

Health and Life style Status of Rajput Sikhs in Doaba Region: a Study Report

Kuljit Singh*

*Research Scholar, Department of Sociology
Singhania University, Pachheri Bari, Jhunjhunu, Rajasthan

Abstract

The present study is an attempt to explore the health and lifestyle status of the Rajput Sikh community of Doaba region. It places the community on a broader canvas of the history of greater Punjab, specifically during the British period, with a view to evaluating its role and contribution and exploring the aspects of health and lifestyle among its members. Social change refers to a process responsive to many types of changes, to changes in the manmade conditions of life, to changes in the attitude and beliefs of men, and to the changes that go beyond the human control to the biological and the physical nature of things.

The Rajput Sikh community in Doaba region has experienced a rapid change in health and life style status since pre and post-independence, with the onset of green revolution and implementation of economic reforms by the Government.

Key Words: Health, Lifestyle, Sikha Rajput.

Introduction

Health is a natural facet of liveliness - both by definition and realization. The ancient Indians had attributed the secret of "*jivem shardah shatam*" - hundred years of vigorous, healthy, happy and creative life - to the total harmony of the mode of living with the Nature and the spiritual inheritance of life.

Lifestyle plays an important role in human life. In sociology, a lifestyle is the way a person lives. Sedentary lifestyle is the big risk factor in common disorders. Sedentary lifestyle is a medical term used to denote a type of lifestyle with no or irregular physical activity. A person who lives a sedentary lifestyle may colloquially be known as a couch potato. It is commonly found in both the developed and developing world. Sedentary activities include sitting, reading, watching television and computer use for much of the day with little or no vigorous physical exercise. A sedentary lifestyle can contribute to many preventable causes of death.

The health infrastructure in the state has expanded sharply in rural areas. In 2000-2001, four-fifths of the health institutions were in rural areas as against 57.9 per cent in 1970-71. During 1970-71 to 2000-01, health institutions in rural areas increased 5.7 times as against two times in urban areas. However, the quality of the health infrastructure available in urban areas is better than in rural areas. During this period, of the total health institutions in rural areas, 4.1 per cent were functioning as hospitals as against 29.6 per cent in urban areas. The majority of the health institutions (68.5%) in the state catered to the primary health care needs of the rural community.

Rajput Sikh community has experienced one of its greatest transitions in history since the advent of the British rule. Its technological foundation, its economic structure, its social institutional framework is based on the caste-system and the joint family. It's political organization, its ideological orientation and cultural value systems have undergone a qualitative

transformation. Though the British rulers initiated changes in Indian society basically to serve their own interests, these changes were not uniform or symmetrical and, therefore, created specific types of contradictions and antagonisms within Indian society.

After the withdrawal of the British from India, the Indian people have entered a new phase of existence; independence has released their initiative and creative energies. The Government, as well as other agencies, have been evolving and operating various schemes to bring about changes in the social, economic, political and cultural life of the people. The study

of these changes is fascinating and instructive, as it gives glimpses of the social change affecting one-fifth of mankind.

This study covers the Rajput Sikh population. Rajput Sikhs live in 97 villages of 11 districts of Punjab and Haryana State. Among these 11 districts 10 districts Jalandhar, Hoshiarpur, Kapurthala, Shaheed Bhagat Singh Nagar, Fatehgarh Sahib, Moga, Patiala, Faridkot, Ludhiana, Bathinda are in Punjab state and 1 district Ambala belongs to Haryana state. The number of villages in all these districts is shown below:

S. No.	Name of District	Total No. of villages
1	Jalandhar	30
2	Hoshiarpur	31
3	Kapurthala	09
4	Shaheed Bhagat Singh Nagar	07
5	Fatehgarh Sahib	07
6	Moga	04
7	Patiala	02
8	Faridkot	02
9	Ludhiana	01
10	Bathinda	01
11	Ambala	03
Total		97

Table No. 1 Rajput Sikh villages in districts of Punjab and Haryana.

Methodology

This study was an attempt to examine the health and lifestyle status of Rajput Sikhs of Doaba region of Punjab state of India. Rajput is a caste in India and Punjab state is the homeland of Sikh population. Rajput Sikhs have been mainly living in Punjab both before and after the partition of India.

The focus of this study is to measure the social and economic changes in concern with Rajput Sikhs.

The samplings for the present study were selected as 7 villages from the four districts Hoshiarpur, Jalandhar, Kapurthala and Shaheed Bhagat Singh Nagar of Doaba

region. A source list of 77 villages in alphabetical order had been prepared for sampling and from total 77 villages of these four districts 7 villages had been

selected by applying systematic sampling technique. From these 7 villages all houses of Rajput Sikhs were chosen for data collection.

Results:

Distribution of Respondents according to Health Status

S. No.	Health	Score	Percentage
1	Good	49	37.12
2	Average	79	59.85
3	Diseased	04	03.03
Total		132	100%

The data represented in this table pertains to the health status of Rajput Sikhs of the village. It is observed that 37.12 percent people have good health i.e. they are not suffering from any disease or ailment, 59.85 percent people are those who have average health i.e. they are suffering from a disease which is not life threatening and

have an average health. The third category represents 3.03 percent of people that are diseased and are suffering from a major and/or many diseases. Hence, the data indicates that only a part of the population of Rajput Sikhs in the village is diseased while about half of the population exhibit good health.

Distribution of Respondents according to Drug Addiction

S. No.	Addiction	Score	Percentage
1	Nil	67	91.78
2	Alcoholic	05	6.85
3	Drug Addict	01	1.37
Total		73	100%

The data presented in this table is regarding the problem of drug addiction among the Rajput Sikhs of the village. It is observed from the data that 6.85 percent people are alcoholic, 1.37 percent are drug addict and 91.78 percent people are neither alcoholic nor drug addict. Drug addiction is a growing serious problem in Punjab

state. It is the root cause of many other social problems and evils. The data in this table indicates that a considerable part of Rajput Sikh population of the village is alcoholic and drug addict. These evils may have affected their wellbeing and posed hindrances to their socio-economic development.

Distribution of Respondents according to Sources of Drinking Water

S. No.	Source	Score	Percentage
1	Hand Pump	58	43.61

2	Water Filter	50	37.60
3	Common Tap	25	18.79
Total		133	100%

The data presented in this table pertains to the sources of drinking water. It is evident from this data that 43.61 percent population of Rajput Sikhs of the village use hand pump for drinking water, 18.79 percent use common taps as the source of drinking water while 37.60 percent use water filter for drinking water. Drinking

water is an important factor to determine the health status of a person and using safe drinking water is an indicator of awareness among the people. It is observed from this data that a large part of the Sikh Rajput population use water filter. This shows that these people have awareness about the drinking water.

Distribution of Respondents according to Toilet Arrangement

S. No.	Type	Score	Percentage
1	Private	69	97.18
2	Common	00	00
3	Open Fields	02	2.82
Total		71	100%

The data presented in this table reveals the toilet arrangement of Rajput Sikh population of the village. It is discovered from this data that 97.18 percent people have their own toilet arrangements, 2.82 percent use open fields for this purpose. Earlier there were no private toilet arrangements available in the villages and people were used to open fields. It is evident from this data that a large majority of the Rajput Sikh population have developed their own private toilet arrangements in their households. This is a clear sign of socio-economic transformation.

Discussion & Conclusion

The findings of this study concerning the health status of Rajput Sikh community discovered that 38.48 percent people have good health, 58.17 percent have average health and 3.34 percent people are diseased. It is apparent from this study that majority of Rajput Sikh population have

good or average health but simultaneously apart of their population is suffering from serious ailments. Health statuses of the people have an important role in socio-economic development. A good health is must for effective development. Good health is directly related to nutritious food, safe drinking water, health consciousness and hygienic living conditions. In Punjab, the excessive use of insecticides, pesticides and fertilizers in the agriculture sector is creating health hazards among people.

Use of safe drinking water is an indication of person's consciousness and development. The data from this study on sources of drinking water explains that 48.45 percent people use drinking water from the hand pumps (means either a hand pump or a small tubewell installed in a household), 18.91 percent use water from the common taps and 32.63 percent have water filter installed in their households.

Hence, it is evident from the data that about one third population of Rajput Sikh community have the facility of safe drinking water in their households while majority of them use the hand pumps or small tube wells as the source of drinking water.

A hygienic living condition of a society indicates their level of socio-economic development. Toilet arrangement is one of the factors contributing to a hygienic living. The findings of this study regarding the toilet arrangement showed that 97.04 percent population of Rajput Sikh community has private toilet arrangements in their households, 0.17 percent use the common toilets made in their village and 2.39 percent are those who either do not

have toilet arrangement in their households or they are habitual of open fields. Hence, based on the data, it is concluded that most of the population on Rajput Sikh community have their own toilet arrangement in their households.

The ultimate conclusion of the findings for this study is that the Rajput Sikhs in Doaba region of Punjab have good health status, The findings of the study of Rajput Sikh community also indicate the serious situation of drug addiction and alcoholism. Hence, the health and lifestyle of Rajput Sikhs in Doaba region of Punjab has both positive and negative features however positive features are more in comparison to the negative ones.

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