic medicines.

Both supernatural cause and remedies:

Diseases like pox, mental disorder, leprosy, pain and so on are seen purely as supernatural phenomena, and the curative aspects of these are based on supernatural activities.

Pox:

Pox is conceived more dangerous than measles. One of the peculiarities of pox is that educated and uneducated people from all sections of the society would regard pox as wrath of goddess Shitala, though it is known to them that this fatal disease is likely to occur during the dry season of March-April. In the perception of people of Barak Valley, pox is such a dangerous disease that people are reluctant even to utter its name. In order to prevent pox, people take the preventive measures which are within the purview of knowledge of the community and seek help of

healers. In Bengalese culture, healing practice of pox is ascribed to a particular sub-caste called Acharjee who are defied and obeyed implicitly in seeking the treatment. During the days of sickness the patient is kept isolated in a separate room and is advised to take non-vegetarian food for 21 days.

Pain:

Any kind of pain especially chest pain, waist pain, back pain that are too anguish to tolerate are considered as the evil deeds of sorcery. The common practice is to perform all types of black magical activity to get relieve from these.

Leprosy:

All kinds of superstitions and prejudices are associated with the occurrence of leprosy. Leprosy is believed to the consequential suffering of evil deeds in the past life. Leprosy patients are seen subjects of hatred in the society. They are the victims of social ostracism. There is no remedial measure of the disease at the community level.

Mental disorder:

It is a common belief that mental disorder is the misshapeness' resulted due to anger of god, evil air, sorcery or witch craft or black magical activities by an enemy or ghost intrusion. Concept of ghost intrusion is associated with transmigration of soul in Hindu thought. It is coupled with *karma*, the inexorable law which made each birth depending upon previous deeds (Fern, 1954:792). The people of Barak Valley believe that there are occasions when a soul may not be transformed in to another body. It is commonly held that the soul of a person who dies in any accidental cause may become ghost and hover around home. An individual who roams around the areas that are haunted by the ghost are likely to be attacked by that soul or ghost. The symptom of ghost intrusion include

exhibition of all kinds of abnormal behaviour. Psychosomatic illness or mental disorders are also seen as the result of evil spirit and black magical activities. Instead of seeking help formal health care providers, the normal practice is to resort to healers who give chanting water, talisman and all other supernatural objects worn or put on the body of the patient.

Menstruation disorder:

Heavy period, irregularities in the period and abdominal pains are some of the common problems related to menstruation. All these problems related to menstruations are conceived as results of the attacks of evil spirits. Evil spirit is a kind of invisible power which is wandering with air. Girls, especially unmarried teenagers, are at the high risk to come in contact with such type of air during the days of menstruation. Affected persons prefer treatment as per this cultural knowledge and seek remedy from healers. Healers provide chanting water to drink or talisman made of root of a tree clad in a cloth to be put on the body. In order to prevent these problems girls are discouraged to come out side the home during these days. They are instructed to keep their napkin in a safe place.

Miscarriage:

Just as menstruation problem is considered as the unhappy event owing to evil spirit; miscarriages in many cases are also thought to be taken for granted as a consequential attack of evil spirits. In order to avoid miscarriage pregnant women are not allowed to go out side the home alone; they are also subject to restriction of going here and there in certain areas, at certain time and days.

Stomach upset or other disease of child:

One of the interesting and widely accepted assumptions is related to the health and disease is the effect of evil eye. Certain individuals are ill reputed for

mastery over sinister looking. Children are considered to be as most susceptible to the evil eye of such person. It is believed that with the look of such individuals or if they utter the sentences by looking at the child: "The child is very beautiful, how healthy the child is" the child will immediately fall sick. It may affect on health of child . The child may possibly look sickly for natural cause which may not be detected and evil eye of such individuals is regarded as consequence misshapenness of these unhappy events. Again in many cases children are reluctant to take milk or any other food items, such phenomena are also taken for granted as owing to sinister look while the child was being fed.

It is commonly held that in case of such happenings the child is taken to the exorcists who perform some blowing and whiffing (*jar pook*) which is considered to be the sole remedy for such affliction. Process of blowing and whiffing follow multiple methods of healing. People in general use water, salt, milk or oil for certain performances. Water and salt are widely used. A little of water is taken in the palm and the exorcists blows over this. A little bit of water is taken on the palm and sprinkle over the face of the patient and the rest is given to drink.

Even adult are susceptible to evil eye. But in case of adult it is connected with food only. A person may be victim of evil eye in case he or she is seen by other person who is greedy or ill-fed. The symptom may have puzzling affect causing indigestions, vomiting and diarrhoea. In this case too exorcism is believed to be the only remedial measure and the patients have to approach the exorcists. One of the important aspect on which both exorcism and modern medicine converge with each other is that as in sophisticated modern treatment the patient must take a number of doses of medicine and have to pay several visits to physician, in case of exorcism also the patient is subjected to take a number of

doses of such element given by the healer and have to pay visits to the exorcist or healer several times.

In order to avoid the problem posed by evil eye, certain preventive measures are undertaken. Since children are at high risk, a black spot is always given on the forehead of the child. It is believed that black spot will mar the beauty of the child and its beauty can not be judged hence the child will remain saved from the attack of evil eye. There is one more interesting way to avoid the menace of evil eye; whiffing with certain incantations at the face of the affected child will ward off the evil eye. Further, two more measures are taken to prevent the problem of evil eye; first, the child is not fed in the presence of any other person. Second, throwing a bit of food before one starts feeding, because it is believed that even animals specially cat, dog, crow may watch and spoil the food with their evil eye.

There are superstitious ideas of disease causation and curative aspects of supernatural beliefs that in fact do not exhaust the whole range of ideas. Experience of life, the impact of education and the spread of modernization have taught them to attribute to physical or natural causes to a number of maladies. Moreover in congruence with other parts of India touches of modernization in the realm of health sectors have been initiated after independence through state interventionist policy. Modernization in the health sector has illuminated the way of treatment with new technology and aid. The galloping pace of modernity has brought revolution in the demographic profile and life of the people by interfering in the mortality rate. In traditional society, many people die owing to undiagnosed chronic diseases. The diseases which are diagnosed by the modern system of health care are not compatible with the cultural concept of cause and symptom and hence accepted as product of physical or natural forces. The diseases which are diagnosed

of late like gallbladder stone, gastritis, appendicitis, cancer, and problems of eyes, ear as well as others are considered as purely natural. The cause and curative aspects of these are not in any way attributed to supernatural phenomena.

Folk concepts of physical origin of disease in many cases did not correspond with the etiology of disease as understood by medical scientist. Saunders (1954:148) has used the term “empirical” to include all the known external factors that operate directly upon the organisms to produce illness. Some of the popularly recognized empirical causes are discussed below:

(a) The affect of weather:

Common cold and fevers are regarded as the causes owing to high humidity, low temperature or getting drenched in rain for a considerable period of time. Hot waves during June and July are responsible for an attack of viral fever and stroke among the elderly persons. Excessive chill in the month of December and January is responsible for exacerbating the occurrence of stroke. Excessive humidity in air affects the body and is considered to be responsible for ringworm although the role of fungus was not known. Skin disease of the child is also understood as common problem created by heat. Besides, cholera is also considered a disease related to weather during the dry season of March and April. During summer lemon juice with sugar and salt are given to reduce the body temperature. Unripe mango is burnt and taken with salt and sugar is another kind of beverages that people are accustomed to take to make the body cool. Besides, juice made of tamarind added with salt and sugar is also popular. This help in cooling and in compensating salt deficiency of the body caused by dehydration. In case of ring worm and skin disease bath is taken with *neem* leaves. If there is no improvement in patient's condition the patient is referred to the physician. The

patient is referred to healer or folk medicine practitioner in the village in case of delay in recovering with allopathic system of treatment.

(b) The effect of wrong food:

As already mentioned people have developed the concept of hot and cold food. Egg meat and milk are considered as hot foods. They have also developed the concept of oily (*boila*) food especially among the fish. Those fish which contain excess oil like *Puntius (puti)*, *Clarias Balracus (magur)*, *Wallagoalltu (bowal)*, *Myrtus Seexghala (ire)* and so on are considered as hot foods. Curd, butter milk, juice, all types of fruits except jack fruit and bitter items are taken for granted cold foods. The hot food is considered as harmful for health. Indigestion, gas, acidity and other problems that upset the stomach are considered as consequences of hot food. In order to avoid all these problems pertaining to hot food combination of eggs and meat or milk and egg or combination of all three are not suggested to take together. During the days of summer not a single item of hot food is taken. Fish in general are not harmful but those fish which are identified as oily are not given much to children or people in ailment.

(c) Blood getting impure:

Skin diseases are recognized to be caused by “blood getting impure” and hence treatment is sought to get pure blood. The leaf of *neem* is considered to be the most ideal element of remedy in this aspect. *Neem* leaf is used in several ways. First, mustard oil mixed with *neem* leaf is poured on the body. Secondly, most widely used practice is to boil *neem* and take bath with that water after adding some cold water. If the matter is prolonged the patient is referred to allopathic health provider. Other type of home treatment is making a paste with the ash obtained after burning bark of a tree and mixed with coconut oil and pasted on the

affected part of the body. All these types of treatment are suggested by the members of the community especially by the elder members who gain knowledge through the experiences of life.

(d) Accidents and natural calamities:

In case of a dislocated bone due to some accident, people usually prefer to adopt the practices of charming and incantation. There are a few people in each locality who know the practices of blowing and whiffing. The process of charming and incantation is a kind of message with the help of oil and salt being applied to the particular part of the body where the bone is dislocated. In case of major fracture the case is referred to allopathic treatment. But in Barak Valley indigenous method of treatment is also very popular for the treatment of bone fracture. There is a famous indigenous method of treatment known as *khandal* which has been claimed as an indigenous innovation for the treatment of bone fracture. It is believed that the treatment can set right the dislocated fractured bone without any surgical process. Seeking *khandal*'s treatment was prior to seek the treatment of allopathic medicine even two decades ago. During these days people irrespective of any social background were confident on the treatment of *khandal*. Of late, it has lost its popularity among the literate section of the society.

(e) Unknown cause:

There are many diseases whose causes are not known to the traditional wisdom. It is believed that many diseases are not detected by allopathic medicine either because of patient's inability to carry out the expenditure of modern sophisticated diagnosis or there may not be any disease or it may be psychosomatic. These diseases are treated by healer although it is not known to them also; though the disease will not be cured healers do some performance to

satisfy their clients. Lists of diseases and causative factors as identified by people are given below.

TABLE: 4.1. CAUSE AND CURE OF DISEASE ARE RECOGNIZED IN THE VALLEY .

Sl. No	Disease	Cause recognized	Treatment sought
1	Fever	Natural	Supernatural and formal health care as well as home remedy.
2.	Measles	Natural or seasonal	Supernatural as well as home remedy.
3	Jaundice	Natural	Supernatural as well as home remedy.
4.	Malaria	Natural.	Supernatural.
5.	Headache	Natural.	Home remedy and supernatural.
6.	Asthma	Supernatural.	Supernatural.
7.	Piles	Supernatural.	Supernatural.
8.	Pox	Supernatural.	Supernatural.
9.	Pain	Supernatural.	Supernatural.
10.	Leprosy	Supernatural.	Supernatural.
11.	Mental disorder	Supernatural.	Supernatural.
12.	Menstruation disorder	Supernatural.	Supernatural.
13.	Miscarriage	Supernatural.	Supernatural
14.	Stomach upset of child	Supernatural.	Supernatural
15.	Gallbladder stone.	Natural.	Natural.
16.	Gastritis,	Natural.	Natural.
17.	Appendicitis,	Natural.	Natural.
18.	Cancer,	Natural.	Natural.
19.	Problem of eye, ear	Natural.	Natural
20	Tuberculosis etc.	Natural.	Natural

With this general background of health seeking behavior in the valley, let us proceed towards health seeking behavior of people who are living with hepatitis and gall bladder stone. The period of suffering is also a part of health seeking behavior. In many cases it is seen that people have been suffering from jaundice for more than a year. Around half of the respondents, both males and females have been suffering from jaundice for more than one year. It is learned from interaction with them that all most all of them first seek help from the healer and depend on

any kind of magic therapy to get relief from jaundice. Due to restrictions on food and rest, the jaundice appears to have gone but in fact the infection does not go but they may have some relief for the time being. As soon as people feel better they resume normal work and eat normal food. Then they fall sick again as they did not get rid off the infection totally. Then they think the jaundice has come back. As no option left, they seek help from allopathic health provider as a last resort. Mean while so much time has been lapsed causing miserable condition to the patient.

Problem of reoccurrence of jaundice is also an indication of poor health seeking behavior. And it is seen from the Table 4.2, there are significant number of cases of reoccurrence of jaundice. Across the gender females are slightly more than males in this aspect.

TABLE: 4.2 FREQUENCIES OF ATTACK JAUNDICE AND THE RESPONDENTS.

(Percentage in parenthesis)

Attacking of jaundice	SEX		Total
	Male	Female	
First time	54(52.4)	49(47.6)	103 (100.0)
Not first time	26(45.61)	31 (54.39)	57 (100.0)
Total	80 (50.0)	80 (50.0)	160 (100.0)

During the time of data collection it is found that there are only two respondents who have already suffered been suffered from the problem of gallbladder stone also. And both of them are equally distributed across the gender . Among those respondents who have already been suffered earlier, most of them have suffered by it at least 2 years before. Across the gender female respondents are slightly more than the males amongst those who have suffered previously.

TABLE:4.3. SUFFERED FROM JAUNDICE EARLIER AND SEX OF RESPONDENTS.

(Percentage in parenthesis)

Last suffering by jaundice	SEX		Total
	Male	Female	
1 year before	7(70.0)	3(30.0)	10 (100.0)
2 year before	15(68.1)	7 (31.9)	22 (100.0)
More than 2 year before	9 (36.0)	16(64.0)	25 (100.0)
Does not arise	49 (47.57)	54 (52.43)	103 (100.0)
Total	80 (50.0)	80 (50.0)	100 (100.0)

It has been found that some respondents who initially received homoeopathy treatment have resorted to allopathic treatment when jaundice reoccurred. Similarly it has been observed that those who had taken treatment from healers also now sought help from allopathic doctors. Hence though it is observed by general common masses that healers' treatment is most popular for jaundice, in reality majority do not get well with healers' treatment.

TABLE:4.4. SEEKING TREATMENT AND SEX OF RESPONDENTS.

(Percentage in parenthesis)

Last suffering by jaundice	SEX		Total
	Male	Female	
Allopathic	7(70.0)	3(30.0)	10 (100.0)
Homoeopathy	3 (37.5)	5 (62.5)	8 (100.0)
Indigenous	11(64.70)	6 (35.29)	17 (100.0)
Both allopathic and indigenous	10(45.45)	12 (54.55)	22(100.0)
Does not arise	49 (47.57)	54 (53.43)	103 (100.0)
Total	80 (50.0)	80 (50.0)	160 (100.0)

Gallbladder stone:

As table 4.5 reveals almost all the respondents have been living with gallbladder stone for minimum of 6 months. When symptoms of gas and acidity appears people in general do not pay any attention to the issues and do not seek the help of doctors. It is because these problems do not stop them from normal functioning. In case of acute stomach pain they consult a doctor. Even the decision

of operation is taken seldom immediately after the diagnosis of disease. To avoid operation they seek the help of the homoeopathic treatment. And in many cases poverty is also a factor to delay treatment. For women both the patient herself and her family members wait for some time when there will be least interference in the domestic work assigned to her. Since she will not be able to do the domestic work, she wants to undergo operation when she is relatively free.

TABLE:4.5. PERIOD OF SUFFERING AND SEX OF GALL BLADDER STONE RESPONDENTS .

(Percentage in parenthesis)

Period of suffering	SEX		Total
	Male	Female	
Since 6 month	1(20.0)	4 (80.0)	5 (100.0)
Since 1 Year	-----	2 (100.0)	2 (100.0)
More than 1 year	61 (48.8)	64 (51.2)	125 (100.0)
Does not arise	18 (64.3)	10 (35.7)	28 (100.0)
Total	80 (50.0)	80(100.0)	160 (100.0)

As all the gallbladder stone respondents are interviewed from different hospitals it is found that except a few all of them have got admitted for operation. Those who have replied “no” to surgery, they are admitted in the hospital because of acute stomach pain and the disease has diagnosed as gall bladder stone. They may undergo operation later on. The patients who have undergone operation just they are unable to respond. The patient who are chosen for interview are either operated three days before or they are just got admitted on that day and will go for surgery in the next day (See Table 4.6 and Table 4.7).

TABLE:4.6 OPERATION OF GALL BLADDER STONE AND SEX OF RESPONDENTS.

(Percentage in parenthesis)

Status of operation	SEX		Total
	Male	Female	
Undergone	49(59.8)	33(40.2)	82 (100.0)
Not yet	4(50.0)	4 (50.0)	8 (100.0)
Will be undergoing	26 (38.2)	42 (61.8)	68 (100.0)
Does not arise	1 (50.0)	1 (50.0)	2 (100.0)
Total	80 (50.0)	80(100.0)	160 (100.0)

TABLE:4.7 TIME OF GALL BLADDER STONE OPERATION OF GALL BLADDER STONE AND SEX OF RESPONDENTS
(Percentage in parenthesis)

When operation	SEX		Total
	Male	Female	
Will be tomorrow	27(55.1)	22(44.9)	49 (100.0)
3 days before	33(40.7)	48(59.3)	81(100.0)
Does not arise	20(66.7)	10(33.3)	30 (100.0)
Total	80 (50.0)	80(100.0)	160 (100.0)

Recurrences of gall bladder stone is a menace found scarcely. During the time of data collection it is found that there are only 5 cases, 4 males and one female, for whom the stone reoccurred for the second time. All of them have suffered more than two years before (See Table 4.7).

TABLE:4.8. FREQUENCY OF OCCURRING GALL BLADDER STONE AND SEX OF RESPONDENTS.
(Percentage in parenthesis)

Gallbladder stone problem	SEX		Total
	Male	Female	
First time	76(49.0)	69(51.0)	155(100.0)
Not first time	4(80.0)	1(20.0)	5(100.0)
Total	80 (50.0)	80(100.0)	160 (100.0)

There are 17 respondents who suffered jaundice also, and in this respect the number of male is more. Thus, it reflects that males are more susceptible for the disease, probably because of their food, drinking, pan chewing habits etc.

TABLE:4.9. GALL BLADDER STONE AND JAUNDICE TOGETHER AND SEX OF GALLBLADDER STONE RESPONDENTS.
(Percentage in parenthesis)

Earlier suffering	SEX		Total
	Male	Female	
Jaundice	10(58.8)	7(41.2)	17(100.0)
No Jaundice	70(49.3)	72(50.7)	142(100.0)
Does not arise	-----	1 (100.0)	1 (100.0)
Total	80 (50.0)	80(100.0)	160 (100.0)

Health Seeking:

It is realized from the interaction with the hepatitis respondents that the symptoms of jaundice appear slowly and gradually. At the very beginning they feel a kind of uneasiness which could not be disclosed to any body because these are not in the purview of the definition of illness. Gradually symptom of nausea, tendency of vomiting and a kind of weakness are started to develop. When someone falls sick the first step is to diagnose and seek treatment at familial level. At familial level all home remedies which are part of culture of the community are tried. If symptoms persist and they go beyond the familial level and the advice of relatives or close friends in the community is sought by the sick individual or his family members. Informal health care within the framework of culture in folk ways of people in general have been provided by the community centre around the ego. If the advice is not prove to be affective or the symptom get worse or new symptoms develop the sick individual is referred to medical practitioners. In our country three types of medical practitioners are resorted in the form of healer or religious priest or practitioners of formal health care. The treatment of healer is regarded as non-scientific method based on primitive medicine as well as folk medicine. The folk medicines or ethnomedicines are constituted by a bundle of beliefs that are accepted and enforced into practice without any resistance or critical scrutiny or examination. A set of ideas and beliefs are associated with this primitive medicine. Folk medicines on the other hand are peoples' way of treatment or medicine of people. One of the attribute of primitive medicine is an association of supernatural agencies and their interventions in the lives of people with the application of magic or sorcery. Magic is a part and parcel of life of people in traditional society. Regarding magic Malinowski wrote "Everything that

vitality affects the native is accompanied by magic. All economic activities have their magic; love welfare of babies, talents and crafts, beauty and agility-all can be fostered or frustrated by magic” (Malinowski, 1948). Magic is often accounted to be a cause of illness and not surprisingly, they are inseparably associated with treatment. Magic is functional for two reasons: (i) It gives relief from anxiety (ii) magical activities are very often result in to successful treatment because success of treatment lies on behavior of people. For instance the process of charming and incantation applicable to bone fracture is a kind of message in reality that will bring in to being the success of treatment and accounted as efficacy of magic. Primitive medicines are confined with the provinces of healer only. Folk medicines on the other hand are available to all members of the society. Folk medicines are based on the principle of medical believes and practices. Folk beliefs are part of the oral tradition passed on from parents to children, from older generations to the young; they thus develop the potent sanction of tradition.^{2*}

In case of jaundice or other diseases which are believed to have cure with the intervention of supernatural agencies and their activities, priority is given on to seek healers help; though it is subjected to peoples’ socio-economic and educational status. In case of failure of healers treatment institution of formal health care is resorted to. But even in that case also there exists an interface of both primitive medicine and scientific medicine because healers may change but belief on efficacy of supernatural practices can not be changed. In many cases disease like jaundice measles and many other diseases are often diagnosed by the medical practitioner of formal health care institute. The disease is diagnosed by the

^{2*} Macim Marriot has given an account of of the practice of medicine in Northern India in which sick individual after applying their knowledge of herbs, drugs and magical incantations, resort to their immediate family member or kinsfolk for advice and comfort.(Marriot)

professional health care agency. Once the disease is diagnosed, health seeking from both traditional and modern medical practices exists simultaneously. As soon as jaundice is diagnosed people seek the help of healer. Along with this, help from professional health care is also sought besides the home remedies. Regarding the treatment given by the healer, there is a firm belief of people in general including highly educated section believes that jaundice is cured only with the treatment of healer. In many cases jaundice is being diagnosed by the member of the community it self and for seeking treatment they resort to healer. But in case of higher intensity of billirubin in the blood it can't be cured rather the agony is intensified and the help of professional health care provider is requires.³

The problems of gallbladder stone are more severe than the jaundice and it is diagnosed within short span of time. In most of the cases gallbladder is diagnosed due to acute stomach pain which forcibly lead people to seek the help of professional health care. There are many cases where the patient was suffering from gas and acidity for the last two years but no attention has been paid since gas and acidity is not considered as illness. Social solidarity and integrity is observed from the activities of community members who provide physical and moral support to the sick individual.

In reply to the question “whom do you first consult” more than half of the respondents have replied “allopathic doctor”. About forty percent of them have preferred indigenou healing method of treatment or and only a little more than fifteen percent of them have consulted homoeopathic medicine.

It is seen from Table 4.9 that allopathic treatment is mostly sought by respondents irrespective of their education. The data reveal that indigenou method

³ Suchman has pointed out that parochial persons are bounded by close personal and ethnic ties and kinship groups are less knowledgeable and reluctant to seek professional health care (Suchman, 1964).

of treatment is most popular among the illiterate group of people, not even forty percent of them prefer allopathic medicine; though the use of homoeopathic medicine is least popular the number is not negligible. Although highest numbers of educated respondents use allopathic medicine first the popularity of both homoeopathic and indigenous medicine are not at all less among the educated respondents. As the data highlights more than a tenth of the respondents consult homoeopathy physician and around forty percent of the educated people prefer to consult indigenous medicine first.

TABLE : 4.10. HEPATITIS RESPONDENTS AND FIRST CONSULT FOR TREATMENT BY EDUCATION.

SL.NO	First Consult For Treatment				Total (Percentage in Parenthesis)
	Family Education	Allopathic	Homoeopathy	Indigenous method if treatment	
1.	Illiterate	5 (37.5)	2 (12.5)	9(56.5)	16 (100.0)
2.	Primary to HSSLC	57 (53.27)	10 (9.34)	40 (37.38)	107 (100.0)
3.	Graduate and more	17 (58.62)	2 (6.89)	10 (34.48)	29 (100.0)
4.	Technical	5 (62.5)	3 (37.5)	-----	8 (100.0)
5.	Total	84 (52.5)	17 (10.62)	59 (36.9)	160 (100.0)

The three different types of treatments are examined in terms of costs so as to find if income determines the type of treatment that one would seek. As allopathic medicine is costly, one may presume that poor victims approach homoeopathic doctor. But the data reveal that the respondent whose monthly family income is less than Rupees 5,000 also appears to have consulted allopathic treatment. The respondents of the same, more than a tenth of them consulted homoeopathy and more than a forty percent of them have resorted to indigenous treatment. More than 50 percent of the respondents who have monthly family income of Rs. 5,000 to Rs.15000 resorted to allopathic treatment, over a third of them resorted to indigenous medicine. And the respondents whose monthly family income is above Rs10000 a large segment of them and the respondents whose

monthly family income is more than ten thousand, more than a tenth of them resorted to homoeopathy medicine. Only 2 respondents who have monthly family income more than Rs 15,000, one each of them have resorted to allopathic and homoeopathy type of treatment.

TABLE : 4.10. HEPATITIS RESPONDENTS AND FIRST CONSULTATION FOR TREATMENT BY FAMILY INCOME.

SL.NO	Family Income	First Consult For Treatment			Total (Percentage in Parenthesis)
		Allopathic	Homocopathy	Indigenous method of treatment	
1.	Up to 5000	41 (47.7)	10 (11.7)	35(40.7)	86 (100.0)
2.	>5000-10000	29 (52.8)	6 (10.90)	20 (36.36)	55 (100.0)
3.	>10,000-15000	13 (76.5)	-----	4 (11.8)	17 (100.0)
4.	>15,000	1 (50.0)	1 (50.0)	-----	2 (100.0)
	Total	84 (52.5)	17 (10.62)	59 (36.9)	160 (100.0)

The discussion with the respondents reveals that those who have consulted either allopathic or homocopathy doctor or indigenous healer, a large segment of them are satisfied with the treatment. As consultation takes place on repeated intervals, attempt has been made to study the pattern of satisfaction at least on two times as shown in the following Table. The satisfaction level of the treatment is analyzed.^{4c}

TABLE 4.11 : HEPATITIS RESPONDENTS BY FIRST TIME CONSULT FOR TREATMENT AND SATISFIED WITH THE TREATMENT.

Sl. No	System of medicine	Consult for treatment		Total (Percentage in parenthesis)
		Yes	No	
1.	Allopathic	60(71.42)	24(28.58)	84 (52.5)
2.	Homoeopathy	7 (41.17)	10 (58.83)	17 (10.7)

^{4c} Lower class respondents seem to have ignored the symptom of the many diseases because many non-serious diseases are not given proper weight because of economic deficiency. While upper class respondents seem to have some scientific understanding regarding symptom and disease causation.

3.	Indigenous method of treatment	45(76.27)	14(23.73)	59 (36.9)
4.	Total	112(70.0)	48(30.0)	160 (100.0)

It is seen from the Table 4.13 respondents who have sought allopathic treatment for the first time a significant number of them are reported not satisfied with the treatment. Out of 17 respondents who have sought homoeopathy only 7 of them are satisfied with the treatment. But those who have gone for indigenous treatment 45 out of 59 of them are satisfied with the treatment.

TABLE 4.13 : HEPATITIS RESPONDENTS AND REASON FOR NOT SATISFIED WITH THE TREATMENT.

(Percentage in parenthesis)

SL. No	Consult for treatment	Reason for Not Satisfied With the Treatment			Total
		Can't cure	Time taking	Costly	
1.	Allopathic	12 (50.0)	4 (16.66)	8 (33.33)	24(100.0)
2.	Homoeopathy	4(40.0)	6(60.0)	-----	10(100.0)
3.	Indigenous method of treatment \ Omani	14(100.0)	-----	-----	14(100.0)
4.	Total	30 (62.5)	10(20.83)	8 (16.17)	48 (100.0)

The reason for being not satisfied with the treatment in case of allopathic treatment is that it was a costly treatment. Of all the respondents who are not satisfied with homoeopathy treatment the reason being that they felt either it can not cured or it takes time. Respondents who are not satisfied with the indigenous treatment have asserted that it can not cure. Surprisingly, it is found that the respondents who are not satisfied with the allopathic treatment half of them believe that it cant not cure, a few of them express their dissatisfaction because it is time taking while those who cant not afford are representatives of economically downtrodden people.

In case of second time, a large number of the respondents consulted allopathic doctor. It means that those who are dissatisfied with the homoeopathic or allopathic treatment consulted the allopathic doctor in the second round. Thus.

the respondents strongly believe that allopathic treatment is the best treatment for hepatitis. However, the respondents who are not satisfied with allopathic treatment do not provide complete care; consult indigenous method of treatment or an interface health care provider. The manner of indigenous method of treatment or interface health care provider gives treatment has been described in chapter II.

It has been found that people do not generally consult a doctor for check up of high blood pressure or diseases like fever, cold and cough. People generally do not give any importance to such ailments. Decision making is an important element in health seeking behavior of people. Suchman's model on decision making gives an account of the decision making process. Decision making often depends on length of time, the time at which symptom are experienced and the particular interpretation of meaning. The following Table provides the details of peoples' behaviour towards consulting system of medicine in Barak Valley.⁵

TABLE 4.14: WHY DO PEOPLE PREFER ALLOPATHIC TREATMENT BY HEPATITIS RESPONDENTS.

Sl. No	Reason for preferring allopathic	Percentage
1.	I believe in allopathic	52.5
2.	Other can not cure	27.5
3.	Disease was acute	15.0
4.	Guardian take decision	5.0
5.	Other	-----

Gall Bladder Stone:

Table 4.15 gives the details of the reason for preferring allopathic medicines. It is seen that more than a half of the respondents have replied that they believe in allopathic treatment, less than a third of them have replied that other system of treatment can not cure hepatitis. Almost half of them have replied that

⁵ In rural society of Northern India, people often depended upon the advice of the neighbors, relatives, fellow caste men, and village elders, and sometimes advice from several individuals might be entertained simultaneously.

the disease was too acute to have any option left with them other than allopathic treatment and a few of them have replied that there is no personal preference but as guardian have taken decision to resort to allopathic treatment.

TABLE 4.15: GALL STONE RESPONDENTS AND FIRST CONSULTATION FOR TREATMENT.

SL.NO	First consult for treatment	Percentage
1.	Allopathic	83.4
2.	Homoeopathy	15.0
3.	Ayurvedic	0.6
4.	Caviar	1.9

Data shows the consultation of the respondents for the first time for treatment of gall of bladder stone. The data reveals that first allopathic physicians are preferred for treatment of gallbladder stone formation. Quite a significant number of them have resorted to homoeopathy treatment also. Although a few of them resorted to indigenous method of treatment. Out of those who consulted the physician for the first time only 15.6 percent are not satisfied. Out of 134 respondents 115 (85.4 percent) are satisfied with the allopathic treatment. But only 4 respondents were satisfied with homoeopathy treatment. None has reported satisfaction with other treatment.

Those respondents (19 out of 134) who have consulted for allopathic treatment and they are not satisfied with the treatment 3 respondents have stated that allopathic treatment can not cure and remaining 16 have asserted that it is costly. But in case of other systems of treatment almost all of them have argued that disease is not cured. Only 4 respondents who have consulted homoeopath have replied that it is time taking and that is why they were not satisfied.

TABLE : 4.15. GALL STONE RESPONDENTS AND NEXT TIME PREFER TO CONSULT FOR TREATMENT.

SL.NO	First consult for treatment	Percentage
1.	Allopathic	95.1
2.	Homoeopathy	4.5
3.	Ayurved	-----
4	Kaviraj/Unani	0.4

Almost all the respondents (95.1 percent) favour allopathic treatment if the problem is going to reoccur to them or occur to any other family members. About 5 percent of them are in favor of homeopathy treatment and a few of them prefer indigenous treatment. It has been found that 46 percent of the respondents take generally allopathic treatment which means that at least half of others take often take treatment from systems of medicine. But in this case 95 percent of the respondents have consulted allopath. This shift is given in the following Tables.

TABLE 4.16: WHY PEOPLE PREFER ALLELOPATHY BY HEPATITIS RESPONDENTS.

SL.NO	Reason for preferring allopathy	Percentage
1.	I believe in allopathic	38.8
2.	Other can not cure	35.6
3.	Disease was acute	20.0
4.	Guardian take decision	5.6
5.	Other	-----

The dominant reason for preferring allopathic system of medicine is their belief and the belief that other sources can not cure the ailment. It is believed that for acute cases of allopathic treatment is the best as other systems of medicines, homoeopathic and indigenous method of treatment takes more time, and meanwhile the disease may go out of control.

Physical exercise or playing games are also part of health seeking behavior. Physical exercise plays a key role in preventing many diseases. In India physical exercise was a part of ritual activities of sages or *Munis Rhrishis*. It is also a teaching recorded in Rigveda to remain one physically fit. It is seen from the Table

4.18 that although the practice of both physical exercise and games are not satisfactory yet the practice of exercise is more than the habit of playing game.

TABLE 4.18 : PHYSICAL EXERCISE AND RESPONDENTS.

SL.NO	Physical exercise	Hepatitis	Gallbladder stone
1.	Games	10.8	16.9
2.	Exercise	24.4	31.3
3.	No-activity	64.8	51.0

Indigenous Healing:

The analysis on health seeking behavior shows that about 10 percent of the hepatitis and 2 percent of the gallbladder stone victims have consulted the indigenous health practitioners or healers. As stated earlier healers are experts who know and perform magic related to health and disease. Each and every small scale society is attributed to have this type of healing activity. Healing practice is a cultural artifact of the society. People irrespective of any socio-economic status believe in magical practice. In general, healers are aged people, hail from lower socio-economic profile. Generally, it is assumed that the healing practice is attributed to rural areas only. But it is observed that there are good number of healers hailing from urban areas also and the practice is as popular as in rural areas. However, each and every village is well equipped with a healer or a group of healer. There are two types of healers: (i) those who perform the practice of magical activity in general and jaundice in particular and (ii) those who are specifically the healers of jaundice. Besides, there are many individuals in the society who are not recognized professionally as healers but know the practice of blowing and whiffing because of the experiences of life. The Muslim priest called *mullah* and *pir* also perform the healing practices for both Hindu and Muslims. However, whoever may be the healer, they claim that it is spiritual power which is

acquired and the healing is spiritual. In comparison to others *pir* are more spiritual in nature.

Barak Valley is more or less a rural society and yet it is equipped with basic infrastructure and other facilities like health care. There are only 46 primary health centers and 9 dispensaries in the Valley (See table 1.8chapter 1). Many people do not have access to professional health care centers even in the age of second decade of globalization. Moreover, because of illiteracy, ignorance, people are not aware of the duration and time and course of allopathic medicine. Even then they expect that patient should get well within one or two days if the help of professional health care is sought. Firm belief on healers pulls the masses towards healers to seek the treatment from them. Some healers use herbal medicines apart from magic.

In the context of treatment seeking behavior structural influence of culture cannot be ruled out. Individual's dependency on healer may be due to communication gap between the doctors and health seeker. Since there is a wide gap between medicos and the health seeker the nature of disease and treatment is not understood by the people. On the other hand healers are their "in group" as members of the society and as such interaction with the people properly in the language of culture. Moreover, in the mixed-economic political organization of India, there is inequitable distribution of resources to restore. Due to poverty, they cannot meet the expenditure of medical costs, doctors' fee and the cost of medicines. So far as jaundice is concerned, people irrespective of their socio-economic status believe in healing. People of lower socio-economic background seek the help of healer and follow the instruction of the healer more than the instructions of a professional physician. People who belong to upper socio-economic background follow the instruction of the healers but simultaneously they

also accept the advice of the professional health care provider. Thus, healers are considered as medium for benevolence of spirit by the society as a whole. The healers use the following processes for healing the jaundice patients.

Garland Method:

One healer uses garland for healing hepatitis. In this method the healer makes a garland (*mala*) from a creeper. As the plant was not available in the locality of his dwelling, his mother's sister sent the seeds of the plant from her native place. He grew the seeds of the plant and consequently the seeds were grown into seedling. He puts the garland on the head of the patient, its length starts to enhance and gradually it gets dropped from the head and descends to the neck and thus, takes the shape of a full garland. Healer gives the garland to patient preferably in the early morning, after taking bath. Garland may be received by somebody else on behalf of the patient who will put it on patient's head in case of the patient is seriously ill. Garland will keep on increasing till the germs of the jaundice remains in the body. Generally, it takes three to seven days to cure the disease. During the days of treatment patient has to remain "pure" and take vegetarian food. The healer claims that if the garland is put on the head of a person who does not suffer from jaundice it will never increase.

Oil Chating – Telpora Method:

Oil is to be kept in a bowl of brass metal. *Jhara* is a process of three days and pouring of oil continues till two weeks. During the days of oil pouring patient has to remain vegetarian and the diet should be free from oil and turmeric powder. The healer believes that turmeric powder is harmful for liver; it induces the intensity of the disease, as he believes that jaundice is a shadow of yellow colour around the liver. In this view avoidance of oily and spicy diet are the two food proscriptions.

Herbal (bharan) Method:

One healer gives *bharan*, a mixture of various non-herbal ingredients which is applied on the head of the patient in the form of paste. These ingredients are purchased from a shop in the local market. Generally it takes 7-15 days to cure the disease. Although except Thursday, *bharan* is given in all days, Saturday and Tuesday are considered as the best days.

Talisman Method:

The healer gives a talisman called *kabaj (maduli)* only on Saturday and Tuesday at 12 noon. This *maduli* has to be kept for 50 days, and after the completion of 50 days the patient has to worship Mahadev, Lord Shiva and then keep the talisman under *Tulasi* plant worshipped by Hindus which is planted outside the house. There is no restriction on diet except turmeric powder. The healer believes that the practice is due to the divine grace or power of Lord Shiva and the *kabaz* is given as the blessings of Lord *Shiv*.

Root of tree (jari) Method:

The healer gives a *jari*, root of a tree. the name of which remains undisclosed. It is tied with a *dhaga* (thread) and tied to the waist of the sick person. It will remain for long time even the whole life time also because he believes that jaundice cannot be cured; that is, once the germ of jaundice enters into the body it will remain forever. There is no rigidity on day and time of giving the *jar*. All foods are also allowed except tamarind and *carambola*, because sour is likely to damage the liver. He does not have any misconception regarding turmeric powder.

Experiences of Patients:

1. The patient is a male who has been suffering from diarrhea and weakness since last 2\3 months. Initially he could not recognize the disease but gradually, he has observed that his eyes and skin were turning yellow. He and his other family

members could realize that the disease is jaundice. Since the disease was severe the family members as well as neighbours had advised him to go to the outpatient department of Silchar Medical College for treatment. He admits his fascination for indigenous treatment (*bangla*) treatment and applying it simultaneously with allopathic medicine even in the hospital also. He believes that jaundice is not cured without indigenous treatment.

2. Observing the eyes and urine that turned yellow, the patient could realize that he might have been attacked by jaundice and he approached an allopathic doctor. The patient prefers allopathic treatment because he does not know the address and location of any healer. Later on, his sister and other relatives have come forward to communicate with a healer. Like the earlier patient he is also following indigenous (*bangla*) treatment when he is under allopathic medication in the hospital. The patient believes, indigenous treatment is better for jaundice but for himself it would not be effective as he is a diabetic.

3. This patient is also a male. At the beginning, he could not identify the disease. But looking the eyes and enquiring about the colour of the urine which turned yellow his parents could guess that it is due to jaundice. They immediately consulted a local doctor. Since the disease was too severe to be treated locally the local doctors have referred the patient to Silchar Medical College. The patient is also following the indigenous method by having herbal paste over his head (*bharan*) along with allopathic treatment. The patient is asked whether he is ready to go out side Barak Valley for treatment. In reply he has stated that he would be ready to go and it is subject to be advised by doctors because he cannot take the decision since he is an illiterate person.

4. The patient is a male. Suffering from severe stomach pain along with fever and vomiting, he has approached a chemist at a drug store for medicine for controlling

vomiting. From that chemist he came to know that his liver might have got enlarged as he has been feeling liver pain. Thus, he has consulted a doctor immediately and the disease has been diagnosed. Though he believes in indigenous treatment but has not applied it as yet.

5. The patient is a female and has been suffering from gallbladder stone. The respondent has approached a doctor for treatment of other disease. The disease was diagnosed in Imphal as she has been in Imphal. But her son was afraid of surgery and has been hesitating to take any action. They have resorted to homoeopathy doctor and spent a lot of money for treatment and finally they resorted to allopathic medicine only.

6. The patient is a young male. He was feeling pain in his stomach. The severity of pain had compelled him to consult a doctor. At the beginning he was about to consult a homoeopath and also seek indigenous treatment. Because both he and his parents are afraid of operation They would have gone outside Valley if there is any treatment without surgery. But as they have come to know that galbladder stone is cured only by surgery, they have made up their minds for operation.

7. The patient is a female of middle age. She has been suffering from gas, acidity and stomach pain. She suspected that it may be due to problem of gall bladder stone formation. She consulted an allopathic doctor and requested him to send her for sonography. She prefers allopathic treatment because it is known to her that gallbladder stone problem can be solved only by allopathic medicine.

8. The patient is a male. He has been at Shivsagar. He has been experiencing stomach ache. He has consulted a physician but the disease was not diagnosed properly and the severity of the pain remained. He consulted another doctor and the disease was diagnosed. He was advised surgerny, but he could not proceed as he did not have enough money. Then he sought help of a healer and has started to

go for indigenous treatment. But he continued to experience pain and fatigue. The healer suspected, he might have developed jaundice. He was suffering from jaundice as well as gallbladder stone problem; with healer's treatment he felt better with regard to jaundice. But the problem of gallbladder stone was solved. Finally he had to resort to allopathic system of treatment and undergo surgery. He got admitted in the hospital which is considered cheapest by the people of his village. The villagers help him financially also by collecting donations from the people as he is too poor to pay for the treatment.

Though, the health seeking behavior in Barak Valley seems to be by and large a product of cultural forces but the influence of modern medicine in the process of treatment cannot be ruled out. Specific kind of beliefs and practices are associated with specific diseases. Many diseases are identified by the community and the treatment of which also lies with them. This is partly due to cultural condition and partly due to structural condition of people. However, health seeking behavior in Barak Valley has to be seen in the process of continuity and change.