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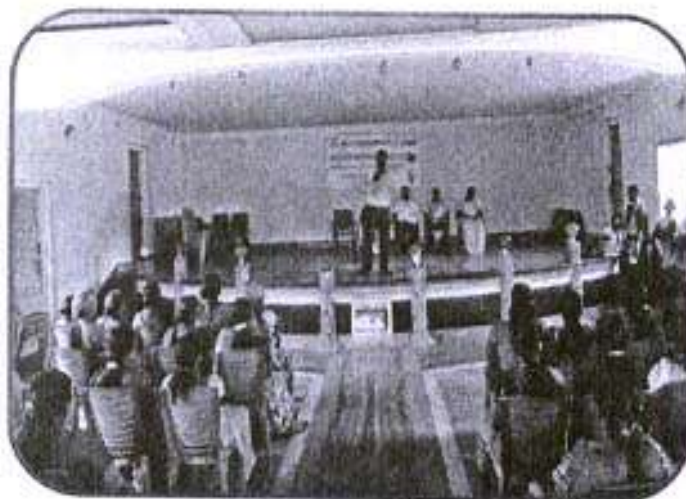


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**Health and Hygiene: A Study of Coastal
Women in Kanyakumari District**



Research by,



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Abstract:

When we were children health and hygiene was taught in the class room but as we grew older we forgot this fact and ironically a good number of persons do not follow the principle of hygiene. Hence we are prone to many kinds of diseases.

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HEALTH AND HYGIENE: A STUDY OF COASTAL WOMEN IN KANYAKUMARI DISTRICT.

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Abstract:-When we were children health and hygiene was taught in the class room but as we grew older we forgot this fact and ironically a good number of persons do not follow the principle of hygiene. Hence we are prone to many kinds of diseases. Realizing the importance of health, now-a-days health is considered to be fourth basic human needs after food, cloth and shelter. The coastal villages are highly affected due to health, hygiene and environment pollution. What an average fisherman spends for medicine per annum is more than Rs.10000/-. It is irony to note that the fishermen who are at the ebb of the social ladder spent huge amount on medications. More over the coastal villages are being thickly populated and hence easily prone to all types of ailments. This paper is based on a qualitative study and the questionnaire which was administered to 75 households in the study area. Result indicates that the cleanliness of the coastal belt needs to be improved and requires the attention of the policy makers. This paper also suggests number of recommendations to coastal population to maintain good health and hygiene in the coastal villages.

Keywords:costal population, pollutants, hygienic

INTRODUCTION

Article 25 of United Nations Declaration on Human Rights- 1948, says "Everyone has the right to a standard of living adequate for the well being of himself and of his family, including food, clothing, housing and medical care and necessary social services, and the right to security in the event of unemployment, sickness, disability, widowhood, old age or other lack of livelihood in circumstances beyond his control". This declaration makes it clear that Health, Hygiene and good environment is one of the basic human rights of every citizen in the world. Unfortunately, due to the advancement and development of industries and modernization the environment is polluted and there is an enormous change in the atmosphere which becomes a threat to the life of human beings, flora and fauna. It is sad to note that the share of expenditure on health in the Union budget allocation for 2013-14 is only 0.32 per cent of India's estimated gross domestic product (GDP). Hence there are poor infrastructure facilities in government hospitals which influence the people to go to private hospitals, even though they charge high prices for medical treatment. Most of the private hospitals are doing business at the expense of the illiterate, poor, weak and marginalized people in the society. A recent WHO report points out that over 20,00,000 children worldwide suffer from environmental hazards. The coastal inhabitants are not exempted from these phenomena. They toil night and day in the sea and due to stormy, bad weather and improper sanitation facilities are easily susceptible to incurable diseases. As a result the fishermen who are economically poor are easily affected by the diseases and approach private hospitals for treatment rather than Government hospitals. So the rewards of the hard earned labour go in vain for medical expenses and their survival becomes difficult.

ORIGIN OF THE RESEARCH PROBLEM

Fishermen in general are very poor and live in abject poverty due to socio-economic conditions. Moreover, the coastal inhabitants are exposed to both manmade and natural calamities. Tsunami -2004 brought major havoc in the life of the fishermen and changed the environmental situation in the coastal belt. Fish being a perishable product, creates a stink and the populace lives in a congested areas easily prone to diseases like Dengue fever, Chikungunya, Malaria, Tuberculosis, Diarrhea, leprosy, AIDS and other incurable diseases. Moreover in the coastal belt there is no proper sewage or drainage facilities to dispose the waste and the seawater is polluted by dumping and immersing the pollutants like plastic and other non degradable substances. It is sad to note that no coastal villages have Governmental hospitals under its jurisdictions. At this juncture, number of questions arises in the mind of the researchers, like how the fisher women folk take care of the personal and household cleanliness? What are the hygiene problems faced by coastal inhabitants? What are the diseases that affect the fisher folk? To find fitting answers to these problems this study has been undertaken.

OBJECTIVES OF THE STUDY

The general objectives of the study are to assess the health, and hygiene in the coastal belt. The following are the specific objectives:

- To find out the expenditure spent on health and hygiene in the study area.
- To find out the grooming habits, personal and household cleanliness of the sample respondents in the study area.
- To ascertain that health problems occur due to hygiene aspects in the coastal belt.

METHODOLOGY

This study is based on both primary and secondary data. The primary data were collected from 75 women in the coastal belt of Kanyakumari town. The samples were selected on convenient basis. The secondary data were collected from books and websites. The collected data were analyzed with the help of Likert's five point scale and Garret's ranking technique.

DATA AND DISCUSSION

Health is considered to be fourth minimum need next to food, shelter and clothing. Unless each and every individual of the community takes as many attempts as possible, public health cannot be achieved. Therefore every individual, household and the entire globe takes keen interest with regard to health and hygiene. Personal cleanliness makes a person to be smart and presentable before others. The following table clearly depicts the grooming habits of the sample respondents in the study area.

Table 1
Grooming habits of the respondents

S. No	Particulars	Always	Very often	Often	Seldom	Never	Total score	Mean score	Rank
1	Hair	10 (50)	23 (92)	36 (108)	4 (8)	2 (2)	260	3.47	VII
2	Skin	20 (100)	15 (60)	28 (84)	10 (20)	2 (2)	266	3.55	VI
3	Teeth	10 (50)	25 (100)	27 (81)	11 (22)	2 (2)	255	3.40	IX
4	Nails	5 (25)	19 (76)	38 (114)	12 (24)	1 (1)	240	3.20	X
5	Feet	3 (15)	11 (44)	24 (72)	26 (52)	11 (11)	194	2.59	XI
6	Menstrual hygiene	10 (50)	51 (204)	10 (30)	2 (4)	2 (2)	290	3.87	V

7	Head lice	18 (90)	39 (156)	14 (42)	3 (6)	1 (1)	295	3.93	IV
8	Dandruff	9 (45)	25 (100)	26 (78)	14 (28)	1 (1)	252	3.40	VIII
9	Bad breath	35 (175)	26 (104)	10 (30)	2 (4)	2 (2)	315	4.20	II
10	Bad odour	36 (180)	22 (88)	9 (27)	6 (12)	2 (2)	309	4.12	I
11	Perspiration	28 (140)	33 (132)	8 (24)	5 (10)	1 (1)	307	4.09	III

Source: Primary Data

Table 1 portrays that out of eleven variables related to the grooming habits of the sample respondents, the last 3 ranks given to variables like 'Feet', 'Nails' and 'Teeth' with its score values of 3.40, 3.20 and 2.59 respectively. It is an evident that the sample respondents are exposed to germs and other bacteria which affect their health and well being. The following table shows the factors influencing the personal cleanliness of the respondents.

Table 2
Personal Cleanliness of the Sample respondents

S. No	Particulars	Always	Very often	Often	Seldom	Never	Total Scores	Mean Scores	Rank
1	Wash your hands before cooking or eating.	8 (40)	9 (36)	37 (111)	18 (36)	3 (3)	226	3.01	VII
2	Wash your hands (using bathroom, changing child's diaper, handling money, touching door handles)	6 (30)	10 (40)	38 (114)	19 (38)	2 (2)	224	2.99	VIII
3	Cleanliness of your house & environment site.	12 (60)	34 (136)	24 (72)	3 (6)	2 (2)	276	3.68	IV
4	Care of domestic animals (pet animal)	6 (30)	15 (60)	18 (54)	8 (16)	28 (28)	188	2.51	X
5	Respiratory hygiene	4 (20)	7 (28)	34 (102)	16 (32)	4 (4)	186	2.48	XI
6	Drink purified water	26 (130)	29 (116)	18 (54)	1 (2)	1 (1)	303	4.04	III
7	Keep food refrigerated to delay spoilage	48 (240)	15 (60)	6 (18)	4 (8)	2 (2)	328	4.37	I
8	Consumption of spoiled food	2 (10)	1 (4)	1 (3)	3 (6)	68 (68)	91	1.21	XII
9	Wash raw vegetables thoroughly	30 (150)	40 (160)	2 (6)	1 (2)	2 (2)	320	4.27	II
10	Avoid walking barefoot on soil	14 (70)	25 (100)	24 (72)	9 (18)	3 (3)	263	3.51	VI
11	Avoid insect bite	5 (25)	46 (184)	17 (51)	5 (10)	1 (1)	271	3.61	V
12	Brush your teeth (twice a day)	8 (40)	9 (36)	15 (45)	38 (76)	5 (5)	202	2.69	IX

Source: Primary data

Table 2 shows that out of twelve statements relates to the personal cleanliness of the respondents, the last three ranks given to "Consumption of spoiled food", 'Respiratory hygiene' and 'care of domestic animals. It is inferred that through all these attributes, one is easily prone to health related problems. Moreover when the respondents are unhygienic it affects the entire households of the sample village. It requires the attention of policy makers as well as non-governmental organizations (NGO). The following table clearly depicts about the House hold cleanliness in the study area.

Table 3
Household cleanliness of the respondents

S. No	Particulars	Always	Very often	Often	Seldom	Never	Total score	Mean score	Rank
1	Sinks	2 (10)	36 (144)	31 (93)	4 (8)	2 (2)	257	3.43	V
2	Toilets	4 (20)	25 (100)	41 (123)	4 (8)	1 (1)	252	3.36	VI
3	Bathrooms	1 (5)	20 (80)	38 (114)	14 (28)	2 (2)	229	3.05	VIII
4	Garden	2 (10)	1 (4)	24 (72)	43 (86)	5 (5)	177	2.36	IX
5	Cleaning tools	11 (55)	37 (148)	23 (69)	3 (6)	1 (1)	316	4.21	III
6	Utensils	64 (320)	7 (28)	1 (3)	1 (2)	2 (2)	355	4.73	I
7	Laundry	47 (235)	23 (92)	1 (3)	3 (6)	1 (1)	335	4.47	II
8	Kitchen	8 (40)	41 (164)	23 (69)	2 (4)	1 (1)	278	3.71	IV
9	Wastepipes and drainage	2 (10)	7 (28)	17 (51)	35 (70)	14 (14)	173	2.31	X
10	Floor and walls	2 (10)	23 (92)	47 (141)	1 (2)	2 (2)	247	3.31	VII

Source: Primary data

Table 3 shows that out of ten variables related to the house hold cleanliness of the respondents the last and least rank is given to "waste water and drainage". It is inferred that the coastal inhabitants' houses are in thickly populated area and there is no proper infrastructure system to dispose waste water and there is drainage problem. It is understood that this type of exposing the sewage and drainage leads the coastal inhabitants to become sick as they are exposed to all types of virus and bacteria. The following table shows that the amount spent for hygiene related purposes.

Table 4
Amount Spent for Hygiene (per month)

S. No	Amount	No. of the respondents	Percentage
1	Less than 500	18	24
2	500 to 1,000	45	60
3	1,001 to 1,500	11	15
4	Above 1,501	1	1
	Total	75	100

Source: Primary data

Table 4 shows that 84 per cent (63) of the respondents spent Rs.500 to 1,000 and 1 per cent (1) of the respondents spent above Rs. 1,501. It is inferred that the amount spent on hygiene is very low for the households who always deal with perishable products like fish and fish related products. Adding to that they are exposed to pollution like dumping of garbage in the sea, immersion of Vinayagar idols, etc. The following table clearly depicts the sicknesses that occur in the coastal inhabits due to unhealthy and unhygienic aspects.

Table 5
Type of the sickness of the respondents

S.No	Particulars	Always	Very often	Often	Seldom	Never	Total score	Mean score	Rank
1	Chikungunya	1 (5)	2 (8)	19 (57)	40 (80)	13 (13)	163	2.17	VI
2	Wheezing and asthma	5 (25)	7 (28)	27 (81)	26 (52)	10 (10)	196	2.61	III
3	Vomiting	1 (5)	2 (8)	5 (15)	45 (90)	22 (22)	140	1.87	VIII
4	Diarrhea	2 (10)	6 (24)	28 (84)	32 (64)	7 (7)	189	2.52	IV
5	Cough	2 (10)	8 (32)	30 (90)	30 (60)	5 (5)	197	2.63	II
6	Common cold	1 (5)	25 (100)	35 (105)	11 (22)	3 (3)	235	3.13	I
7	Skin disease	5 (25)	3 (12)	23 (69)	25 (50)	19 (19)	175	2.33	V
8	Dengue fever	2 (10)	1 (4)	3 (9)	40 (80)	29 (29)	132	1.76	XI
9	Hepatitis (inflammation of liver and jaundice)	1 (5)	4 (16)	5 (15)	35 (70)	30 (30)	136	1.81	X
10	Herpes	1 (5)	1 (4)	2 (6)	16 (32)	55 (55)	102	1.36	XII
11	Rabies	2 (10)	3 (12)	8 (24)	32 (64)	30 (30)	140	1.87	VIII
12	Chicken pox	1 (5)	2 (8)	2 (6)	30 (60)	40 (40)	119	1.59	XII
13	Typhoid	1 (5)	2 (8)	1 (3)	36 (72)	35 (35)	123	1.64	XIII
14	Cholera	2 (5)	1 (4)	1 (3)	5 (6)	66 (66)	93	1.24	XIV
15	Viral fever	1 (5)	3 (12)	9 (27)	37 (74)	25 (25)	143	1.91	VII

Source: Primary data

Table 5 portrays that out of fifteen variables related to sickness of the respondents, the first rank is given to common cold with the mean score of 3.11 followed by Cough and Wheezing and asthma with the respective mean score of 2.63 and 2.61 respectively. It is inferred that due to weather change, dust allergy, pollution, water contamination and other factors the health of coastal inhabitants are affected. Moreover on an average the sample respondents spent more than Rs. 10000/- per annum for health related sickness. It requires the specific attention of health care ministry. The following table shows clearly how to prevent and take care of health and hygiene in the study area.

Table 6
Maintenance of health and hygiene

S. No	Particulars	Mean score	Rank
1	Municipality has to remove the garbage	61	II
2	Usage of green product	33	VI
3	Keeping the surrounding clean & tidy	45	V
4	Proper drainage facilities	71	I
5	Personal & house hold cleanliness	58	III
6	Healthy food habits	56	IV
7	Regular exercise	24	VII

Source: Primary data

Table 6 depicts that out of seven variables, the first rank is given to "proper drainage facilities, second rank to 'Municipality to remove the garbage' and third rank to 'Personal and house hold cleanliness' with its mean score of 71, 61 and 58 respectively. It is inferred that the health of sample respondents chiefly depend upon proper ways and means to eliminate the waste materials and through proper self-discipline. This is to be taken into care by the proper authorities.

FINDINGS

The findings of the study are

- Out of eleven variables related to the grooming habits of the sample respondents, the last 3 ranks given to variables like 'Feet', 'Nails' and 'Teeth' with its score values of 3.40, 3.20 and 2.59 respectively. It is evident that the sample respondents are exposed to germs and other bacteria which affect their health and well being.
- Out of twelve statements related to the personal cleanliness of the respondents, the last three ranks given to "Consumption of spoiled food", 'Respiratory hygiene' and 'care of domestic animals. It is inferred that through all these attributes, one is easily prone to health related problems. Moreover when the respondents are unhygienic it affects the entire households of the sample village.
- Out of ten variables related to the house hold cleanliness the respondents have given the last and least rank to "waste water and drainage". It is inferred that the coastal inhabitants' houses are in thickly populated area and there is no proper infrastructure to dispose waste water and they have drainage problems.
- 84 per cent (63) of the respondents spent Rs.500 to 1,000 and 1 per cent (1) of the respondents spent above Rs. 1,501. It is inferred that the amount spent on hygiene is very low for the households who always deal with perishable products like fish and fish related products.
- Out of fifteen variables related to sickness of the respondents, the first rank is given to common cold with the mean score of 3.11 followed by Cough and Wheezing and asthma with the mean score of 2.63 and 2.61 respectively. It is inferred that weather change, dust allergy, pollution, water contamination and other factors affect the health of coastal inhabitants.
- Out of seven variables, the first rank is given to "proper drainage facilities, second rank to 'Municipality to remove the garbage' and third rank to 'Personal and house hold cleanliness' with its mean score of 71, 61 and 58 respectively.

SUGGESTION

The following are the suggestions given by the researchers.

- The municipality authorities can regularly collect garbage and dispose it in an appropriate place and use it for recycling purpose.
- Through proper advertisements government can instruct the public not to spit or urinate in public places.
- A toll free number can be given to the general public to contact the local administration to ensure that office and

residential areas are always kept clean and tidy.

- Government can impose some strict penalty for the people who violate the surroundings.
- The coastal population can be educated through various awareness programme about the importance of health and hygiene.
- The well-wishers of the coastal community can construct waste bins and insist people to dump the garbage only in such bins which will in turn make the coastal villages clean and tidy.
- Awards or prizes can be given to the villagers who keep the surrounding neat and clean by the local administration

CONCLUSION

Health education plays an important role in the community hygiene. To prevent illness and to have a positive health attitude, correct and complete knowledge of health is necessary. Health is cleanliness and cleanliness is one of the main defenses against diseases, whether contagious or self-generated. Good health can be achieved through sanitary habits and healthy way of living. Hence the coastal women should be educated in terms of health and hygiene. As a result the socio-economic condition of the fishermen can be enhanced. It is said "charity begins at home". When every citizen keeps his/her house and its surroundings neat and tidy it would result in clean environment which would facilitate Health for All. This is the ultimate aim of the Government Policy of "Health for all -2000".

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