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SANITATION, HYGIENE AND HEALTH CARE PRACTICES AMONG THE GORKHA PEOPLE IN DWARIKA VILLAGE OF KANGPOKPI DISTRICT, MANIPUR

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Abstract

The study examines the sanitation, hygiene, and healthcare practices among the Gorkha,in Dwarika village, located in Kangpokpi District of Manipur. The villagers, primarily of Gorkha descent, rely on traditional remedies alongside limited access to modern medical care. Despite the lack of formal healthcare facilities and inadequate sanitation system, the community remains resilient in their efforts to maintain health. The people of Dwarika demonstrate a strong commitment to hygiene, keeping their households and surroundings clean through daily practices deeply influenced by cultural and religious traditions. Their hardworking nature is evident in their ability to manage household cleanliness and sanitation effectively, despite the infrastructure limitation. The villagers' lifestyles reflects a harmonious blend of modern and traditional approaches to both health and hygiene, ensuring their well-being as best as they can under the circumstances.

Keywords

Sanitation, Hygiene, Traditional healthcare, Cultural practices, maternal care.

Introduction

Dwarika village faces significant challenges related to sanitation, health care, and infrastructure. The majority of the village's population is engaged in the primary sector, relying heavily on farming and cattle rearing for their livelihood. Due to poverty, there is a lack of access to nutrient-rich food and supplements, leading to widespread nutritional deficiencies among the villagers. With few opportunities in the secondary and tertiary sectors, the community remains heavily dependent on their agricultural and livestock resources. When it comes to hygiene, most households have toilets, either attached to their homes or located at the back. Villagers claim to clean their houses, toilets, and barn daily. However, despite these efforts, poor sanitation remains a pressing issue. The pervasive odor of cattle dung is constant in the village, indicating improper waste management practices that pose potential health risks. While domestication plays a vital role in the villagers' way of life, it also contributes to the unsanitary conditions that negatively impact their

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health. The study aims the interconnected issues of health, sanitation, and hygiene in Dwarika, exploring how traditional practices interact with the village's urgent need for modern improvements. It highlights the importance of addressing these challenges through better sanitation systems, healthcare access, and infrastructure development to improve the overall well-being of the community.

Origin

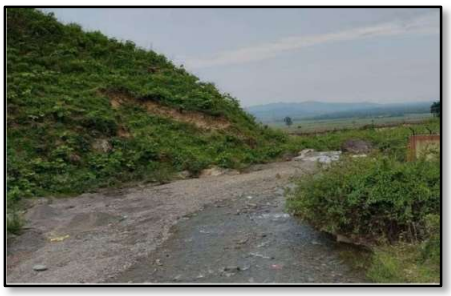
The origin of Dwarika village is closely tied to the migration of Gorkha (Nepali) families in 1997 from Khunkhu Naga village. Situated in the foothills of Leimakhong, Kangpokpi Districts, the village was formed by seven families who sought fertile agricultural land with good irrigation. The founding members of these families relocate primarily to improve their livelihood opportunities and avoid taxes levied by the Khunkhu Naga chief. The village, named by Prasad Acharya, took its name "Dwarika" from Nepali word "Durban" meaning the land between two rivers – The Keinam and Gurung Rivers. Overtime, the village expanded from a small area of 1 loura (around 2 acres) to its current size of 3.5 hectares. It was officially recognized as a village in 2003 under the Kangpokpi, Sadar Hill District Council in Manipur. Today, Dwarika is a growing community with roots in Nepali Gorkha heritage and continues to thrive as an agricultural hub.

The people of Dwarika village primarily consist of Gorkhas tracing their origins to Nepal and the historical migration of their ancestors to Manipur. According to local belief, the Gorkhas of Manipur originally came with Maharani Ishwari devi, a Nepali princess who married Maharaja Bodhachandra Singh (1908-1955), the last king of Manipur. Many of her relatives and other Gorkhas followed her, settling in various parts of Manipur over time. The present population of Dwarika comprises Gorkhas who migrated from different parts of Manipur, such as Chingmeirong, Pangei, and others. Prior to forming Dwarika, many of these groups lived together with the Khunkhu Naga and kuki tribes in Khunkhu Naga village. However, seeking their own land and community, the Gorkhas established Dwarika in the foothills. Today, while most of the Gorkhas in Dwarika own homesteads, a significant portion of the agricultural lands still belonging to the Sekmai Meiteis. As a result, many villagers work as agricultural tenants, cultivating fields own by the Meiteis and Khunkhu Nagas. Despite the challenges, The Gorkhas of Dwarika maintain a strong sense of cultural identity and community.

Dwarika village is situated between two significant rivers that provide natural boundaries and water resources. On the northern side, the Machangram River flows, known as the Makhuagiuky River by the Liangmei people and as the Gurung River by the Gorkha. To the south, the Kaliugiuky Rivers runs, which the Gorkha villagers refer to as the Keinam River. These rivers are important features of the landscapes contributing to the village's water supply and agriculture.

Source of water

Figure: ***Sources of water (a) river and (b) water tanks***



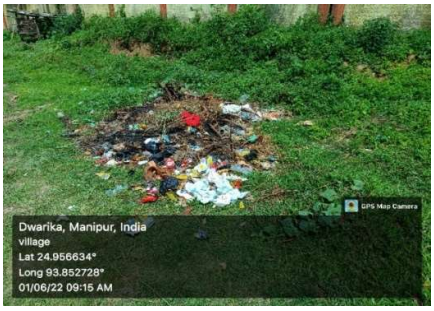
Gurung River

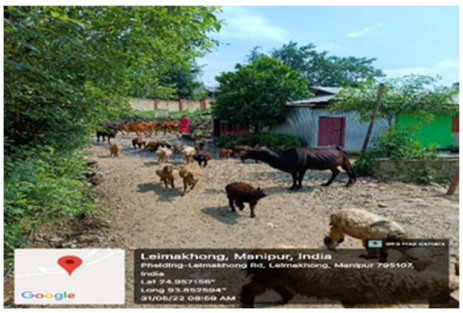
Keinam River

Water Tank

For domestic water use, the village relies on a shared water supply system that was introduced between 2014 and 2015. Drinking water is stored in a common tank located near the western edge of the village, close to the Krishna and Shiva Mandir. From this tank, water is distributed to each household through pipelines. Typically, one pipeline is shared by 4 to 10 households, ensuring that every home has access to clean water. The shared pipelines system has been a key improvement for the village, making water readily available for daily needs like cooking and cleaning. To ensure safety, the majority of families in Dwarika prefer to consume well-boiled water for drinking. Although the water supply system effectively meets domestic needs, agriculture in Dwarika largely depends on rainfall. The rivers are not directly used for irrigation, and rainwater remains the primary source for cultivating crops. Despite this the village has a stable and reliable water system that supports both household needs and general farming practices.

Sanitation and hygiene





The World Health Organization (WHO) defines:

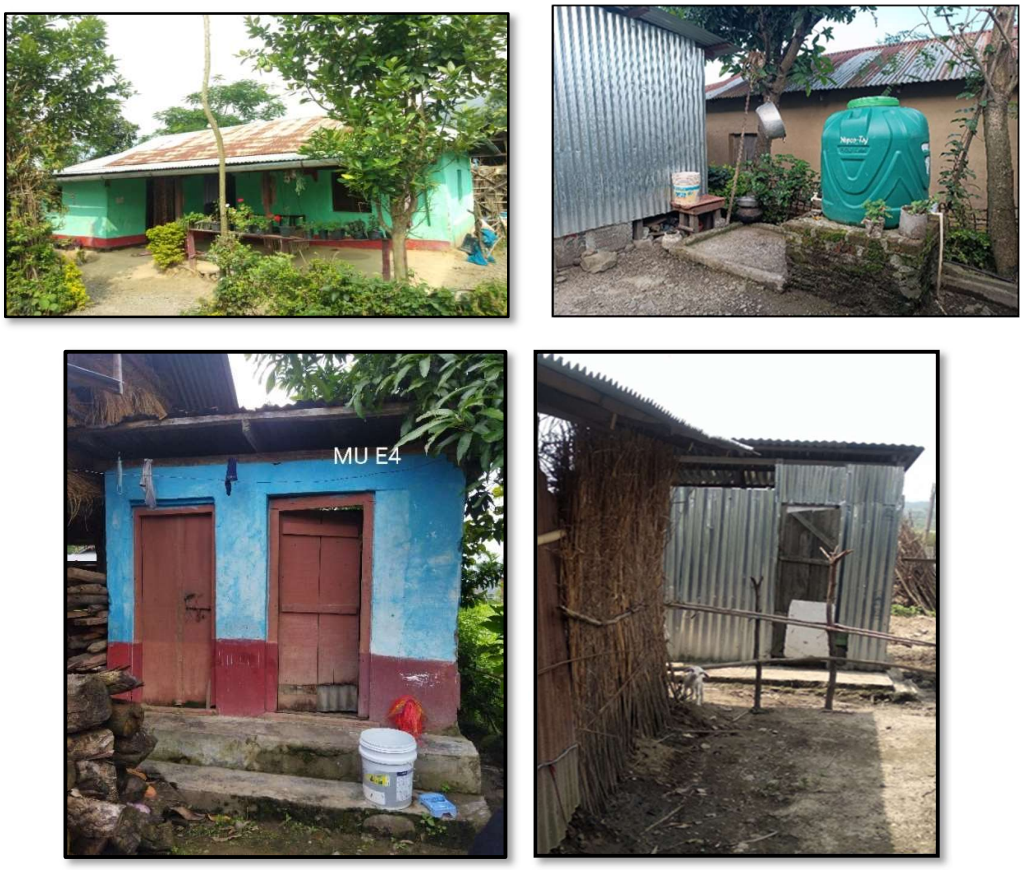
- "Sanitation as the Safe disposal of human waste and the provision of services and facilities for that. Sanitation also includes maintaining hygienic conditions through services like garbage collection and wastewater disposal."
- "Hygiene as the practice and conditions that help maintain health and prevent the spread of disease. Hygiene includes personal hygiene practices like hand-washing, bathing, and washing clothes."

In Dwarika village, there are no public toilets available, but each household has its own toilet, either located at the back of the house or attached. Most of these toilets are "kaccha" (makeshift) although some are "pucca" (permanent and well-built). Nearly all homes are surrounded by clean, well maintained yards, free of weeds. The absence of a formal waste disposal system has led residents to rely on individual methods of managing garbage. Most households collect their waste in bins and, after several days burn it as a common practice. This method of waste disposal, while convenient, raises concerns about air pollution and health risks associated with the release of toxic fumes from burning materials like plastic and other non-biodegradable items. Some waste instead of being burned, is dumped along the riverbank, which presents additional environmental challenges, including contamination of water sources and harm to local ecosystems. The lack of proper waste management systems, combined with these unsustainable practices, highlights the need for community-level interventions to establish safer and more environmentally friendly waste disposal methods.

Additionally, Dwarika suffers from a lack of proper drainage infrastructure within the residential areas. There is no public drainage system in place, so many households have resorted to digging their own drainage channels, which often lead into nearby paddy fields. These self-made drains are typically open, posing hygiene

and environmental challenges. The lack of a formal drainage system in the village is a significant issue, as it leads to water stagnation, poor sanitation, and potential health risks, particularly during the monsoon season when water level rise. Overall, while Dwarika maintains good household sanitation practices, the absence of public facilities and organized waste disposal and drainage systems points to infrastructural gaps that need to be addressed to improve hygiene and prevent environmental degradation in the village.

Individual and Household Hygiene



Pucca and Kaccha type toilets

In Dwarika, personal and household hygiene are deeply intertwined, reflecting a holistic approach to cleanliness that is both practical and spiritual. Individual hygiene practices begin with daily bathing, which is considered essential not just for physical cleanliness but also for religious purity. Bathing is mandatory before offering prayers, as worshipping their gods requires individuals to be clean. The daily rituals are followed diligently, reinforcing the cultural importance of

maintaining a clean body to honor religious duties. In addition to bathing, clothes are washed frequently, especially in larger families where children generate a higher volume of laundry. While some households wash clothes daily, other do so two to three times a week, depending on family size and necessity. Cleanliness in clothing is other aspects of maintaining personal hygiene, contributing to overall well-being and social respectability.

Households hygiene is equally prioritize, with homes being swept and mopped every day to remove dust, dirt, and germs. Many families go beyond basic cleaning routines, using a mixture of cow dung, mud, and water to mop the floors. This traditional practice, which might seems unusual in modern contexts, is highly valued for its effectiveness in controlling dust and keeping floors clean highlighting the ability to utilize readily available natural resources for cleaning purposes. Cow dung is believed to have purifying properties, and its use reflects a resourceful approach to cleanliness that draws on natural materials readily available to the community. Toilets are also maintained with a high degree of care, cleaned daily with modern cleaning agents ensuring that sanitation standards are met within the home.

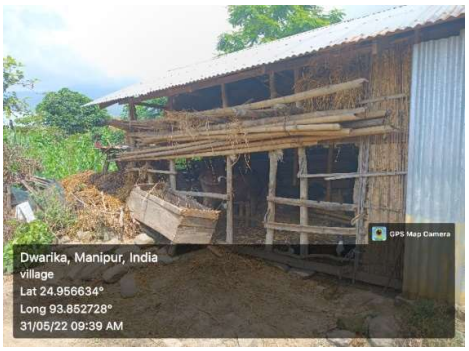
The relationship between individual and households hygiene is seamless, as both are viewed as essential to living a healthy, respectful, and spiritual sound life. After cleaning the home, individuals often clean themselves thoroughly, washing their hands after handling cow dung or cleaning toilets. This routine ensures that cleanliness is maintained both within the home and for each individual. For instance, families pay close attention to the quality of their drinking water- some boil it to prevent sickness, while others feel confident in using the water directly from natural sources. This careful attention to both personal and household cleanliness ensures that their living spaces remain healthy and their bodies are kept clean, creating a balanced and hygienic environment. The daily routine of individual and households in Dwarika are more than just habits; they are expression of cultural ethos that values purity, health, and respect for both the individual and the community. Even in the face of infrastructural challenges, such as the lack of proper drainage systems, the people of Dwarika take pride in maintaining high standard of cleanliness. This dedication to hygiene reflects a deep understanding of the connection between a clean environment and over-all well-being, blending traditional practices with practical health measures to create a clean, harmonious, and healthy living space.

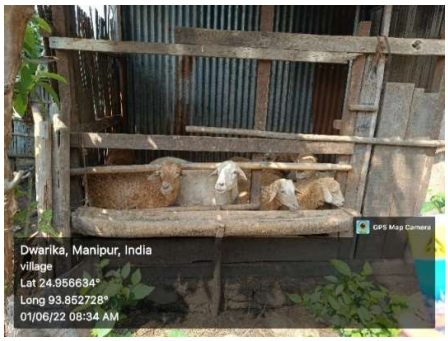
Domestication and its Hygiene Practices

Domestication is a central aspect of life in Dwarika village, where animals such as cows, ducks, goats, sheep, fowl and others provide essential resources like income, food and even cultural significance. The community collectively rears 1,143 livestock, which includes 228cows, 36 bulls, 186 fowl, 215 ducks, and 478 sheep

and goats. Cow milk, in particular, is a major product, with residents selling it to nearby to nearby towns and villages, creating a steady stream of income.

Cowshed and pen





Source: Fieldwork

Additionally, these animals provide meat, eggs, and other by-products that sustain daily life. However, maintaining good hygiene in domestication is just an important as the economic benefits, ensuring the health and well-being of both animals and the humans who care for them. Hygiene practices in Dwarika are shaped by both cultural values and practical needs. Many households begin their day by thoroughly cleaning their homes and surroundings, with some going as far as to clean twice a day to keep dust, dirt, and animal waste under control. When it comes to cows, residents take a unique approach.

According to local informants, using tools such as shovels or spades to clean cow dung is considered a sign of laziness. They believe that using cleaning tools doesn't clean the dung as effectively as using bare hands. Therefore, most of them prefer to clean by hand, ensuring that all waste is removed completely and neatly. Afterward, they washed their hands thoroughly, demonstrating a balanced between cultural beliefs and hygiene awareness.

For other animals, like goats, sheep, and fowl, the residents use more conventional cleaning tools such as broomsticks and other tools to maintain cleanliness of animals sheds. Despite the difference in approach, hygiene remains a priority across all forms of domestication. Moreover, animal dung, especially cow dung, is repurposed as fertilizer for kitchen gardens and agricultural fields, further emphasizing the community resourcefulness. This practice not only keeps the environment clean but also enhances soil fertility, supporting crop growth and contributing to the community's agricultural activities. Domestication in Dwarika is not just about animal rearing, it is an integrated system that involves economic, cultural and hygienic practices. The community's careful balance between

cleanliness and resourcefulness ensures that domestication remains a sustainable and beneficial part of their everyday life.

Pediatric Health Care

Nutrition is a fundamental aspects of maternal and child health, profoundly influenced by cultural perceptions and beliefs regarding the dietary practices of pregnant and lactating women. In Dwarika village, despite the lack of Primary Health Centre, the community makes significant efforts to prioritize the health and well-being of their children. This commitment is evident in their approaches to feeding, breastfeeding, and immunization, which reflects a blend of traditional practices and the need for modern health interventions.

Breastfeeding is widespread and essential practice in Dwarika. Mothers typically begin breastfeeding their infants immediately after birth, establishing a strong bond with their newborns through this intimate act. Feeding schedules are not always regular; instead, mother respond to their infants' cries, which may indicate hunger, discomfort, or other needs. The first milk that mothers provide known as colostrum is rich in nutrients and antibodies, making it vital for the infant's health. Most mother in the community continue to breastfeed until their child reaches the age of two, with some extending breastfeeding to three years or until the mother becomes pregnant again. In cases where a mother faces health challenges that prevent her from producing breast milk, bottled milk serves as an alternative. The term 'weaning' is used to denote the process by which an infant changes from breast milk to mixed date. It is the shifting of child from breastfeeding to other forms of nourishment.

Weaning is a process in which an infant is gradually introduced to variety of liquid, semi-solid and solid foods to affect a smooth shift to the adult or family food pattern. (Joshi, 2012). As infant grow, families typically introduced semi-solid food between three to seven months, such as grinding rice with a locally made grinder (referred to as "Jado" in Nepali) and mixing it with boiling milk and ghee. Solid foods may be introduced later, at around twelve to eighteen months, depending on family practices and beliefs.

Immunization plays a critical role in safeguarding children's health against serious diseases. In Dwarika, The absence of a primary healthcare center necessitates travel to neighboring PHC (Primary Health Centre) like Leimakhong, Kanglatombi, Awang Sekmai for vaccinations. Occasionally, community health workers, known as ASHA members, visits Dwarika to administer vaccines and provide information about immunization schedules. Each child in the community has a vaccination record, ensuring that they receive the necessary shots to protect them from preventable diseases. Newborns delivered in hospitals typically receive their first doses of Hepatitis B, and OPV (Oral Polio Vaccinations) at birth, with

additional vaccinations scheduled at specific intervals during the first year. Common health issues faced by the children in Dwarika include fever, cough, and diarrhea, which parents often managed at home. However, more severe illnesses may require interventions from local healers or trips to hospitals in Imphal city, primarily RIMS (Regional Institutions of Medical Science).

Home-based remedies

Since there is no healthcare center in Dwarika village, residents often visits nearby hospitals when they fall ill. For emergencies or routine check-ups, many travel to imphal city for treatment. However, some people prefer to visit the "Dhami" or local healer, known as "Maiba" for medical help. The Dhami prepares herbal rremedies and other natural treatments to give to the patient. In some cases, people recover after receiving Dhami treatment. In case where Dhami medicine doesn't work, patients will seek further medical care at a hospital. In serious situations where the patient is unable to move, the healer will visit their home to understand their condition. Many people within the village the Dhami is the first choice for treatment and they trust traditional healing methods more than modern medicine. Others, however, are more inclined to rely on hospitals and conventional healthcare. Despite the growing presence of modern medical services in nearby towns, Dhami treatment remains significance and trusted part of the local healthcare practices in Dwraika.

Apart from these practices, the people also possess some knowledge of herbal plants and their medicinal uses. By utilizing these plants, they created homemade remedies for common ailments such as cold, fever, and other illnesses. This traditional knowledge compliments the Dhami's treatments and serves as an additional resource for managing health issues within the community. Some residents of Dwarika prepare homemade medicines using local herbs to treat various ailments.

Disease and their remedies are as follows:

- Typhoid: a mixture of Bringraj (*Eclipta prostrate*) plants and honey is consumed without adding water.
- Cold and Cough: Tulsi (*Ocimun tenuiflorum*) leaves are mixed with honey and eaten without water.
- Stomach ache: Tulsi leaves are used as a remedy for stomach aches.
- Muscle Pain: Muscles pain is treated by massaging the body with warm water.
- Dysentery and Diarrhea: Guava leaves can be eaten directly or crushed and mixed with a small amount of water for consumption.
- Allergies: For this treatment, ash or marigold leaves are rubbed on the affected skin.
- Snakebite: The Titepati (*Artemisia vulgaris*) plants is used to treat snakebites, mainly in cattle.

- Accidentals cuts: Crushed Bhringraj leaves are applied directly to wounds to aid healing.
- Dehydration and Diabetes: The wood apple (*Limonia acicissimia*) plant is used to treat dehydration and diabetes. It is also used in religious rituals, especially to worship the god Shiva.

Pregnancy and Lactating Mother

In Dwarika village, upon learning of their pregnancy, women typically seek medical attention by visiting a doctor for an initial examination. The primary healthcare facilities they visit for prenatal care are RIMS (Regional Institute of Medical Sciences) and JNIMS (Jawaharlal Nehru Institute of Medical Sciences), both located in Imphal city. During this visits, expectant mothers are prescribed necessary medication and advised to attend follow-up appoinments as per the doctor's recommendations. However, financial constrains often prevent some women from accessing regular medical care, leading them to forgo both the check-ups as prescribed medications throughout the duration of their pregnancy. In addition to medical care, significance traditional practiced during pregnancy and after childbirth is the consumption of "Jwano," a locally revered soup believed to offer numerous health benefits to both the mother and child. The soup is prepared using carom seeds, which are fried in ghee before being combined with ginger, garlic, and onions. This mixture is further sautéed before adding water, after which it is simmered to create the final product. Jwano is consumed regularly by pregnant women and continue to be a staple in their dies postpartum, especially during breastfeeding.

The villagers attribute the consumption of Jwano to enhancing the mother's strength and energy, facilitating a quicker recovery following childbirth. Additionally, a widely held belief suggests that if a pregnant women does not drink this soup, her child may be at risk of developmental issues, such as growing up to be dumb.

Dietary customs during pregnancy and lactation are also guided by traditional beliefs. Certain foods, such as papaya, bamboo shoots, pumpkins, muskmelon, and spicy items like chilies, are considered harmful and thus avoided. Conversely, nutrients rich food like pomegranates, milk, locally sourced chicken, ghee, and various fruits are encouraged, as they are believed to promote maternal health and optimal fetal development.

The physical challenges associated with pregnancy in Dwarika vary throughout its stages. During the first trimester, nausea and vomiting are prevalent, followed by stomach and chest discomfort in the fifth and sixth months. Appetite loss becomes a concern in the seventh and eight months, while back pain dominates in the final month of pregnancy. Despite these physical difficulties, local customs

encourage pregnant women to engage in light household task, as it is believed that too much rest may weak them and hinder their ability to endure childbirth. Nonetheless, in cases where a women experiences significance health issues, she is allowed to rest as necessary.

After childbirth, the mother is given approximately two months to recuperate, during which she is provided with nourishing foods and sufficient rest. The consumption of Jwano soup remains a central aspects of her postpartum care, believed to aid in the recovery process and ensure she regains that strength needed to care for newborn. Maternal care in Dwarika village is shaped by a blend of modern medical practices and deeply ingrained cultural traditions. While economic challenges may limit consistent access to healthcare, traditional remedies like Jwano and local dietary practices continue to play a vital role in ensuring the health and well- being of both mother and child.

Cow Urine as a Health Remedy

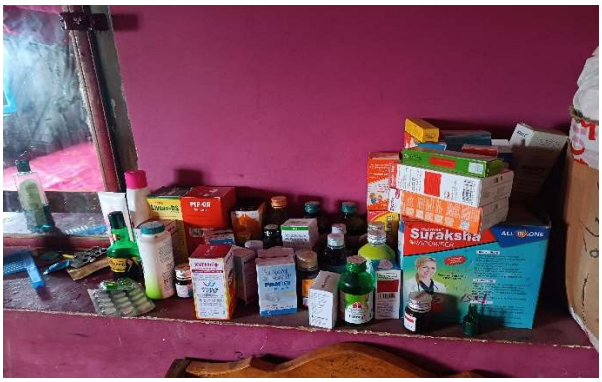
According to the informants, cow urine is used in various traditional practices, each serving a distinct purpose. Some of these uses are as follows:

- Managing High Blood Pressure: Fresh cow urine is believed to help in lowering high blood pressure when consumed.
- Treatment for Skin Rashes: It is used as a remedy for skin ailments, where people bathe with cow urine to treat rashes and other skin conditions.
- Post-Childbirth and Religious Cleansing: After childbirth, cow urine is consumed for its supposed benefits in cleansing the body, mind, and soul. This practice is also common during the puja festivals, where it serves as a ritualistic purification.
- PANCHA KABBE (Gangut): This is a drink prepared using five ingredients, hench the name “pancha,” meaning “five.” The ingredients include cow urine, milk, curd, dubo plants (*Cynodon dactylon*), and ghee. It is a highly regarded beverage in their culture.
- Ritual following a Death: When someone passes away, a specific rituals is performed on the 10^{th} day, where the relatives drink prepared cow urine. On the 13^{th} day, all the family members partake in this drink and as a form of rituals purification.
- Post-Delivery Naming Ceremony: On the 11^{th} day after childbirth, a pandit (priest) visit the households for the naming the ceremony, the mother and other family members drink prepared cow urine as a part of ritual cleansing that is believe to purify them physically, mentally, and spiritually.

One unique aspects of this practice is that not only just any cow’s urine is considered suitable. The urine must come from a specific type of cow, one that is

female, has not mated, and has never given birth. This cow is viewed as particularly pure, and her urine is believed to carry stronger healing and cleansing properties.

Local Pharmacy



In Dwarika, there is a small pharmacy run by a qualified pharmacist who recently completed her diploma from Saraswati Institute, Pangei. In addition to managing her pharmacy in Leimakhong Bazaar, she also keeps a supply of medicines at her home to assist local villagers. The common health issues and the medications she provides are as follows:

- Fever: Paracetamol 500
- Stomach ache: Spasmodart and Cyclopam
- Dysentry: Lomofen and Noting
- Headache: Stopache and Discipline

CASE STUDY

Case I: Study on Eye Treatment

The informant reported that her eye problems began approximately five years ago. Initially, she experienced headaches accompanied by blurred vision. She suspected that the medication she took for the headache, without consulting a doctor, might have cause side effects affecting he eyes. The family first sought treatment at Shija Hospital, where the doctor recommended surgery. However, due to financial constraints, they were unable to proceed with surgery at that time. The family requested the doctor to delay the surgery until they could gather the necessary funds. Two years later, they returned to the hospital with the required amount, but by then, it was too late for surgery. The doctor informed them that surgery was no longer a viable option. In search of further treatment, they travelled to Nepal on 21st September 2021, but the doctors there also confirmed that it was too late for surgery. They returned to their village without any alternative solution. Currently, she continues treatment at Shija Hospital. She attends check-ups every three months and

remains hopeful that her condition can still be improved. She diligently takes her prescribed takes her prescribed medication and never misses a scheduled appointment with the doctor. Despite the challenges, she holds onto the belief that her vision can be restored.

Case II: Kidney Stones

The informant shared that his health issue began when he experienced severe stomach pain. He sought medical attention at RIMS, where the doctor recommended an ultrasound. The test results reveal the presence of a kidney stone. He was on medication for a period of time, and once his condition improved, he stopped going for follow-up check-ups. Later, he began using local treatment to manage his symptoms. Whenever he experiences stomach pain, he drinks IK LAVIR, a traditional medicines known to help with kidney stones. The plant used for the medicine is gathered from mountains, washed, and boiled to make a medicinal soup. He only consumed IK LAVIR when he has stomach pain and does not use it regularly. He collects the plants himself, and his wife prepares the remedy for him.

Case III: Pregnant women

The informant is eight months pregnant with her second child. Her first delivery was normal and successful at RIMS hospital. During this pregnancy, she has faced several challenges, particularly during the first five months when she experienced frequent vomiting. Complications began to arise around her seventh month of pregnancy. She's currently on medication, including iron and calcium tablets, which she is advised to take twice daily after meals. In addition to her prescribed treatment, she consumes Jhuano soup every day, a traditional remedy considered vital for expectant mothers in her community. The soup is believed to provide strength and stamina, and there is a cultural belief that if a mother does not drink it, her child may face speech difficulties later in life.

Conclusion

The case of Dwarika village highlights a significant gap between traditional health practices and modern healthcare needs. While the villagers have developed resourceful ways of managing hygiene and health through cultural traditions, such as the consumption of Jwano soup and the use of cow urine, these practices are insufficient in addressing the broader public health challenges they face. The lack of basic infrastructure, such as proper sanitation, drainage, and healthcare facilities, presents a serious risk to the community's health, particularly in the long term. The absence of a proper waste management system, coupled with poor drainage, has led to environmental degradation and increased health hazards. During the rainy season, water stagnation exacerbates these problems, creating breeding grounds for disease-carrying insects and increasing the likelihood of waterborne diseases. The reliance on traditional remedies, while deeply rooted in cultural beliefs, cannot replace the

urgent need for modern healthcare services, especially when it comes to managing more serious or chronic health conditions. Improving Dwarika's infrastructure is essential to ensure the community's future well-being. By investing in public sanitation facilities, waste management systems, and healthcare centers, the village can address the health risks posed by environmental conditions and limited medical care. While traditional practices play an important role in maintaining cultural identity, integrating them with modern healthcare services would provide a more holistic approach to health management. This balance between preserving traditions and embracing modernity is key to ensuring the long-term sustainability and health of the people of Dwarika. Without these critical interventions, the community's health will remain vulnerable, and the potential for growth and development will be hindered.

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