

# Health Status of the Pando Tribe in Surguja District of Chhattisgarh: A Micro Study of the Accessibility and Utilization

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**KEYWORDS:** Tribal people. Health status. Disease. Treatment. Health services. Ethno-practices. Surguja district. Chhattisgarh.

**ABSTRACT:** The life and livelihood of tribal people in Chhattisgarh is substantially influenced by the geo-physical and age-old socio-cultural institutions they live in. Under the situation the development of tribal people who almost share 32 per cent of the total state population very well determines the development pattern of the state. The present research has reflected various facets of health status of the Pando tribe of Chhattisgarh. More particularly it explores the accessibility and utilization of the health services by the Pandos. Anthropological study methods and techniques were adopted to collect primary data during the period 2018-19. The paper tries to quantify the accessibility of the Pando tribal people to the health services. More particularly it analyses their disease profile, sources of treatment, expenditure pattern made to avail health services, and also documented their perception and attitude towards modern treatment. While quantifying the qualitative responses of the Pando's, the study attempted to find out the gaps in and barriers to health service provisions. The study argues that why a community based decentralized health service delivery system based on empowerment of the tribal people is yet to be in operation? Why the tribal people as human endowment is not treated as a form of productive capital and the health services provided by the State do not treat tribal people as productive tool?

## INTRODUCTION

In a globalized world, trade is one of the powerful forces that link our lives across many boundaries. It is maintained on the basis of geography, ethnicity and economic ties of the people. The fact remains that the majority of world population are poor and are away from the ambit of getting welfare benefits. The human costs for not covering this section of the population are immense. In this scenario extending opportunities to the poor is a challenging task.

Inequalities in asset ownership, benefit sharing, access to resources and services not only serve as barriers of entry for the poor and the marginalized people in the market, but also made them more vulnerable to competitions. For the poor, livelihood issues are more concerned but directly it is depending on their good health, which is linked to the availability of and their accessibility to good health service systems. State control health service delivery system is under rapid transformation which many time throws multiple options for the stakeholders. Market forces basically lead it. The increasing cost of allopathic medicines many times neither available to, nor

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