

Socio-Cultural Factors and Mental Illness in North-Eastern Region of India: A Review

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ABSTRACT

North-East India is highly rich in socio-cultural aspects and it is also inhabited by the majority of the tribal people in India. Mental Illness is associated with the socio-cultural factors in every society. Therefore, the current review emphasizes socio-cultural factors of mental illness in North-East India. The review focuses on the latest scientific studies from different online search engines over the last decade. The major findings found that socio-cultural factors like traditional healing, faith healing, black magic, charms, rituals and religious methods have been predominantly influencing the mental health of the people. The review also found that poor knowledge, negative attitude, social stigma, lack of promotion of evidence-based treatment practice, and lack of accessibility and availability leads to the worst mental health condition among people. Therefore, the role of a professional social worker is to ensure and promote evidence-based treatment practice for people with mental illness. However, along with medical treatment, psychosocial intervention, positive cultural, traditional and folk methods are also important for the promotive, preventive and curative aspects of mental illness.

Keywords: *Social factors, cultural factors, mental illness, North-East India.*

Culture is considered a way of life in society. Culture is linking to the mental health of people in society (Gautam & Jain, 2010). The northeastern region of India has a rich cultural diversity. It is called the 'seven sisters' which means that the seven states are built in this region. There was a 4.5 crores population included in this region (Chandramouli, 2011). The socio-cultural scenario of the northeast region of India in the context of geography includes mountains, jungles, and plains. There are several ethnic groups and multiple idioms with different traditions and cultures in this region. Lack of accessibility, availability, multiple disaster-prone areas, and insurgency have mostly had a negative impact on the social development of the North-eastern region of India (Hassan & Alee, 2018).

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The Northeast region of India is more vulnerable to various issues. Therefore, mental health concerns should be focused on in this region. The National Mental Health Survey of India 2015-16 found that lifetime mental morbidity in Assam is 8.1% and 19.9% in Manipur (Murthy, 2017). Socio-cultural factors are mostly connected with the mental health of the people in every region. Social and cultural factors have a major role in mental illness and mental illness is a combination of biological, psychological, social and cultural factors (Office of the Surgeon General (US); Center for Mental Health Services (US); National Institute of Mental Health (US), 2001). Traditional healers use different medicinal plants or herbs for medicinal or nutritional purposes. Each of them uses different techniques and has its own methods of treatment and particular medicines. There are different types of traditional healers based on their expertise in northeast India. Some of the majority is herbalists, Diviners and traditional birth attendants. Faith healing is a method of treating illness through faith rather than medical methods. It is usually practiced through prayers or rituals to Gods and Deities. Other methods also include charms or religious/traditional rituals performed by either the individual or their family members (Hassan & Alee, 2018).

Some mental illnesses are constrained in some cultures and culture plays a vital role in mental illness. The culture-bound or cultural-specific syndrome is a combination of symptoms with somatic and psychiatric. This syndrome is characterised by the disease and widespread factors related to culture. Dhat Syndrome, Koro, Bhanmati, Gilhari syndrome, Compulsive spitting, Suchibai syndrome, culture-bound suicide (sati, santhra), Jhinjhinia, ascetic syndrome etc. are the common culture-bound syndrome in India (Kapoor, Juneja, & Singh, 2018).

The socio-cultural aspects of mental illness are interconnected in every society. The current review highlights the socio-cultural factors of mental illness in North-East India.

METHODOLOGY

The current review results were based on secondary data sources such as PubMed, Science Direct, Google Scholar, Cochrane library, and Psychinfo. The pursuit terms included in the online search engines are 'Socio-cultural factors and mental illness', 'Mental illness in North-east India', 'cultural syndromes', and 'traditional and faith healing in North-east India'. The review also extended to the printed journals, reports and Assam Kaziranga University library. There were around eight articles reviewed and major and relevant studies were included in this current review.

Literature linking socio-cultural factors and mental illness

The following pieces of literature are mostly linked to the current review topic.

A study investigated the knowledge, attitudes and practices of traditional healers in treating mental disorders in Nagaland. The study was an in-depth interview survey of a representative sample of 30 traditional healers who had treated a total of 74 mental disorders in 2018. Psycho-spiritual therapy was the major method used and the major disorders are mood disorders, epilepsy and psychosomatic problems. The major challenges for healers are to handle the youth who have a mental illnesses (Longkumer & Rao, 2021).

A study in North-east India emphasised folk medicines and traditional healers of the Ethnic group of the Mishing community. Eleven traditional healers who engaged in herbal treatment were taken for interview. Diseases treated by Mishing healers included jaundice, malaria, menstrual disorders, joint pain, skin diseases, etc. The study mainly focused on the healing process and system (Shankar, Lavekar, Deb, & Sharma, 2012).

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An in-depth interview with a representative random cluster sample of 510 rural and 300 urban households was done in 2017 to assess traditional healing practices for mental health in Nagaland. The findings of this study indicate that the majority of the people in Nagaland prefer the traditional method of healing for mental disorders. While traditional healers are still popular, their numbers are decreasing as is their capacity to deal with increased substance abuse, and stress disorders (Ningsangrenla & PSS, 2019).

A structured qualitative interview was conducted to elicit the attitudes toward faith healing for mental illness and other diseases in rural Gujarat. 49 individuals at Dhiraj General Hospital and 8 villages surrounding Vadodara were interviewed in July 2013. People treated by both a healer and a doctor reported they would recommend a doctor over a healer. Many people also believed that traditional healing can be beneficial and believed that patients should initially go to faith healers for their problems. Many people also felt that faith healers were not providing effective treatment for mental illness or were dishonest and should not be used (Schoonover et al., 2014).

A cross-sectional multistage random sample household survey was conducted across all the districts of Meghalaya to estimate the awareness and use of the different medical systems. The study found that both local tribal medicine and biomedicine were widely accepted and used. However, the majority had heard of AYUSH (Ayurveda, Yoga, Unani, Siddha and Homeopathy). Tribal medicines were used and thought to be effective. Only a few reported having used the AYUSH systems (Albert, Nongrum, Webb, Porter, & Kharkongor, 2015).

A cross-sectional study conducted in a tertiary care teaching hospital to study the socio-cultural factors and patterns of help-seeking behaviour of psychiatric patients in the sub-Himalayan region shows that psychiatrists, faith healers and general medical practitioners (GMPs) were equally chosen as the first help for psychiatric illness and that education of decision makers and accessibility affect the help-seeking behaviour significantly. However, faith healers were more expensive than GMPs (Upadhyaya, Raval, & Sharma, 2018).

Data from the National Representative Survey, the India Human Development Survey (2004-05) was used to examine the uses, costs and quality of care of traditional healing for short-term morbidities and major morbidities in India and to compare them with non-traditional healing. The result shows that the use of traditional healing is less common than non-traditional healing in both rural and urban areas and across all socio-economic and demographic characteristics. The use of traditional healing is more frequently used in the treatment of cataracts (especially in rural areas), leprosy, asthma, polio, paralysis, epilepsy, and mental illness. Among the patients who use both traditional and non-traditional healing, a relatively higher proportion used traditional healing complemented by non-traditional healing for short-term illnesses was found. However, it was vice versa for major morbidities (Singh & Madhavan, 2015).

A study on the traditional healing practices of North-east India shows that each state has its own dialect, plant and animal resources for meeting the requirements of the community including health facilities. They all adapt to herbs, animal parts, and mantras for keeping them healthy. It was also observed that the traditional healers in this region belong to different categories like herbalists, diviners and birth attendants, etc (Deb & Sharma, 2015).

A study on faith healing practices in the pathway to care for mental illness was conducted in Kashmir where a total of 2500 patients from the outpatient department of the Institute of

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Mental Health and Neurosciences were given a semi-structured questionnaire to collect the socio-demographic characteristics and related clinical correlates. The majority of the respondents were married, female, illiterate, unemployed and belonged to a lower socioeconomic class. It was found that 80% of the patients had gone to faith healers during their illness. Faith healing practices were also found to be equally appreciated and criticized and about 44% of the patients continued to follow faith healers even after consulting psychiatrists. However, only 28% reported improvement after visiting the faith healers and most of them were suffering from dissociative disorders (Amin, Younis, & Wani, 2021). There was a dearth of literature found on the socio-cultural factor of mental illness in North-east India. A few studies show that the traditional healing practice supports mentally ill patients.

Role of the social worker in addressing socio-cultural factors associated with mental illness

Social work is a profession that focuses on improving the health and social well-being of individuals, families, groups and communities. A social worker works with people to assess, resolve, prevent or lessen the impact of psycho-social, physical and mental health-related issues. A social worker in a mental health setting provides the following services: counselling, crisis intervention, therapy, working with the community to promote community health services, clinical consultant, management and administration of mental health programs, etc. They also provide services in the three classifications of health care i.e., preventive, promotive and curative. The role of a professional social worker is to ensure and promote evidence-based treatment practice for people with mental illness. Encourage the different age groups to be a part of evidence-based practice for the preventive and curative aspects of mental illness. It helps health professionals and researchers close the gap between research and clinical practice. Evidence-based treatment practice is applying research findings in our daily patient care practices and clinical decision-making. It is used to utilise current knowledge and connect it with patient preference and clinical expertise to improve care processes and patient outcomes. The goal is to use empirically supported methods to enhance assessment, engagement and intervention.

CONCLUSION

Medical treatment, psychosocial intervention, and positive cultural, traditional and folk methods are also important for the promotive, preventive and curative aspects of mental illness. Since all the socio-cultural factors are associated with mental health, it is crucial to follow the holistic approach to health treatment to provide as well as promote effective treatment.

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Conflict of Interest

The author declared no conflict of interest.

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