

# [Rural health care systems which coexists. this coexist](https://assignbuster.com/rural-health-care-systems-which-coexists-this-coexist/)

RURAL HEALTHCARE SYSTEM    All societies have healthcare system that provide own methods for the diagnosis of illness, disease etiology, prescriptions and practices for treatment. They use their ethno medical knowledge to cure their illness and diseases. My research area has a variety of health care systems which coexists. This coexist health care system offers villagers to access a variety of alternative medical system. This coexistence of health care systems covered from self care, homemade remedies, homeopathy, kabiraji, religious healer, herbal specialist, gypsy to modern biomedicine. In this chapter I will discuss rural health care system of my research area along with villager’s determining factor in choosing health care system.

Flowchart: Existing Rural healthcare systems. Sources: fieldwork 2017The rural health care systems of my research area are homemade remedies, Biomdecine, religious healer, kabiraji, boimedecine, herbal specialist and gypsy (see flowchart). Karmaker’s (2012) also found six main categories of traditional system, along with biomedicine, which was used by both of urban and rural people of Noakhali Dristict. These are Ayurvedic, Unani, spiritual healing, herbal medicine, homeopathy, Kaviraji and hypnosis. In rural Bangladesh, “ traditional medical practices are composed of the household remedies given by mother and grandmother alongside kaviraji treatment” (Rashid, 2017, 55). At first, Villagers prefer homemade remedies to cure their illness. According to Khan & Chowdhury (2010) 39% of rural community member have knowledge about medicinal plant and 13% treat simple diseases with herb.

In my research area homeopathic health care is popular mode of treatment. There are three homeopathic specialists in my research area. Among three homeopathic specialists, one is female homeopathic specialist and the rest are male homeopathic specialists. They usually sit at local market. There are two M. B. B. S doctor along with 12 pharmacies in local market, where modern biomedicine is sold.

There are no female biomedicine specialists. There has only one union based governmental health care center. Because of its spatial distance and inactive activities of union health care center, villagers of my research area don’t go to to union health care centre. Religious healer in my research area refers to Imam of mosque and oldest teacher of local Madrasah.

In my research area I didn’t find any religious healer who is from Hindu religion. Because a few number of Hindu religious people lives in this area. Kabiraji healing practice is another popular health care system which is widely used in my research area.

There are 7 kabiraj in village and three of them are well-known in whole union. Gypsy doesn’t always available in my research area. They often visit the village. Especially gypsy women go from home to home to provide their services which include pain management.

Choosing healthcare system                                     Health seeking behaviour of villagers is interconnected with their belief and perception about health, diseases, healthcare system, individual experiences, resources, social relation, and practices. Primarily villagers choose healthcare based on types of disease and how they define disease. For example diseases like pain management, conjunctivitis, skincare, hair care and cold-related, etc. villagers prefer homemade remedies. If villagers think that their illness caused by supernatural or kahrap batas and effect of tabiz, then they consult with local healer. Health Care System Based on Age & GenderGender and age of patient are influential in choosing health care system.

Most of my female informants prefer homeopathic and traditional medicine. Sometimes “ The rural women are not encouraged to go outside or even go to male doctor in nearby city centres, unless and until they get very sick. In most cases women feel too shy to consult with unfamiliar doctor, especially if the doctor is a male.”(Rashid 2017, 55) . They also think it free from side effects, and the cost is less than Biomedicine. Especially pregnant women and their family’s member prefer traditional medicine.

They think that biomedicine is so powerful medicine which can harm the baby even can lead to miscarry of baby. Farzana (pseudonym) is 23 year old. She is a house wife. It has been 4 year since she had get married.

Her husband is a immigrant worker and he went to United Arab Emirate after six month of marriage. When her husband was abroad, Everything is provided her through her mother-in-laws including form monthly expense to medicalisation. She has one years old baby girl. She said “ when my girl came in my womb, my mother and mother-in-law let not me take any Biomedicine.

They suggested me and provided too, take home remedies and Homeopathic medicine, if I got sick. They said if I took Allopathic it could harm my baby. She also added “ I also prefer homeopathic medicine for my little girl. Because she can’t bear the power of biomedicine and my brother-in-law and fatter-in-laws when get sick my mother in law said them to go local market to consult doctor for curing their illness or called in a doctor in my-in-laws house”  Sources : fieldwork 2017 Farzana’s case study shows that her gender determine her health care system and her baby whose age is one years old is also another factor which determines healthcare system. It also assert that male members of Farzana’s family are recommended to consult a doctor for curing their sickness. Most of the women of my research area who suffer from menstrual and reproductive illness prefer alternative medicine to biomedicine.

Sometimes they are obliged to take traditional medicine for infertility. Ages of person are also another important factor which differentiates the health care system. Most of the elder person prefers  Health seeking behaviour: Underlined Factors          Sources: fieldwork 2017  Education:   In my research area, higher education of individual affects individual’s health-seeking behaviours. Most of the higher educated respondents of my research area prefer biomedicine to other traditional medicine. They think that it is most reliable as modern technology is used in the diagnosis of disease and in the production of medicine.

To Bourdieu(1986), cultural capital is a person’s education (knowledge and intellectual skills) that provides advantage in achieving a higher social-status in society. ( pp. 46–58)CostCost of medicalisation is another important determining factor of choosing healthcare system. In the context of rural Bangladesh, people priority less expensive one for their healthcare. Cost of Bio-medicine is much higher than traditional medicine. Due to less expensive, villagers prefers traditional medicine to Biomedicine.

Traditional medicine practitioners provide “ The low cost of medicine, they provide low/no fees for consultation, the convenience of paying the fee later” (Rashid 2017: 55). One of my informant said “ when I consult a doctor, I have to pay doctor’s visiting fees, diagnosis fees and cost of Bio-medicine is much expensive. If I consult with trading medicine specialist , I don’t need to pay visiting fees of doctor . Although sometimes I paid which less than Biomedicine. The traditional practitioners doesn’t need of diagnosis fees in healing process.” Villagers who can’t afford the cost of Bio-medicine they go for existing alternative medicine to cure their illness. It also related to their economic status which influences too.

Therapy Management GroupTherapy management group consist of patient’s kin experiences and their preference of health care system. If villagers suffer from diseases then there is none but their kin who decides to take which healthcare.  In my research area, I observed reaction of 80 years old lady’s family members towards her illness.

She has six son and four of them stay with her in village and other two sons live in Dhaka because of their profession. In one evening she lost her sense and stared to abnormal activities and unusual talk with everyone and can’t recognize any one even her son and grandchildren too. Her elder son thought that It may be caused by kharap batas, that’s why they called a kobiraj to cure the lady . After observing her condition Kabiraj gave some medicine and A tabiz to put on her neck. The day after of her illness , her son came from City and bring her with him to Dhaka to consult a doctor . He thinks, not like other brothers, that it caused of his mother ages that’s why he preferd a modern healthcare.

Sources: fieldwork 2017     Availability: Availability of health care system is also another reason of choosing healthcare system.  As Rashid (2017) commented that the availability of herbal plants in locality or the availability of the folk healers at nearby location is influential in health seeking behaviour of rural people. Because of spatial distance and lack of available activities, villagers of my research area avoid going union based government healthcare.  Social Status: