Case Study

Mental health and the tribal perspective

Gunjan Khorgade[1]*

ABSTRACT

Mental health problems have risen considerably even in the tribal areas but the information and treatment seeking is still low. Mental health is not an isolated concept. It is affected by several factors. One of the important factors is mental health literacy which decides the health seeking behavior. It's important to check whether people from tribal areas know about mental health, how they seek health treatment and what are the barriers in seeking help. The geographical location as well as socioeconomic factors in the tribal block of Gadchiroli can lead to mental stress and cause mental health problems in people. So, the present study was conducted to understand the awareness among people, health seeking behavior towards mental health problems in the tribal block of Gadchiroli district. The result will help in understanding the mental health seeking behavior of tribals in the tribal block of Gadchiroli district as well as stigma, discrimination against people with mental illness. The study will also help in initiating community based mental health care and community-based initiatives for mental promoting mental health.

India with its diverse population has diverse social and cultural practices affects the levels of consciousness about mental health issues among its population. These social and cultural practices and the ways these practices have emphasized/de-emphasized the mental health historically shapes the outlook of the population towards mental health treatment seeking behavior. In this aspect, there is a dearth of literature and studies on the mental health of tribal population that this study aims to fill the gap.

In India, the tribal are the most deprived and marginalized section of society. The information on the burden of illness and pattern of diseases among tribal is very less (Jain et al., 2015). India is home to the largest tribal populations of the world, with 8.6% of the total Indian population belonging to Scheduled Tribes who constitute 705 tribal groups across India (Census, 2011). The tribal population is more vulnerable to mental illness than other sections in the society because of multitudes of oppression and vulnerabilities. Despite its pervasiveness, there is a scarcity of human resources as well as normal medical health infrastructure (NHRSC, 2013).

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[1]M.A. Social work in Mental health, Tata Institute of social sciences Mumbai, Maharashtra, India
*Responding Author

LITERATURE REVIEW

Through ages culture has been defined differently and is considered as an abstract concept. Despite this fact, there is general agreement that culture includes shared set of beliefs and values. (Chiu et al., 2010) Cultural context of an individual plays an important role in understanding health, illness, modes of treatment and help seeking behaviour. (Gopalkrishnan, 2014)

The unique culture of each society shaped the understanding about mental illness as well as treatment options. Those who believe in biomedical model will prefer to consult psychiatrist for the treatment (Srivastava, 2002). Some people still believe in supernatural powers, magical spirits, possession as cause of mental illness (Wanger et al., 1999). Other believes that the previous life's curse or punishment also becomes reason for mental illness. In rural India, the belief is that mental illness is because of possession of evil spirit or sins from the past lives (Magnier, 2013)

In a study on "Explanatory models of common mental disorders among traditional healers and their patients in rural south India", showed that different terminologies, concepts as well as treatment options are used by traditional healers. It was arguing from the study that gaining insights of local understanding of mental illness will also help medical practitioners to use culturally sensitive medicines as well as treatment. (Shankar et al., 2006). In another study the findings conclude that in the ethnic minorities, cultural context plays important role in understanding mental health issue as well as treatment option (Cauce et al., 2002).

Further, studies have shown the different aspect and different meaning of "suffering". The user defined distress as problem which is not presented as "symptom" located in the body. Dawar (2009) in a study of Darghas to understand mental illness from different perspective argued that of the 95% responses from user 85% believed that mental illness is caused because of witchcraft or black magic. The study further links the religion and mental health which argued that religion, culture affects the manifestation of suffering.

In a study done in rural community of South India it was found that about 56% participants linked their illness with supernatural agents like ghosts, evil spirits and witchcrafts. Further, the study also explored the understanding of rural community about Epilepsy and mental retardation which was considered as brain disorder for them but symptoms of depressions, psychosis are considered to be because of supernatural possession. (Jiloha et al,1997)

The symptoms of mental illness are viewed differently by different individuals depending on their cultural, psychological, spiritual understanding and beliefs. (Lefley, 2010) If the belief of mental illness is due to supernatural powers then most of the users will prefer going to traditional healers. Approximately 70-80% of population in India living in rural area with mental illness will consult traditional healer for treatment. (Thara et al., 2000) Further, in one of the Indian studies it was observed that 74.7 % population first point of contact for treatment of mental illness is traditional healer. (Davar,2009)

Studies have shown that the healing practices for mental illness was largely dependent on the explanation of the illness. (Padmavati et al. 2005) Health care seeking behavior cannot be seen in isolation. It evolved with family's or community's identity which is outcome of social, cultural and experiential factors. In the health system health seeking behavior can be seen in terms of 'social capital' that it does not only affect the individual but the community. (Sara MacKian, 2003).

The mental health treatment seeking behavior can be understood with the explanatory model prevalent in the community. The factors which influence the help from traditional healer in the community depends on type of afflictions, local interpretation of mental illness, socio economic status of users and availability of mental health services. In the rural community, faith healing and traditional healing are the major treatment options for people with mental illness. (Thara et al,1998). However, wide range of treatment options are used by users depending on the availability. Medical treatment such as use of allopathic, homeopathy is also widely used by the people. Madan (1969) when studied the help seeking options of rural south Indian community, he reported that about 66% users used multiple forms of treatment for mental illness.

In the decision process of choice for treatment option for mental illness, studies have shown that in most of the cases the decision is taken by the family members. (Padmavati et al, 2005) Moreover, the faith on the treatment option for mental illness, easy accessibility of the facility, easy approachability, social stigma associated with mental illness, affordability of the services, belief system about the etiology of the mental illness influences the decision of family to go to specific treatment option for mental illness. (Banerjee, 1997)

Jain and Jadhav (2009) noted how community psychiatry are largely dependent on the pharmacological treatment of psychiatric disorder where local community participation and psychosocial approach is neglected. Further, it was also observed that villagers do not see PHC as part of their community and hence do not find PHC as reliable for going for mental illness treatment. Thus, it was argued that the reliability of villagers on health system, accessibility and affordability decides choice of treatment for person with mental illness.

Aim and Objectives
The aim of the study is to understand the mental health and mental health treatment seeking behavior from the point of view of tribals of Gadchiroli district. The study also aims to unfold the cultural meaning of mental illness and how it affects mental health treatment seeking behavior of tribal population of Gadchiroli Districts. The objectives of the current study is to understand the perception of mental illness and health seeking practices with regard to mental illness among the tribals and to understand the cultural dimension of mental health which shapes the health seeking behaviours of tribals.

METHODOLOGY
The current study is the qualitative study and the researcher adopts exploratory research design as the aim is to gain a better understanding of the perspectives of tribal population about mental health and treatment seeking behavior. It follows constructivist approach as the focus is on how tribal people perceive mental health and how do they seek treatment related to mental health. The data were collected from taking semi-structured interviews of key informants, caregivers of people with mental illness.

Findings and Result
The respondents were from the tribal villages in the Gadchiroli district. 5 Person with mental illness from the villages, 10 caregivers of person with mental illness were interviewed. The mental illness varies from common mental disorder to severe mental disorders. Two focus group discussions with women and with men from the villages were conducted to understand the perspective of non-affected people about mental health and treatment seeking behavior. The key informants were traditional healers from the selected villages, PHC doctor

working in the village and ASHA workers. The key informants were chosen on the basis of their area of work in the health sector. Broadly the paper focuses on following major themes:

Tribal culture and Mental Health
"Someone has done something on him!"
"He was having problems with his friend which affected his "brain"
"He is facing this problem because of his Karma, his luck"
"She takes so much tension that's why she has gone MAD"

The etiology of mental illness in an Adivasi village can be understood in different perspective at how people are understanding mental illness. The strong belief about cause of mental illness is it's because of sins from past lives. The idea of mental illness emerges from the belief that the person might have committed sins in past lives which he/she is repaying in this life.

From the narrative one of the strong arguments from caregivers comes in situating the problem of mental illness with the person. The idea or concept that not all family members are facing this issue which depicting mental illness as individual problem. These are the narratives of respondents of the study who believe that God's curse, problem with someone, past Karmas. Other worries are some of the reasons of mental illness in the area that studied. In the tribal culture one of the important things which I observed was that the family or caregivers do not leave the client on his own. Even though the stigma is there in the tribal culture but the family will try whatever possible in order to cure the patient. One of the caregivers emotionally expressed:
"Who will take care of him if not us? He doesn't have anything. Just because there is some crack in his brain doesn't mean we will leave him on the road!"

The narratives of the respondents about attitude towards person with mental illness how they perceive mental illness and how it is considered some kind of "sin". One of the caregivers while talking about his struggle while dealing with mentally ill daughter noted that:
"I cannot go anywhere because of her. She cries all the day and throws tantrums, if it goes beyond my patience level, I tie her to bed so that she cannot go anywhere."

It's important to understand how person with mental illness perceives mental illness and possible treatment options. When we look at *patient explanatory* model, the emphasis is on understanding the view of the patient. One of the persons with mental illness talked about his journey of mental illness in which he explained how traditional healers play important role in treating the patients. He said:
"I had some problem in my mind, someone spelled some spell on me. How will medicines or doctors remove this spell? Its only traditional healers who can help us. He removed the spell from me and I became healthier now. Traditional healer is sent by God to protect us so we go to them whenever we don't feel good."

The person with mental illness from the villages believes that their illness can only be cured by traditional healers who are "sent by God". One of the respondents mentioned that:
"Medicines do not cure this. Because we are not "mad". Its just some problem. Mad people need medicines and hospitals."

In the Gond tribe of Gadchiroli district, traditions such as *Korma and Gotul* are present. *Korma* is a menstrual hut where the menstruating women are kept for 5-6 days until her

period ends. She is not allowed to enter into the house during that period. So, she is kept there. The food, water is provided by the family members. Its a place for women to socialize. When talked with people in the village there is no discrimination with person with mental illness. If a woman who is having some mental health issue if willing and if she can take care of herself can go to korma. *Gotul* is a place where youngsters can go, socialize, dance, make new friends, and even its a place where they can find their partners. Even in *Gotul*, a person with mental illness can go and attend the dance and other activities. There is no discrimination against person with mental illness from their cultural activities. One significant finding from the discussion was that when a person dies in the tribal culture the person should be buried. But interestingly, if a person has mental illness or any such chronic condition then the person is not buried, he/she is burned. One of the respondents told the reason behind this:

"The mental illness from this life should not continue in the next life and it should be burned along with the person"

Health and Mental health treatment seeking behavior among tribals
Every culture has its own belief system, tradition, knowledge and practices related to health as well as illness. Tribal culture also has their own health care system which is built by their own belief system. The tribal population under study believes that the mental illness can be cured with the help of traditional healers. The first point of contact for the tribal people is traditional healer. Every village has a traditional healer. Some people in the village when asked about the treatment seeking behavior of tribals explained that,

"75% diseases in the village can be solved by traditional healers. They can cure mental illness as well. The only requirement for cure is that the person should have faith in traditional healing as well as healer. The other 25% diseases are caused by some germs for which the patient has to go to hospital."

The stigma plays an important role in this region as well. Even though the person shows symptoms of mental illness, going to doctor is considered as stigma so people mostly prefer to go to a traditional healer. One of the ASHA from the community talked about how traditional healing has ruined the life of a client who was having mental illness.

"These people believe that its curse of God. they tried many traditional healers but didn't take him to hospital. I tried telling them, I even tried referring them to the hospital. But they didn't listen. They should have taken him to the hospital. His family ruined his life!"

Traditional healer has special status in the community. They have social respect because of what they do. When asked about what kind of people come for treatment one of the healers said

"We can treat every disease which is in record of our tribe culture. We treat women, child even the "mad" person who has been cursed."

The important finding from the discussion with respondents was that people believe that only taking medicines won't make any difference. They could differentiate between severe mental illness and common mental illness in their own understanding. Two of the caregivers talked about how some patients require medicines but not all of them should be treated by doctor.

"Some have bigger issue-like they talk to themselves or laugh, they require doctor's medicines if traditional healing is not working but there are some with small problems like

tension, other simpler issue. This cannot be treated by doctor. What will medicines do in this?"

Though the PHC is located in every village and its working at its level best, the mental health treatment giving facility is still lacking. The doctor from the PHC said that:
"People don't have exposure in this area. They feel mental illness is some kind of curse or their Karma from last life so they do not think of taking them to the doctor and most of the patients go untreated."

One of the interesting things which came from the discussion with traditional healer was that traditional healers have their own network. If one of the healers cannot cure the patient, he may refer them to some other healer who have cured similar people before.

CONCLUSION

The aim of the study is to explore the perceptions of the tribal population about the mental health and mental illness. The study successfully understands perception of mental illness of tribal by analyzing how cultural beliefs influences the perception about mental illness. Moreover, the study confirms the relationship between the cultural belief and etiology of mental illness as well as with treatment seeking behavior of mental illness. Further, I argue that the study has developed an approach for establishing relationship between cultural beliefs, perception and treatment seeking behavior and this is the major contribution of the study. The cultural beliefs of tribal shapes their understanding of mental health and mental illness. The understanding of mental illness affects the treatment seeking options for mental illness for tribal. For example- if a person belief the cause of mental illness is sins from past lives, he will seek help from traditional healer. The cultural beliefs of tribal about mental illness also shapes their perception about mental health treatment options.

In the tribal context, where people believe traditional healers more than doctor, collaboration with traditional healers, giving them general mental health trainings and collaborating with them for referral seems to be the best available strategies at place currently which will significantly contribute to the tackling of the problem at hand. At the same time, awareness among tribals about mental health issues and model treatment options need to be provided. The District Mental Health Programme (DMHP) program which is working in many districts successfully, the tribals are neglected community so more community-based facilities by providing trainings to ASHA workers, community health workers, allocating more mental health team to work with the tribal population should be done in order to improve the mental health status as well as their treatment seeking behavior. Trainings on mental health should be given to the community health workers, traditional healers as well as ASHA workers who are the gatekeepers in the community. The results of this study could further be used to carry out similar research in other rural and urban parts of the country to understand the merits and demerits of traditional healing, plan collaborative strategies of working with traditional healers and initiating community-based initiatives which will be culturally suitable for tribal population.

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Conflict of Interest
The author declared no conflict of interest.