



An Analysis Of Health Status Of Women In Polyandrous Family

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Abstract:.

Health is one of most important indicators of quality of human life which is part of right to life considered as one of fundamental rights. The health status of women in Kinnaur is not altogether different from other parts of the country. Unlike others, women in polyandrous family face difficult situation whether it is related to physical or emotional. They have to be stronger and very good at decision making. Women in polyandry family have to deal with more than one husbands and children. Each husbands had its physical as well as emotional needs, the wife have to cater all these needs without hurting or disturbing her relation with co-spouses. Besides this women have to maintain a balanced relation with in-laws as well as equal care & attention to all children. This interesting institution of human society is quite distinct from all other social institutions and customs. The present study deals with the tribal women of Himachal Pradesh, who live in Kinnaur and practice polyandry marriage system. This paper attempts to understand health issue like physical health, health care facility, and menstruation related problems of women in Polyandrous household

Key Words: Polyandry, Healthcare, , co-spouses, Menstruation

Introduction:

Health is not absence of illness but a growing vitality the feeling of wholeness with a capacity for continuous and spiritual growth. Physical, social, spiritual and psychological well-being is intrinsically interwoven into the fabric of life."(Declaration of Alma-Ata, 1978). Women Health is determined by biological, physical, economic as well as social aspect like daily work load, status in society, mental stress etc. Women in India have poor nutrition, poor reproductive health care, child bearing at early age, and complication related with child bearing, aggravated the problem faced due to poor physical development. Health problems faced by women are maternal mortality, neo/pre/post/peri-natal mortality, ill health poor nutritional status, poor life expectancy etc The World Health Organization propose a definition of health as Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity reproductive health addresses the reproductive processes, functions and system at all stages of life (WHO). The enjoyment of the highest attainable standard of health is one of the fundamental rights of every human being without distinction of race, religion, and political belief, economic or social condition. (Preamble of the World Health Organization, 1946.). "Right to health is the right of every one of the enjoyment of the highest attainable standard of physical and mental health." (The International Covenant on Economic, Social and Cultural Rights of 1966.).

The WHO definition focus on rights of both men and women to be informed of and to have access to safe, effective, affordable, and acceptable methods of fertility regulation of their choice, and the right to access to appropriate health care services that enable women to go safely through pregnancy and childbirth and provide couples with the best chance of having a healthy infant (NHM, 2015).

The women health gained international acceptance in the Fourth World Conference on Women (FWCW). The reproductive behavior is related to gender inequality, especially the way inequality is rooted in a society's kinship structure and cultural context Dyson and Moore (1983:37) studied the organization of the patterns of gender equality along the cultural and demographic divide running from India's south-east to north-west, the kinship pattern favoring greater female autonomy and use of contraceptive in the south, and lower female autonomy and higher fertility in the north. Sopher (1980:167) and Miller (1981:73) stated that the variation is most pronounced with regard to kinship structure as it relates women's status and can be delineated along geographic lines; areas in the north are culturally less favorable to female autonomy than areas in south and east.

Women health is dependent of various factors like access to health care, education, employment, decision making, discrimination based on gender etc. Unlike in western countries women health in India have not gained much till recently. In Indian society role and function performed by any women is had a very important place in society. They have to perform multifold task like house hold chorus, agriculture work and job to earn a income to help the family. In spite of all these women are still not getting equal attention and status like the male members get in society. Women irrespective of age make sacrifice, wherever required for male members in the family in particular and society in general. The women always take care and gave preference to male members being a brother, a son, a husband, a father in family and only after satisfying them women think of herself.

Women Health in Polyandrous Household makes women suffering from various kinds of health as well as emotional issue. The health issue is one of most serious problem faced by women silently until it's getting unbearable or unavoidable. The reason for same be countless, like expense burden, non understanding of family, dependency of family members etc. The health problem is not only a problem that is faced by women, but health problem have many other related problems like malnutrition, education problem, emotional problem, psychological problem etc. Most of time women bear pain and agony alone without sharing the same with family members, which further aggravate the problems. The women fail to pay proper attention to her health baring few exceptions. This resulted in women became malnourished, poor physical health, anemia, infections etc. This kind of problems is associated with women and faced by them across whole state whether in cities or in villages. The only difference is in quantum and magnitude of problem faced. Women in India have poor nutrition, poor reproductive health care, child bearing at early age, and complication related with child bearing, aggravated the problem faced due to poor physical development. Women reproductive health affected by the kind of health status at the stage of infancy, childhood and adolescence. Most of girls and women are not aware of their need of nutrition for growth during early years and lack of required nutrition resulted in complicated pregnancy and delivery. Education and health are crucial factor for welfare and development of individual as well as of society.

Health includes mental as well physical development and sociological and psychological development. Health problems faced by women are maternal mortality, neo/pre/post/peri-natal mortality, ill health poor nutritional status, poor life expectancy etc. The health status of women in Kinnaur is not altogether different from other parts of the country. Before analysis women health status in study area, we may go through the role of women in Kinnauri society which affecting their health status. In Kinnauri society women are at central stage, she bear the responsibility to look after household chorus, look after child, field work and attending other miscellaneous works which requires mandatory presence of family member.

Methodology:

The study was conducted from the Three villages (kanam,Jangi,Asrang) of pooh block in Kinnaur and snowball sampling was used for collecting data because number of households practicing polyandry is not registered or well documented. The study is based on primary data collected through a field survey ,using structured interview schedule. personal interviews and focused group discussion.

Health status of women practicing polyandry in Kinnaur

Kinnauri women are very hard working and outspoken and not hesitating to express their views. Being in centre stage of family structure, many times they are not able to give proper attention to their own well being. They are all time worried about well being of family and its Family Welfare and Women Health in Polyandrous Household members. So always keep herself busy in caring children, husband, other members of family, cooking meal, cattle maintenance, working in fields, fodder and firewood collection etc. Many a time women are so busy in these work , they even forget to take proper meal. They are busy all time, physical and mental restlessness made them more susceptible to diseases which at later stage become problematical and un curable. These are the health problems not only faced by married women but others also face health issue. Girls often did not get enough attention towards their health issue even compared to boys. The girls feel shy to discuss health issue in family. Though these days change have been take place, but these changes are not sufficient enough which reduce theses problem totally.

The negligence and ignorance to health issue which could be easily treated initial state i.e gynecological problems at early age. These kind of problems could easily be easily treated at early stage. Non paying proper attention and care to these gynecological problems in adolescent girls leads complication during delivery which might be lead to abortion or even death some times. Unlike others, women in polyandrous family face difficult situation whether it is related to physical or emotional. They have to be more strong and very good at decision making. Women in polyandry family have to deal with more than one husbands and children. Each husbands had its physical as well as emotional needs, the wife have to cater all these needs without hurting or disturbing her relation with co- spouses. Besides this women have to maintained a balanced relation with in-laws as well as equal care & attention to all children. All these day to activity and maintaining regulated relation make women exhausted and some

time causing mental stress. Women also faces issues at the time of pregnancy. Due to household work pressure some time women ignore early signs of health issues, which later becoming life threatening.

1. **Physical Health of Women:** Traditionally physical health is considered as well-being of the human body and well functioning of all organism as well as mental and physical condition without suffering from any illness. The strength to perform daily tasks and live comfortably could be called as physical health. The study of physical health of women is very important to understand the well being of women in particular and of family in general. Well being of women in family is closely related to family well being and happiness. The respondents were asked about their physical health, reproductive health and other related issue and their responses have been noted and elaborated based on below mentioned table;

Table No. 1.1 (i): Physical Health Status of Women Respondent

Physical Health	Responses	Percentage
Excellent	1	3.23
Very Good	5	16.13
Good	10	32.26
Not So Good	7	22.58
Not Good	5	16.13
Bad	3	9.68
Very Bad	0	0.00
Total	31	100.00

From the above table it is seen that there are considerable population of the women respondents who are not either having bad, not good or not so good physical health condition. During field survey interaction most of women told that their health condition is impacted greatly by multifold work at home as well as fields. Moreover being at centre stage in family they have to pay more attention to spouses, in-laws as well children.

Case Study

“ Dechan Dolma, resident of village Kanam in her sixties, told that she was married at age of 17 years to four brothers. She was having good physical health at time of marriage. But over a period of time with increasing age, and birth of six children have great bearing on her health. They were having small PHC centre, mostly were without health care professionals, and they were dependent on local ved/lama. For any serious health issues they have to visit CHC’s either at district head quarter or CHC at neighboring districts. But often their busy and hectic schedule does not allow them to visit this health

care facility, so they ignore or bear the pain. At age of 50 she was diagnosed with sugar and vitamin D deficiency and she was advised by Doctor to follow proper diet schedule and routine life style. Due to work load she could not visit health care facility for routine check up, which resulted in deterioration in health. Now after 60 these health problems resulted in many other health issue like weak bone, poor vision and many other health issues which make like very hard for them. Had she not ignore her health issues, she would be in better health like many others.”

Case Study

“Asha Devi in her fifties married in polyandry system, were having three spouse , two are in job and eldest spouse is looking after orchid. On un fate full day she came to know that her husband met with a accident while going to neighboring village for attending marriage. She lost her husband and it was very difficult for her to look after children as well as orchid alone as other spouse were in Job so they could not be always available for her help. She could rarely spare a time for taking care of her health. Even cooking proper meal was not possible all time. She have much dependency on tea, which resulted in gastric problem. Initial ignorance of problem resulted in serious problem of tumor and she have to undergo surgery for removal of tumor. After that surgery she cant work like before and only do household chorus. Not paying proper attention to her health, she would regret through out her life.”

2. Health care fascilities:

The health of women influenced greatly by the presence and quality of health facility. Health facility means any location wherein healthcare is available and provided to individuals. It includes clinics, hospitals, emergency and trauma centers. In India with such a huge population and limited resources the availability of health facility is not up to the mark and creates disparity in its availability across states as well as across regions as well as between rural and urban areas. As per Census 2011 , the availability of health care institute in State of Himachal Pradesh is as under;

Table No. 2.1 No. of Health Care Institutions. As per Census 2011

District	Hospitals	Community Health Centre	Primary Health Centre	Sub-Health Centre
Bilaspur	2	6	35	116
Chamba	4	7	42	176
Hamirpur	2	5	27	152
Kangra	9	14	80	438
Kinnaur	2	4	21	31
Kullu	3	5	17	99
Lahaul & Spiti	1	3	16	36

Mandi	6	13	62	311
Shimla	12	8	88	250
Sirmaur	5	3	36	145
Solan	5	6	33	179
Una	3	4	20	34

It is evident that the health care facility provided or established by Government are more in Kinnaur district compared to other district in state of Himachal Pradesh. Though simply establishing of healthcare institute does not imply efficient delivery of health care services. It depends on the availability of health facility, staff, technician and other manpower required for delivery of health care services. During the interaction with respondents of various age group narrated their experience and status of health care facility available or changed over a period of time. The facility at health care facility is as under;

Table No. 2.3 Availability of Health Facility at Health Centre

Health Facility	PHC	SHC
X-ray	NA	NA
Pregnancy Test	Yes	NA
Blood test	NA	NA
Sugar test	Yes	NA
Delivery	NA	NA
Gynecological Consultation	NA	NA
ENT Expert	NA	NA
Eye Testing	NA	NA
Ultra Sound	NA	NA
Immunization	Yes	Yes
General Surgery	NA	NA

From the table it is seen the study area nearest health facility available is PHC & SHC. The facilities available are limited to immunization, sugar test and pregnancy test in PHC and only immunization in SHC. These health facility have minimum facility and the hospital wherein other health facility available are distance of around 30 to 40 Km to respondents. The respondent told that these CHC are not of much help in case of emergence of any serious health issue related to maternal health care or other life threatening problems. They have to rush to district hospital for cure. There also lack of expert or specialist doctors most of cases referred to other hospital i.e Rampur and IGMC Shimla mostly.

3. **Manstruation related problem:** The age of maturity in females is presumed started with first menstruation known as Menarche. Women across nations have developed their own strategy to cope up with menstruation depending on their economic as well as personal preference local traditions and cultural beliefs, and education status. (Das P, Baker KK, Dutta A, Swain T, Sahoo S, Das BS, *et al.* Menstrual hygiene practices, 2015) Menstruation is the monthly flow which is regulated by two hormones, estrogen and progesterone. The uterus is prepared for pregnancy every month. When pregnancy is absent, both estrogen and progesterone levels decline gradually bringing about menstruation (Padubidri and Daftary, 2004). Menstruation resulted in certain psychological, physical and social responses. Ignorance about the physiological and phenomenological reality of menstruation might be expected to be significant feature of cultures which menstruation is surrounded by secrecy and euphemism (Walker et al, 1982). The most common menstrual disorder is dysfunctional urine bleeding, dysmenorrhoea, irregular menstruation, premenstrual syndrome and social problems. Problems related to menstruation are multi fold. The understanding of problems related to menstruation is very important to assess the well being of women. Therefore women respondents were asked about the problem faced during reproductive life span related to menstruation and type of problems and stages when they faced such problems. The responses of respondents have been noted and elaborated based on the data gathered during field work & tabulated in below mentioned table;

Table No.3 (i): Problem faced by respondents related to Menstruation

Problem Related to Menstruation	Responses	Percentage
Yes	21	67.74
No	10	32.26
	31	100

From the table it is seen that 67.74 % of respondent facing problem related to menstruation and 32.26% of respondent not facing any problem related to menstruation. Few common problem faced by women related to menstruations are as under;

- i) **Dysmenorrhoea:** term used to refer painful period accompanying pain in lower abdominal.
- ii) **Menstrual Cramps:** It is happens during monthly bleeding when womb contracts so that bloods leave body. This is one of most common problem faced by women. Some time painful cramps last longer in some women compared to other.
- iii) **Premenstrual Syndrome (PMS)** it refers to a physical and emotional symptom occurring before menstruation. Symptoms are like tender breast, leg cramps, low back ache, feeling tired, fatigue, acne, irritation, abdominal pain, bloating, and mood swing. These symptoms are often varying person to person and resolved on start of bleeding.

- iv) **Amenorrhea (Primary)** means total absence of menstruation in girls up to the age of completed 16 years
- v) **Menorrhagia (Heavy Menstrual Bleeding)** having symptoms of excessive blood loss, some time cause iron deficiency (anemia). Anemia in turns results in redness, weakness, shortness of breath, poor concentration.

Table No 7.4 (i): Type of health problem faced by respondents

Type Health Problem Related to Menstrual	No of response	Percentage
Dysmenorrhoea	14	66.7
Menstrual Cramps	21	100.0
Premenstrual Syndrome	17	81.0
Amenorrhea (Primary)	8	38.1
Menorrhagia (Heavy Menstrual Bleeding)	13	61.9
Irregular Menstrual Bleeding	19	90.5
Lower Abdominal Pain	21	100.0
Back Ach/Joint Pain	21	100.0
Fatigue	17	81.0
Anxiety/ Stress	18	85.7

From the above table it is seen that 100% respondents facing menstrual cramps, abdominal pain, and Back Pain /Joint Pain followed by irregular menstrual bleedings i.e 90.5%, anxiety i.e 85.7, Menstrual Cramp & Premenstrual Syndrome i.e 81%, Dysmenorrhoea i.e 66.7%, Menorrhagia (Heavy Menstrual Bleeding) i.e 61.9 %, Amenorrhea (Primary) 38.1%..

Conclusion:- In Kinnaury society Women occupy a centre stage and play very important role in decision making. Life of women in Kinnaur is very hard working always busy in doing multi fold task inside out twenty four hour. He is so busy in household chorus looking after family members and keep family united. The women physical strong enough to do as much as man could do. Her focus is on running family smoothly. In these backgrounds many women become ignorant about their health issues which later on become incurable and life threatening. Sometime women have develops a systems fatigue, which raise many more health issue to women. These may be felling of exhausted, tiredness back pain joint paid stress anxiety, low self confidence. During the field survey sufficient no of women told that they are having feeling of fatigue. And most of women told that though they kept themselves busy through day , but they their own circle, a light get together with fellow women in village make the refreshing. Not all Women ignorant to their health. The women were quite aware of the problems

related to menstruation and good number of respondents facing such issues. Majority of the respondent have reported the like women in other parts of the country, most of problem related to menstruation started at early age. Women consulted elderly women as well as health care facility available. Though the health care facility was set up by Government, but it lacks basis facility. For which the respondents have to visit hospitals in neighboring hospitals.

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