Assessment of Haemoglobin Level Among the Hill Korwa Primitive Tribal Children of Madhya Pradesh, India

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KEY WORDS Haemoglobin, Nutritional Status, Primitive Tribes.

ABSTRACT Children are major components of the population composition and from the nutritional point of view they constitute a valuable group. For the planning of comprehensive nutritional programmes aimed at improving the nutritional status of children belonging to primitive tribal groups, it is essential to have this basic information. Keeping this in view the present study is carried out to assess the haemoglobin level of 360 children (aged 1 to 11 yrs.) of Hill Korwa from its predominantly inhabited various villages of the Surguja district, Madhya Pradesh. The findings revealed that only 1.11% children have normal haemoglobin level.

INTRODUCTION

Health status of any community is governed by their nutritional profiles. Malnutrition has emerged as a major health problem in developing country. It is now accepted that nutritional problem have far reaching public health implications. Since apart from ill health attributable directly to malnutrition, there is increasing evidence of a role of malnutrition in resistance to infection, physical development, work capacity and mental development (WHO, 1969). Keeping in view of India’s commitments for the Alma Ata Declaration in 1978 to achieve “Health for All” by 2000 A.D., nutritional survey is important components for the understanding of dimension and magnitude of the problem. Because without controlling malnutrition, primary health care programme cannot succeed.

Indian population comprising various tribal groups, which numerated as 8.08% of the total population (Census, 1991). Out of total 427 tribal groups, 74 identified as primitive tribal communities by the government of India for taking up their special socio-economic development.

Primitive tribal groups of India have distinctive problems due to their special placement in different areas, lived in isolation which are away from modern health care facilities and are exposed differently to the various climatic and environmental stresses and strains. Thus their health problems need special attention for the family welfare programme.

Keeping this in view an attempt is made for the assessment of haemoglobin level among the Hill Korwa primitive tribal children of Surguja district, Madhya Pradesh.

Madhya Pradesh state is the central part of India which covers an area of 4,43,458 sq km. Here maximum tribal population groups are found (Census, 1991) including 7 primitive tribal groups, i.e. Hill Korwa, Bharia, Abhujmaria, Kamar, Baiga, Saharia and Birhor in their various districts when compared to the other states/union territories of India.

The Hill Korwa is one of the primitive tribal groups distributed in Madhya Pradesh and Bihar states of India. In Madhya Pradesh they have a population of 15,341 (including Kodaku tribes) in mainly interior, remote, hilly and inaccessible regions of Surguja (9193) and Raigarh (5,412) districts. They have small nuclear families which are patrilineal in nature. Their social organisation is based on totemastic clans viz. Hazeda, Edigwar or Edgeor, Samat of Samati, Mudhiyar and Giri. Ethnically they are considered as a branch of Munda tribe and constitutes an important part of great aboriginal type. Thus they belong to Austro-Asiatic family (Deogaonkar, 1986). For the livelihood they are totally depend upon crude agricultural level of technology, occasional hunting and gathering of minor forest produces.
Table 1: Assessment of haemoglobin level among the primitive hill Korwa tribal children of Surguja district, Madhya Pradesh

<table>
<thead>
<tr>
<th>Haemoglobin level (gm %)</th>
<th>Age in years</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>6</th>
<th>7</th>
<th>8</th>
<th>9</th>
<th>10</th>
<th>11</th>
<th>Total</th>
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<tbody>
<tr>
<td>Anaemic</td>
<td></td>
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<td></td>
<td>6</td>
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<td></td>
<td>5</td>
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<td>14</td>
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<tr>
<td>- Below 7</td>
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<td></td>
<td></td>
<td></td>
<td></td>
<td>(1.67)</td>
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<td>(0.83)</td>
<td>(1.39)</td>
<td>(3.89)</td>
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<td>- 7 to 11</td>
<td></td>
<td>8</td>
<td>16</td>
<td>30</td>
<td>21</td>
<td>36</td>
<td>15</td>
<td>60</td>
<td>63</td>
<td>26</td>
<td>33</td>
<td>34</td>
<td>342</td>
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<td></td>
<td></td>
<td>(2.22)</td>
<td>(4.44)</td>
<td>(8.33)</td>
<td>(5.83)</td>
<td>(10.00)</td>
<td>(4.16)</td>
<td>(16.67)</td>
<td>(17.50)</td>
<td>(7.22)</td>
<td>(9.16)</td>
<td>(9.44)</td>
<td>(95.00)</td>
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<tr>
<td>Total</td>
<td></td>
<td>8</td>
<td>16</td>
<td>30</td>
<td>21</td>
<td>42</td>
<td>15</td>
<td>60</td>
<td>66</td>
<td>26</td>
<td>38</td>
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<td>356</td>
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<td>(2.22)</td>
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<td>(5.83)</td>
<td>(11.67)</td>
<td>(4.16)</td>
<td>(16.67)</td>
<td>(18.33)</td>
<td>(7.22)</td>
<td>(10.55)</td>
<td>(9.44)</td>
<td>(98.89)</td>
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<tr>
<td>Normal</td>
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<td>Above 11</td>
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<td>21</td>
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<td>21</td>
<td>42</td>
<td>15</td>
<td>64</td>
<td>66</td>
<td>26</td>
<td>38</td>
<td>34</td>
<td>360</td>
</tr>
</tbody>
</table>

(Figures in parenthesis indicate percentages)

MATERIAL AND METHODS

360 children (aged 1 to 11 yrs.) were assessed for their haemoglobin level from its predominated inhabited villages namely Batidad, Sewari, Lau and Ghatgaon (Rajpur block), Ramnagar, Khala and Lalmati (Ambikapur block), Jori, Bilma and Raghupur (Lundra-Dhorpur block), Bhasajhal (Batuoli block), Pouri-Khurd and Rakaiya (Shankergarh block), Devgarh (Sitapur block) and Urumkela (Manpat block) and Korwa Ashrams at Ghatgaon and Patrapara (Rajpur block), Jori and Kakna (Lundra Dhorpur block) of Surguja district, Madhya Pradesh. The haemoglobin were measured by using Acid Haematin Method (Sahli). The children were recorded as normal having above 11 gm (%) of haemoglobin level whereas below this as anaemic (WHO, 1989). Based on their haemoglobin level the categories were divided into following categories viz. : below 7, 7 to 11 and above 11 gm % for the different aged.

RESULT AND DISCUSSIONS

The findings revealed that out of 360 children only 4 (1.11%) are having normal and 356 (98.89%) in anaemic conditions (Table 1). Among the anaemic children, 14 (3.89%) are below the range of 7 gm (%) while 342 (95%) under having 7 to 11 gm (%) of haemoglobin level.

The Hill Korwas were not able to get sufficient crops due to their infertile land, lack of irrigation facilities and primitive level of agricultural technology. Deforestation were responsible for the scarcity of forest produces and hardly they get leafy vegetables. Their main diet is rice and Kutili pulses.

Benefits of maternity and child health care programmes not reached them due to ignorance of health workers, doctors and other concern authorities. Their superstitions and believed plays as a barriers. All this factors leads for the poor nutritional status.

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REFERENCES