

Sociological Study on The Health Issues of Women Among the Garos, Meghalaya.

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ABSTRACT

Health plays a significant role in satisfying the fundamental needs of the individuals as it improves the quality of life of all individual in the society. The health of women reflects her individual socio-cultural aspects. Therefore, it is important to look at women's health holistically as a sum total of their social as well as lived experiences towards understanding their health problems. Socio-cultural beliefs and practices of the people regarding health in the village is also another factor that contributes to health issues. Many women experience poor health and menstrual problems leading to various complications which are related to their reproductive health. Meghalaya is one of the remaining matrilineal society which is unique in its socio-cultural elements. The Garo tribe is one of the major indigenous communities of Meghalaya that relies on their traditional health practices apart from the health care services provided by the health departments. However, the state also has complex and deep-rooted challenges that manifest in a high rates of various health issues and challenges as well as low health-seeking behaviors, all of which contributes to the broader health concerns and reduce life expectancy. The present paper focus on the health issues of women among the Garos in Meghalaya.

Objectives of the Study: 1. To identify and analyze the health issues of women among the Garos, Meghalaya.

Methodology: The present study is based on observation method, group interview method as well as focus interview method.

Key Words: Anemia, Reproductive Health, Health Care, Women' Health, Physical Health, Health Worker.

INTRODUCTION

Profile of Meghalaya

Meghalaya literally means "the abode of clouds". "Meghalaya is a hilly state in north-eastern India with an estimated population of 3,211,474 as of 2016. It has a predominantly indigenous population belonging to three major tribes: Khasi, Garo and Jaintia with one of the largest matrilineal cultures in the world as their identities are strictly related to maternal lineage¹". The Khasi, Garo and Jaintia are the descendents of ancient people having distinctive traits and ethnic origins as their children take the name of their mother's clan, and identities are closely linked with maternal lineage. Traditionally, the youngest daughter in a family inherits the ancestral land of her family, and she would be obliged to take care of her parents and unmarried siblings.

The Northeastern states of India are inhabited by a number of small and large tribes having their own unique cultures. All the northeastern states including Meghalaya have been given particular focus under the National Rural Health Mission (NRHM) due to poor healthcare coverage and lack of healthcare infrastructure. In Meghalaya, the rural health care system more or less lingers to be same and follow traditional practice. With many remote tribal areas spread at all over the hilly tracts of the state, it become difficult to monitor the health facilities by the health departments for the inhabitants of the state. As a consequence, there is major shortage of specialized medical and paramedical staff, infrastructure facilities and drugs. "Pregnancy, childbirth and the

postnatal period of women should bring positive experiences, ensuring that women and their babies reach their full potential for health and well-being”². However, these stages of women’s life still carry considerable risk to their life as well as to their families. Many women during these stages, they lose their lives due to related complications during pregnancy, childbirth, postnatal period and also due to inadequate health care services especially in many remote areas of the state.

Health is universal in nature but all groups of society have their own perspectives of health relating to their culture as it constitutes an integral part of human development. Availability of an accessibility and affordable health care system is essential for enabling good health. Good health not only means a state of absence of disease or infirmity of an individual but a complete physical, mental, spiritual as well as social well-being of an individual. The health of an individual is influenced by both its social and economic circumstances and the healthcare services it receives. Apart from these factors, it is widely acknowledged that health of the individuals is influenced by various natural forces including, food, safe drinking water supply, housing and sanitation. Thus, health of an individual is the balance between natural and spiritual forces and also between individual and community.

Health is the most significant possession of all human being as it is an asset for an individual and community as well. However, the health of women is intrinsically linked to their status in society. In fact, the health of women affects the household economic well-being, as a woman in poor health will be less productive in labour force. Women’s health plays an important role in the health of the children as women in poor health are more likely to give birth to unhealthy or low weight infants. “The World Health Organization (WHO) defines health as “a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity” and its objective of “the attainment by all people of the highest possible level of health” has already provided a broad-based foundation for the developmental approach toward positive health as a mandatory function of its member states and other stakeholders”³. Since women also play a significant part of all-round development of society and economy, it is important to note that a woman contributes the most important factor to human well-being and economic growth as well.

Despite all the progress made by the health departments in the field of women's health, in all human societies mostly in rural areas, women still suffer from health issues in various stages of their lives, especially during adolescent and adulthood. In almost every society, health of women is one of the major issues in the present world. “World Health Organization, 1948 states that health is positive concept emphasizing social and personal resources as well as physical capacities”⁴. However, women's health is also affected by their social conditions, such as poverty, unemployment, and family responsibilities because, women’s health in the society is highly dependent on socioeconomic factors such as, income, social support, social class, community safety, working conditions as well as on the level of their education. “Poor women are unable to afford treatment when ill; suffer gender discrimination, poverty and the burden of care; have low esteem due to socialization, and therefore have less decision making power with regards their health”⁵. The main factors that contribute to the health issues of women such as problem of malnutrition and sanitation are due to lack of economic problems, and also due to the lack of education and awareness. However, many studies have reveal that the major

² Rajkonwar, Dadul (2024) “**Accessibility of Maternal Health Care Services and its Impact on Health among Married Garo Tribe Women of Reproductive Age in Assam: An Observation**” International Journal of Contemporary Research in Multidisciplinary. p.75

³ Plianbangchang, Samlee (2018) “**Health and Disease Concepts: An Appraoch to Health Development**”, Journal of Health Research, p.385

⁴ V. Suneetha (2019) “**Issues and Concerns of Women Health in India**”, International Journal of Innovative Studies in Sociology and Humanities, p.26

⁵ Nonglait, Laiarihunlang L. and Rymbai, Jessica (2024) “**Feminisation of Poverty and Women’s Health**”, IOSR Journal of Humanities and Social Science (IOSR-JHSS) p.61

problem relating to women's health in almost every society is mal-nutrition, gender inequality, education and social security. Another most common health issues among women includes iron deficiency, micronutrient deficiency in children as well as in pregnant women. Mostly, infants, women of childbearing age and pregnant women suffer from iron deficiency.

OBJECTIVES OF THE STUDY

To identify and analyze the health issues of women among the Garos in Meghalaya.

METHODOLOGY

The present study is based on observation method, group interview method as well as focus interview methods to analyze the health issues of women among the Garos in Meghalaya.

Statement of the Problem

Health status of women can be examined in terms of various indicators which vary by socio-economic standing and cultural norms. Socio-economic determinants play a significant role in the health of women. Malnutrition, lack of proper health education and lack of treatment for diseases all contribute to the dearth of healthcare resources available to women in rural areas. Poor socio-economic conditions limit the access to adequate healthcare, resulting in the poor health of children as well as mother's abilities to lead full, productive lives at home and in society as well. "Simply, the primary goal of maternal and child health nursing care can be stated as the promotion and maintenance of optimal family health to ensure cycles of optimal childbearing and childrearing"⁶.

Currently, women living in the rural areas face various health problems which ultimately affect the family as well as community. Deficiencies in nutrition cause long-term damage to both individuals and society resulting in less productive at work. Health issues like physical retardation and reduced cognitive abilities arise due to malnutrition during pregnancy.

Significance of the Study

The significance of the present study is to observe and understand the health issues of women among the Garos in Meghalaya. "Health communication like health education is an approach which attempts to change a set of behaviors in a large-scale target audience regarding a specific problem in a predefined period of time (Clift and Freimuth, 1995)"⁷. As women are the key in maintaining healthy families, the basic health care needs must be provided through awareness on health education. As poverty hampers the ability of women to use available maternal care services for themselves as well as for their children. Therefore, in order to strengthen the health of women, multiple dimensions of well-being must be analyzed in relation to global health averages.

FINDINGS OF THE STUDY

In our study we have found out that, many women suffer from anemia especially during pregnancy as well as during lactating period due to deficiency of iron-rich and nutrients-rich foods as women losses iron because of menstrual blood flow as well as during childbirth. Apart from these, there are certain health issues faced by the women such as menstrual disorders, post-delivery weakness, malaria, jaundice, skin problems and fever with cough, cold and so on and so forth. Many women experience post-delivery weakness which can further leads to complication in their health. Malnutrition is one of the health issues found among the pregnant women living

⁶ Pillitteri, Adele (2010) "**Maternal and Child Health Nursing: Care of the Childbearing and Childrearing Family**", Lippincott Williams and Wilkins, Philadelphia. p.4

⁷ Schiavo, Renata (2007) "**Health Communication: From Theory to Practice**", Jossey- Bass A Wiley Imprint, San Francisco, p.9

in rural areas. The short-term effect of malnutrition among women especially during pregnancy and lactating period includes weakness and recurring illness which ultimately hampers all vital functions of the health of women causing measurable effect on health such as low weight and growth retardation in children. Furthermore, malnutrition cause decreased immunity leading to serious health issues among women and also the occurrence of chronic disease like diabetes, hypertension, heart diseases, anemia and etc.

It has been found that, malnutrition occurs among pregnant and lactating mothers due to insufficient nutrients intake during pregnancy and lactating period. Apart from these, causes of malnutrition among women living in the remote areas occurs from various interconnected factors including poverty, poor sanitation, inadequate hygiene and limited access to health care as well due to lack of education and awareness. It has been found from the observation that, the Garos used a kind of potash (sodium) for cooking which they obtain by burning dry pieces of plantain stems locally known as 'kalchi' or 'katchi' but most people today replaced this locally made potash by sodium which is available in markets. This soda burns all the essential nutrients available in the foods and ultimately leading to malnutrition. Another factor that has been observed from the study is, the cause of malnutrition among the women is that poverty restricts access to nutritious food leading to inadequate dietary intake. Lack of access to clean water and sanitation facilities often leads to nutritional health issues in women as many household in the villages do not have a proper sanitation facilities.

In order to prevent maternal mortality and infant mortality as well as malnutrition, it is important for the mother to have nutritious foods during pregnancy as well as during lactating period. Thus, the health departments and various health workers play a significant role in the village in solving the health issues of women. At the ground level, the health workers tries to solve the issues by providing supplementary foods under the Integrated Child Development Services (ICDS) scheme through Aanganwadi and other health workers. The ICDS Scheme focuses on improving the health and nutritional status of children under the age of 6 years including pregnant and lactating mothers to ensure overall well-being of both mother and children.

The study found that, reproductive health issue occurs particularly due to early marriage since prevalence of early marriage is high among the women especially in remote areas of Garo Hills causing teenage pregnancy and frequent pregnancies which contributes to reproductive health issues such as complications during childbirth. It can be said that the complications that lead to reproductive health issues causing maternal mortality during pregnancy as well as during delivery and after childbirth can be prevented by well-planned intervention at the grass-root level. It can be observed that, most of the women of reproductive age especially those women living in remote areas do not have full access to maternal health care service. It is found that, there are certain reasons that caused barriers among the women living in remote areas in accessing health care service provided by the health department. According to our observation, many women of reproductive age in the village are hard-working and they are ignorant about the benefits of the health care services provided to them due to work overloaded as well as due to financial constraints.

Another reason for reproductive health issues as observed from the study is the lack of education, it is considered as one of the major contributors to reproductive health problems. Education helps in strengthening the reproductive health problems among women in numerous ways. It enhances the ability to exercise control over the sexual relationship, expose a woman to time-tested reproductive health methods, pregnancy preferences and family planning. Women in the village with reasonable educational qualification have more access to better reproductive health sources than women who are less qualified. The educational level of the spouse and the economic status of the family were also found to be equally contributing to certain reproductive health issues.

The study observed that the accessibility of high-quality health care during pregnancy and after childbirth is very essential for the reduction of maternal mortality rate. In order to reduce the maternal mortality rate of women it is important that all pregnant women should receive adequate antenatal care (ANC) services and attend health awareness programs and activities provided to them in the village by various health workers and departments. In addition, all delivery should be attended by skilled health professional in order to prevent complications during childbirth and also to prevent maternal mortality as well as child mortality. However, it has been observed from the study that, some women in the village resorted to home delivery rather than institutional delivery leading to complications in the health of mother. In some cases, despite being aware of

the importance of institutional delivery, they chose home delivery due to financial constraints, as they could not afford the expenses associated with the hospital delivery. Furthermore, some women in the villages felt that pregnancy is a natural process and they believed institutional delivery is necessary only in complicated cases.

Another, major challenges that cause health issues of women is due to economic constraints as most of the rural population relies on agriculture primarily for their livelihoods. As a result of this, poverty and limited income sources restrict access to healthcare services. Insufficient knowledge or lack of awareness about reproductive health and hygiene practices also contributes to the health problem of women in the village. Pneumonia is another common health issues among women which is found during pregnancy. Pneumonia often leads to serious health consequences for both the mother and the child which results in low birth weight, preterm birth and respiratory failure. It is observed from the study that, another major health issues among women during pregnancy is fever with severe headache.

Women also suffer from respiratory disease as they use unclean fuel such as kerosene for cooking purposes. As women in rural areas cook food for their family using firewood or charcoal. Almost every household in the village does not have proper chimney and thus the smoke of the firewood makes the air unclean and can cause health issues like breathing problems. The study has found that jaundice and gastrointestinal problems are also prevalent among the women. Gastrointestinal problem is caused due to the use of contaminated water or improper food habits. Apart from these, some minor health issues found among the women includes cold, diarrhea, dysentery, body pain and indigestion.

With implementation of various government schemes through National Rural Health Mission (NRHM), Accredited Social Health Activist (ASHA), Aanganwadi Worker and other community health worker, the present health scenario of women has been showing significant improvement. The community participation in the village with different health programs and activities has also increased as they are getting benefit from the healthcare services. In order to strengthen the health of women in the village, various health-related day to day activities focusing on pregnant mothers and lactating mothers are being monitored by ASHAs, Aanganwadi and Auxiliary Nurse Midwife (ANM). Apart from these, efforts are being made for rural residents to improve the health status of pregnant women by providing quality care like antenatal check up at the ground levels and by improving the accessibility to health care services with regular Village Health Nutrition and Sanitation Day (VHND). In order to improve the health status of women in the village, the health departments organizes awareness programs focusing on various health issues such as maternal and child health. Apart from focusing on maternal and child health, the health department and health workers give awareness which focused on various infectious diseases like malaria and tuberculosis. The health department also gives awareness on nutrition, hygiene practices and family planning through health camps and various health programs in the village.

CONCLUSION

The present study has found that the major health issues among the women in the village had prevalence of anemia which often leads to abnormal blood pressure during pregnancy as well as after childbirth. The study has also found that, reproductive health issues are other common issues among the women in the village that causes complications during pregnancy and childbirth. Pneumonia is also found to be common health issues among women which cause common cold, fever, respiratory failure and low birth weight of children. However, the health departments and the state governments have been taking initiatives to overcome all these health issues by implementing and organizing various health programs and schemes. In fact, better health is central to human happiness and well-being as it makes an important contribution to economic progress, as healthy populations live longer, are more productive, and save more. Women's health is defined as that, which varies a lot from that of men in many unique ways. And therefore, there is an urgent need to improvement of health and hygiene, education and social networking, recreation and cultural facilities especially for women. There should be new policies and programs be launched in order to upgrade the socioeconomic status of women. Therefore, it is important to look into the overall development of women's health especially mothers in order to prevent the disabilities and illnesses of the children.

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