Chapter 7

HEALTH SEEKING BEHAVIOUR OF THE MISHING

Health seeking behaviour is an important factor in health care system of any community of people, but this is often ignored in the day to day lives. Health seeking behaviours are more generally drawing out the factors which enable or prevent people from making 'healthy choices', in either their lifestyle behaviours or their use of medical care and treatment. Health seeking behaviour is not just an isolated event. It is part and parcel of a person's, a family's or a community's identity, which is the result of an evolving mix of social, personal, cultural and experiential factors. The process of responding to 'illness' or seeking care involves multiple steps and can rarely be translated into a simple one of choice or act, or be explained by a single model of health seeking behaviour. The concept of health seeking behaviours has evolved with the course of time and has ultimately become a tool for understanding how people employ the health care systems in their respective socio-cultural, economic and demographic circumstances. All these behaviours actually define social position of health and provide a better understanding of the disease process. It is therefore important to study the impact of these behaviours in case of maintaining good health of the people of a certain community. To build a responsive health system, there is a strong need to understand the health seeking behaviours on the demand side and that is the only way to expect improved health outcomes. Therefore, in this chapter an attempt has been made to discuss some of the health seeking behaviours of the Mishing people towards maintaining good health at personal, household and community levels.

Household Health Seeking Behaviour

In the system of health seeking behaviour, household health care habits have played an important role. In the backdrop of newly generated awareness, health care habits of the Mishings are not satisfactory. They have to walk a long way to attain the goals of health and sanitary environment as is evident in the discussion of the following aspects:

Household Hygiene

Household hygiene is an old concept related to medicine, as well as to personal and professional health care practices related to most aspects of living. Hygiene practices are employed as preventive measures to reduce the occurrence and spread of disease. In the preparation of food, cleaning utensils, household floor, etc. good hygiene is a key part of maintaining good health. Hygiene practices vary widely, and what is considered acceptable in one culture might not be acceptable in another.

Hygiene is a set of practices performed for the preservation of health. Some regular hygienic practices may be considered good habits by a society while the neglect of hygiene can be considered disgusting, disrespectful or even threatening. The following table shows the household hygienic behaviours among the Mishings in their day to lives:

Table 7.1
Household Health Seeking Behaviour
(Percentage in Parentheses)

Elements of Health Seeking Behaviour	No of Households			Total N=286
	Namtemera N=151	Baghedhara N=79	Golaghat town N=56	
Washing hands by adults before meal	151 (100)	79 (100)	56 (100)	286 (100)
Washing hands by children before meal	151 (100)	79 (100)	56 (100)	286 (100)
Eating uncooked vegetables	151 (100)	79 (100)	56 (100)	286 (100)
Cleaning utensils	151 (100)	79 (100)	56 (100)	286 (100)
Cleaning household floor regularly	151 (100)	79 (100)	56 (100)	207 (100)
Use of footwear	71 (47.02)	63 (79.75)	56 (100)	190 (66.43)
Brushing teeth	151 (100)	79 (100)	56 (100)	286 (100)

Source: Field survey conducted during 2nd May – 30th September 2011

The above table shows some behaviours or practices related to health; viz., washing hands before taking meal, eating uncooked vegetables, cleaning utensils and household floor, use of footwear, brushing teeth, etc. It shows that the Mishings have good health seeking behaviours in both the villages, e.g., the Mishings in Namtemera

and Baghedhara and the Golaghat town, as all households have the health seeking behaviours mentioned in the above table as indicators of health seeking behaviour. In this regard, every member irrespective of age, gender and nature of residence has this habit.

Eating uncooked vegetables is considered useful for health in Mishing society. The vegetables which are consumed by the Mishings without cooking include all the green leafy vegetables. They take it with their meal as *salad.* According to them, eating uncooked green leafy vegetables helps keep their skin afresh. It also helps to strengthen the digestive power of liver. Therefore, all the Mishing households of the two villages as well as Golaghat town have this habit.

Cleaning utensils and household floors which are two other health seeking behaviours followed by the Mishings. The table shows that all the Mishing households of Namtemera, Baghedhara and Golaghat town have the habits of cleaning utensils and household floors.

In case of habit of using footwear they are not seen equally conscious. Some of the Mishings of Namtemera and Baghedhara are not conscious in this regard, as out of the total households (151) of Namtemera only 47.02% have this habit. Similarly, in Baghedhara only 79.75% households out of the total 79 households have this habit. Thus, it may be assumed that in case of using footwear the Mishings, specially the Mishings of village, are not equally conscious.

The table also shows that the Mishings irrespective of nature of living area have the habit of brushing teeth regularly. In their society both males and females clean mouth in the morning. Generally, they use tooth brush and tooth paste for the purpose. But due to high cost of these, some people also use branches of some plants and cheap tooth powder. They also use the midrib of a coconut leaf as tongue cleaner. For this purpose, they split the midrib to make its edges sharp. The children are not much particular in cleaning teeth.

Thus, the Mishings are very much conscious in case of health seeking behaviours.

The Mishings of the two villages and Golaghat town clean their utensils regularly. Similarly, they use different materials for cleaning utensils. Among these ashes, vim bar and pril are prime. The following table shows the materials used for cleaning utensils in their society:

Table 7.2
Materials Used in Cleaning Utensils
(Percentage in Parentheses)

Materials Used in Cleaning Utensils	No of Households			Total
	Namtemera	Baghedhara	Golaghat town	
Using ashes	131 (86.75)	35 (44.30)		166 (58.04)
Using vimbar/ pril etc.	20 (13.25)	44 (55.70)	56 (100)	120 (41.96)
Total	151 (100)	79 (100)	56 (100)	286 (100)

Source: Field survey conducted during 2nd May – 30th September 2011

The table shows that the Mishings use two materials for cleaning their household utensils; namely, ashes and (vimbar or pril) company product detergents. Out of the total households, 58.04% use ashes whereas 41.96% use either vimbar or pril for this purpose. The table also shows that out of these two methods, using ashes is most popular in both the villages. Of 151 households 86.75% use this in Namtemera and 44.30% households of the total households (79) in Baghedhara use this. On the other hand, no Mishing household of Golaghat town uses this for cleaning their household utensils. Rather, all the Mishing households of Golaghat town use either vim bar or pril for cleaning their utensils. Thus, variation is noticed regarding the use of various materials use for cleaning utensils in the two villages and Golaghat town.

Variation is also observed in case of methods for cleaning household floor. Basically three methods are observed in this regard. The following table shows the methods of cleaning household floor in the two villages and in the town:

Table 7.3
Methods of Cleaning Household Floor
(Percentage in Parentheses)

Method of Cleaning	No of Households			Total
	Namtemera	Baghedhara	Golaghat town	
Plastering	41 (27.15)	21 (26.58)	7 (12.5)	69 (24.13)
Wiping	3 (1.99)	4 (5.06)	25 (44.64)	32 (11.19)
Dusting	107 (70.86)	54 (68.36)	24 (42.86)	185 (64.68)
Total	151 (100)	79 (100)	56 (100)	286 (100)

Source: Field survey conducted during 2nd May – 30th September 2011

The table shows that there are three methods of cleaning household floor; namely, plastering, wiping and dusting. Of these majority of the households use dusting method for cleaning household floor, followed by plastering and wiping methods. Of the total (286) households, 64.68% use dusting method, 24.13% use plastering method and the rest (11.29%) use wiping method for this purpose. The dusting method is most popular method of cleaning household floor in both the villages as well as the Golaghat town. Of the total households of Namtemera, 70.86% use dusting method for this purpose. In Baghedhara and Golaghat town 68.36% and 42.86% households use this method respectively. The plastering method is also popular in both the villages and Golaghat town. Of the total households in Namtemera, 27.15% use plastering method for cleaning household floor. Similarly, 26.58% of the 79 households in Baghedhara use plastering method. Wiping is the most popular method for cleaning household floor in Golaghat town as 44.64% households of the total (56) households use this method where as only 1.99% households in Namtemera and 5.06% households in Baghedhara use this method.

Variation in use of different methods for cleaning household floor is present due to the different patterns of houses. It is found that majority of the houses in Namtemera and Baghedhara are *kaccha* so that they do plastering with the mixture of cow dung and mud. On the other hand the number of *pacca* house in the town is more and they use surface cleaners for cleaning household floor. Like this, the Mishings who have *pacca* houses in the two villages, also use these types of surface cleaner.

Division of labour on the basis of gender is observed among the Mishings in cleaning utensils and household floor in both the villages as well as Golaghat town. In their society it is believed that women are responsible for these types of work. Cleaning utensils and household floor are considered the works of women. Therefore, the women in both the villages and Golaghat town perform these activities.

Habit of brushing teeth is another health seeking behaviour practised by the Mishings. Every Mishing, irrespective of gender, brushes teeth regularly in the morning. For this purpose they use different kinds of brush. The following table shows the types of brush used by the Mishing:

Table 7.4
Types of Brush Used
(Percentage in Parentheses)

Type of Brush	No. of Persons									Total		
	Namtemera			Baghedhara			Golaghat town					
	M	F	Total	M	F	Total	M	F	Total	M	F	Total
Tooth brush	430 (72 51)	328 (65 47)	758 (69.29)	153 (55 43)	192 (71 38)	345 (63 30)	174 (79 45)	148 (85 06)	322 (81 93)	757 (69 57)	668 (70 76)	1425 (70.13)
Charcoal	49 (8 26)	38 (7 59)	87 (7 95)	43 (15 58)	31 (11 52)	74 (13 58)	-	-	-	92 (8 46)	69 (7 31)	161 (7.92)
Branches of plants	73 (12 31)	89 (17 76)	162 (14 81)	51 (18 48)	29 (10 78)	80 (14 68)	23 (10 50)	12 (6 90)	35 (8 91)	147 (13 51)	130 (13 77)	277 (13.63)
Not applicable **	41 (6 92)	46 (9 18)	87 (7 95)	29 (10 51)	17 (6 32)	46 (8 44)	22 (10 05)	14 (8 04)	36 (9 16)	92 (8 46)	77 (8 16)	169 (8.32)
Total	593 (100)	501 (100)	1094 (100)	276 (100)	269 (100)	545 (100)	219 (100)	174 (100)	393 (100)	1088 (100)	944 (100)	2032 (100)

Source: Field survey conducted during 2nd May – 30th September 2011

** Not applicable for babies under 2 years of age.

The table shows that basically the Mishings use three different kinds of items to brush their teeth; namely, tooth brush, charcoal and tiny branches of plants. Of the total population (1425), 70.13% use tooth brush available in the market. On the other hand, 13.63% persons use small branches of different plants and 7.92% persons use charcoal

to brush their teeth. In Namtemera also use of tooth brush available in the market is most popular as out of the total population 69.29% use tooth brush, whereas 14.81% persons use small branches of plants and only 7.95% person use charcoal for brushing teeth. Similarly, in Baghedhara also majority of the total population uses tooth brush. As the table shows out of the total persons of this village 63.30% use it. Of course, 14.68% person use branches of plants and another 13.58% person use charcoal for the purpose. On the other hand, no person in Golaghat town uses charcoal for brush teeth. Like the Namtemera and Baghedhara villagers majority of Mishing people In Golaghat town use tooth brush which is available in the market. Of the total Mishing people in Golaghat town, 81.93% use it and only 8.91% use branches of plants. According to their belief use of branches of plants, especially medicinal plants, is good for teeth. Anyway, the Mishings have a good habit of brushing teeth.

Sanitary Condition

The overall sanitary condition of the villagers is not good. There are many factors like poverty, ignorance, social customs, religious sanctions, age-old habits, and climatic conditions, etc., which play a significant role in the maintenance of a healthy sanitary atmosphere in the two villages. As ignorant about the micro-organisms and modes of infection they are least bothered about many of the unhygienic practices. They do not consider these things harmful to their health rather than to be natural phenomena. But the sanitary condition of the Mishing households of the Golaghat town is much better than in the two villages.

The following table shows the latrine facility in the two villages and town:

Table 7.5
Types of Latrine Facility
(Percentage in Parentheses)

Type	No of Households			Total
	Namtemera	Baghedhara	Golaghat town	
Pacca latrine	7 (4.64)	13 (16.46)	51 (91.07)	71 (24.86)
Kaccha latrine	129 (85.43)	66 (83.54)	5 (8.93)	200 (69.90)
Open defecation	15 (9.93)	-	-	15 (5.24)
Total	151 (100)	79 (100)	56 (100)	286 (100)

Source: Field survey conducted during 2nd May – 30th September 2011

From the table it is evident that only 4.64% households in Namtemera have *pacca* latrine facility whereas 85.43% households have *kaccha* latrine facility and 9.93% households have the habits of open defecation. The situation is also same in case of Baghedhara as only 16.46% households have *pacca* latrines and 83.54% households have *kaccha* latrines. On the other hand, in Golaghat town the sanitary condition of the Mishing households is better. Of the total households in the town 91.07% have *pacca* latrines and only 8.93% have *kaccha* latrines. Of course, there is no separate latrine facility for male and female in both the villages as well as Golaghat town.

Urinal Facility

The provision of urinal facility is also an element of health seeking behaviour. So, having this facility for both the genders separately indicates the hygiene consciousness of a given population. The following table shows the provision of urinal in Namtemera and Baghedhara villages and Golaghat town:

Table 7.6
Provision of Urinal Facility
(Percentage in Parentheses)

Status	No of Households			Total
	Namtemera	Baghedhara	Golaghat town	
Yes	136 (90.07)	79 (100)	56 (100)	271 (94.76)
No	15 (9.93)	-	-	15 (5.24)
Total	151 (100)	79 (100)	56 (100)	286 (100)

Source: Field survey conducted during 2nd May – 30th September 2011

The above table shows that of the total households in Namtemera, 90.07% have the provision of urinal facility and the rest (9.93%) have no urinal facility. On the other hand, all the households in Baghedhara and Golaghat town have urinal facility either *pacca* or *kaccha*.

Sources of Drinking Water

Generally, tribal people use different natural sources like springs, ponds, brooks etc. as source of drinking water. But this picture is quite different in Baghedhara and Golaghat town as no household uses any natural sources for this. The following table shows the sources of drinking water in the two villages and Golaghat town:

Table 7.7
Sources of Drinking Water
(Percentage in Parentheses)

Source	No of Households			Total
	Namtemera	Baghedhara	Golaghat town	
Deep tube well	134 (88.74)	79 (100)	14 (25.00)	227 (79.37)
River	17 (11.26)	-	-	17 (5.94)
Urban water supply	-	-	27 (48.21)	27 (9.44)
Public health Department	-	-	15 (26.79)	15 (5.24)
Total	151 (100)	79 (100)	56 (100)	286 (100)

Source: Field survey conducted during 2nd May – 30th September 2011

The table shows that the Mishings in Namtemera use two sources of drinking water; namely, deep tube well and river. Out of the total households, 88.74% have deep tube well and the rest (11.26%) use river as the source of drinking water. On the other hand, all the households in Baghedhara use deep tube well as the source of drinking water. In Golaghat town also, the Mishing households use three different sources; namely, deep tube well, urban water supply and public health department. Out of 56 Mishing households in Golaghat town only 25% use deep tube well. On the other hand, 48.21% households use drinking water supplied by urban water supply department and the rest (26.79%) use drinking water supplied by Public Health Department office at the Golaghat town.

Purification of Drinking Water

The system of purifying drinking water is very much neglected in the tribal societies. The minerals and other contents of water which is used for drinking, washing and cooking purpose are taken from various sources like wells, tube wells, ponds, rivers and streams, etc. Besides the useful mineral and other contents, the water in rural and tribal areas carries germs of various water-borne diseases like diarrhea, dysentery, typhoid, dengue fever, etc. This is an easy way for epidemics to spread from person to person through the medium of drinking water. So, purification of drinking water avoids health hazards. The Mishings of Namtemera, Baghedhara and Golaghat town purify

their drinking water by using some methods. The following table shows the types of water purified by different methods for drinking purpose:

Table 7.8
Methods of Purifying Drinking Water
(Percentage in Parentheses)

Type of water	No. of Households			Total
	Namtemera	Baghedhara	Golaghat town	
Filtered water	83 (54.97)	27 (34.18)	12 (21.43)	122 (42.66)
Non-filtered water	28 (18.54)	29 (36.71)	5 (8.93)	62 (21.68)
Boiled water	17 (11.26)	7 (8.86)	7 (12.5)	31 (10.84)
Filtered as well as boiled water	23 (15.23)	16 (20.25)	11 (19.64)	50 (17.48)
Electronic purified water	-	-	21 (37.50)	21 (7.34)
Total	151 (100)	79 (100)	56 (100)	286 (100)

Source: Field survey conducted during 2nd May – 30th September 2011

The table shows that the Mishings use different methods for purifying drinking water. It also brings to light that most of the households (42.66%) in the three units of study use filtered water which is followed by non-filtered water (21.68%), filtered as well as boiled water (17.48%), boiled water (10.84%) and electronic purified water (7.34%). The villagers in Namtemera use four different kinds of water. Out of the total households of this village 54.79% use filtered water, 18.54% use non-filtered water and 11.26% households use boiled water. On the other hand, 15.23% households use both filtered as well as boiled water. Thus, the table shows that majority of the households in Namtemera use filtered water for drinking purpose.

Like Namtemera the people of Baghedhara also use four different kinds of water. But majority of the households in this village use non-filtered water. As the table shows 36.71% households of the total use non-filtered water whereas only 34.18% households use filtered water. The table also shows that 8.86% households of this village use boiled water and another 20.25% households use filtered as well as boiled water.

In the Mishing households of the Golaghat town, majority of the households use electronically purified water which is not available in both the villages. Of the total

Mishing households (56) in Golaghat town, 37.5% households use electronically purified water for drinking. 21.43% households use filtered water, 12.5% households use boiled water and 19.64% households use filtered as well as boiled water. Of course, 8.93% of the total households of Golaghat town use non-filtered water. Thus, the Mishings of Golaghat town are more conscious regarding purification of drinking water than the Mishings of Namtemera and Baghedhara villages.

Use of Mosquito Net

Use of mosquito net offers protection against mosquitoes, flies and other insects, and thus against the diseases they may carry, e.g., malaria, dengue fever, yellow fever and various forms of encephalitis. Mosquito nets are often used where malaria or other insect-borne diseases are common, especially as a tent-like covering over a bed. For effectiveness, it is important that the netting should not have holes or gaps large enough to allow insects to enter. Because an insect can bite a person through the net, the net must not rest directly on the skin. It is found that two persons in Namtemera and 1 (one) person in Baghedhara suffered from malaria during the filed study. It is also found that 4 four persons in Namtemera and 2 (two) persons in Baghedhara died from malaria during last 10 years. Thus, we may assume that both the villages are the malaria prone areas. Therefore, the villagers as well as the Mishings of Golaghat town are more conscious of using mosquito net and all the Mishing households of Namtemera and Baghedhara and Golaghat town have the habit of using mosquito net during night.

Personal Health Seeking Behaviour

In the system of health seeking behaviour, personal health care practices or habits have played an important role. Therefore, the Mishings in both the villages and Golaghat town follow certain personal health care habits in their daily life, as discussed in the following:

Bathing Habit

Generally, the Mishings of Namtemera and Baghedhara villages as well as the Mishings of Golaghat town take bath once a day. But the women are not particular in washing their heads daily. As they grow long hairs, it will take long hours to dry them. Besides, due to their heavy load of household work they cannot spare long hours for it.

So, they wash their heads once a week. During their menstruation the women take bath daily. They believe that menstruation pollutes their bodies and they have to clean it daily. Or else, some evil spirits will possess their polluted bodies. Thus, their habit of body cleaning is caused by traditional beliefs and not by modern knowledge of hygiene.

The Mishing women take bath either in ponds or rivers and bath rooms. But the proportion of those using bath rooms is very less in the two villages. They use soaps for cleaning their body. Clothes are washed using detergent soaps. They use cotton towels for wiping the water from their hairs and body. Most of the villagers sit in the sun for a while after taking bath.

The nature of bathing habit in the two villages and Golaghat town can be observed in the following table:

Table 7.9
Routine of Taking Bath by Persons in Namtemera, Baghedhara & Golaghat Town
(Percentage in Parentheses)

Type of Routine	No. of Persons									Total		
	Namtemera			Baghedhara			Golaghat town					
	M	F	Total	M	F	Total	M	F	Total	M	F	Total
Once a day	338 (57 00)	299 (59 68)	637 (58 23)	130 (47 10)	142 (52 79)	272 (49 91)	117 (53 42)	95 (54 60)	212 (53 94)	585 (53 77)	536 (56 78)	1121 (53 17)
Twice a day	102 (17 20)	87 (17 37)	189 (17 28)	84 (30 43)	83 (30 86)	167 (30 64)	58 (26 48)	46 (26 44)	104 (26 46)	244 (22 43)	216 (22 88)	460 (22 64)
Alternate day	153 (25 80)	115 (22 95)	268 (24 50)	62 (22 43)	44 (16 36)	106 (19 44)	44 (20 09)	33 (18 97)	77 (19 59)	259 (23 81)	192 (20 34)	451 (22 19)
Total	593 (100)	501 (100)	1094 (100)	276 (100)	269 (100)	545 (100)	219 (100)	174 (100)	393 (100)	1088 (100)	944 (100)	2032 (100)

Source: Field survey conducted during 2nd May – 30th September 2011

The above table shows that the Mishings have three different routines of bathing in both the villages as well as Golaghat town; namely, once a day, twice in a day and on alternate day. As depicted in the table majority of the population i.e. 53.17% has the habit of taking bath once in a day. Similarly, 22.64% have the habit of taking bath twice

in a day. On the other hand, 22.19% have the habit of taking bath on alternate day. Thus, it shows that females are more particular in case of taking bath than males.

In Namtemera, as shown in the table, out of the total population 58.23% people have the habit of taking bath once in a week whereas 17.28% have the habit of taking bath twice in a day. In Baghedhara out of the total males 47.10% have the habit of taking bath once in a day, 30.43% makes have the habit of taking bath twice in a day and 22.43% have this habit on alternate day. On the other hand, out of the total females (269) of this village 52.79% have this habit of taking bath once in a day, 30.86% take bath twice in a day and only 16.36% females have the habit of bathing on alternate day.

Thus, the females of this village are found to be a little more conscious on bathing habit. This trend of consciousness is also present in Golaghat town also. In Golaghat town of the total males 53.42% have the habit of bathing once in day and 26.48% have this habit twice in a day and the remaining 20.09% have this habit on alternate day. In females of Golaghat town the table shows that 54.60% females of the total have the bathing habit once in day. Similarly, 26.44% females have the habit of taking bath twice in a day. On the other hand, 18.97% females have this habit on alternate day basis.

Thus, the Mishings are found to be a little more conscious on bathing habit as they think that they can keep away the diseases such as skin disease by maintaining personal cleanliness. On the other hand, persons who have the habits of taking bath on alternate day include the children and aged persons of the two villages and Golaghat town.

Habit of Eating

The Mishings take meal three times in a day. They take it around 8 a.m. in the morning, by 3 p.m. in the evening and by 9 p.m. in the night. Their staple food is rice. It is taken with a side dish of some vegetables or meat or fish. So, their diet consists of rice, vegetables, meat or fish. Sometimes, they eat packed food items like bread, biscuits, etc. They do not observe any difference of males and females in case of taking meal and there is no any special food for men and women. Of course, a woman, after delivery of baby, is provided special food and it generally continues for a few weeks.

The special food provided for women includes green leafy vegetable dishes. They think that taking of vegetable dishes is good for regaining her health and vitality as well as producing more milk for the child. The women are also provided nutritious foods during their pregnancy. The nutritious dish includes mostly the dishes with fish, meat or egg.

However the following table shows the type of food taken by the Mishings in both the villages and Golaghat town:

Table 7.10
Type of Food Taken
(Percentage in Parentheses)

Age-group	Vegetarian												Non-vegetarian											
	Namtemera			Baghedhara			Golaghat town			Total			Namtemera			Baghedhara			Golaghat town			Total		
	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T
Neonatal (0-30 days)	7 (7 78)	10 (10 31)	17 (9 09)	9 (17 31)	4 (8 00)	13 (12 75)	7 (17 07)	3 (7 89)	10 (12 66)	23 (12 57)	17 (9 19)	40 (10 87)	-	-	-	-	-	-	-	-	-	-	-	-
Infant (0-12 month)	18 (20 00)	15 (15 46)	33 (17 65)	13 (25 00)	7 (14 00)	20 (19 61)	11 (26 83)	6 (15 79)	17 (21 52)	42 (22 95)	28 (15 14)	70 (19 02)	-	-	-	-	-	-	-	-	-	-	-	-
Toddler (1-3 years)	14 (15 56)	27 (27 84)	41 (21 93)	7 (13 46)	5 (10 00)	12 (11 76)	6 (14 63)	4 (10 53)	10 (12 66)	27 (14 75)	36 (19 46)	63 (17 12)	18 (3 58)	12 (2 97)	30 (3 31)	8 (3 57)	7 (3 20)	15 (3 39)	2 (1 12)	6 (4 41)	8 (2 55)	28 (3 22)	25 (3 29)	53 (3 19)
Primary school age (4-12 yrs)	2 (2 22)	3 (3 09)	5 (2 67)	2 (3 85)	4 (8 00)	6 (5 88)	3 (7 32)	2 (5 26)	5 (6 33)	7 (3 83)	9 (4 86)	16 (4 35)	51 (10 14)	29 (7 18)	80 (8 82)	12 (5 36)	13 (5 94)	25 (5 64)	8 (4 49)	9 (6 62)	17 (5 41)	71 (8 16)	50 (6 59)	122 (7 33)
Adolescent (13-19 yrs)	8 (8 89)	5 (5 15)	13 (6 95)	3 (5 77)	7 (14 00)	10 (9 80)	1 (2 44)	6 (15 79)	7 (8 86)	12 (6 56)	18 (9 73)	30 (8 15)	91 (18 09)	78 (19 31)	169 (18 63)	33 (14 73)	55 (25 11)	88 (19 86)	38 (21 35)	21 (15 44)	59 (18 79)	162 (18 62)	154 (20 29)	316 (18 99)
Young adulthood (20-39 yrs)	11 (12 22)	8 (8 25)	19 (10 16)	6 (11 54)	3 (6 00)	9 (8 82)	5 (12 20)	3 (7 89)	8 (10 13)	22 (12 02)	14 (7 57)	36 (9 78)	193 (38 37)	169 (41 83)	362 (39 91)	98 (43 75)	86 (39 27)	184 (41 53)	46 (25 84)	36 (26 47)	82 (26 11)	337 (38 74)	291 (38 34)	628 (37 74)
Middle adulthood (40-59 yrs)	11 (12 22)	6 (6 19)	17 (9 09)	5 (9 62)	14 (28 00)	19 (18 63)	4 (9 76)	12 (31 58)	16 (20 53)	20 (10 93)	32 (17 30)	52 (14 13)	129 (25 65)	104 (25 74)	233 (25 69)	59 (26 34)	49 (22 37)	108 (24 38)	73 (41 01)	55 (40 44)	128 (40 76)	261 (30 00)	208 (27 40)	469 (28 19)
Advance adulthood (60 + yrs)	19 (21 11)	23 (23 71)	42 (22 46)	7 (13 46)	6 (12 00)	13 (12 75)	4 (9 76)	2 (5 26)	6 (7 59)	30 (16 39)	31 (16 76)	61 (16 58)	21 (4 17)	12 (2 97)	33 (3 64)	14 (6 25)	9 (4 11)	23 (5 19)	11 (6 18)	9 (6 62)	20 (6 37)	46 (5 29)	30 (3 95)	76 (4 57)
Total	90 (100)	97 (100)	187 (100)	52 (100)	50 (100)	102 (100)	41 (100)	38 (100)	79 (100)	183 (100)	185 (100)	368 (100)	503 (100)	404 (100)	907 (100)	224 (100)	219 (100)	443 (100)	178 (100)	136 (100)	314 (100)	870 (100)	759 (100)	1664 (100)

Source: Field survey conducted during 2nd May – 30th September 2011

The above table shows the type of food taken by the Mishings in Namtemera and Baghedhara and Golaghat town by age group. It classifies the people of the three units of study into two categories, i.e., vegetarian and non-vegetarian. The table reveals that majority of the Mishings are non-vegetarian as out of the total population (2032) in the three areas, 81.89% are non-vegetarian and 18.11% are vegetarian. In both the villages as well as Golaghat town majority of the Mishings are non-vegetarian. In Namtemera of the total population of this village 907 are non-vegetarians and 187 are vegetarians. Similarly, in Baghedhāra also 443 persons of the total population are non-vegetarians and only 102 persons are vegetarians. On the other hand, out of the total Mishing population of Golaghat town 314 are non-vegetarian and 79 are vegetarians. Thus, the Mishings are more particular in taking non-veg items.

The type of food taken by a person depends upon his health condition. As found in the field survey the vegetarian persons suffer from various diseases such as high blood pressure, diabetics, etc. As non-veg item are harmful to these types of diseases therefore they do not take any non-veg item.

The non-vegetarian persons take all the items such as meat, fish and egg. As found in the field study pork is preferred most by both the genders in both the villages and Golaghat town. Of course, they are fond of chicken, mutton, etc. in their dishes. On the other hand, fish is also preferred by them.

The process of preparation of veg item is different from non-veg item. As the Mishings use boiled foods in their society therefore they do not use any pulses in veg items. Maximum numbers of households in both the villages and town have the habits of taking boiled food. On the other hand, in case of non-veg item they use little bit of mustard oil with some common pulses such as meat masala.

Vaccination of Children

Vaccinations or immunizations are two of the most important tools available for preventing diseases. Vaccinations not only protect children from developing a potentially serious disease but also protect the community by reducing the spread of infectious disease. If enough people are immunized, diseases may not be transmitted through a population, thus protecting everyone. In this regard awareness of modern

health practice of the Mishing people influences the immunization practice also. Though they did not practice the immunization earlier, now-a-days they practice it completely. In both the villages as well as Golaghat town, all the families have got their children immunized. The immunization status in these areas is very high as these services are available easily. Besides, no gender discrimination is followed by the Mishings in the immunization process.

The following table shows the number of children (upto 12 years old) immunized or vaccinated by their parents:

Table 7.11
Vaccination of Children
(Percentage in Parentheses)

Age-group	Vaccinated												Not Vaccinated											
	Namtemera			Baghedhara			Golaghat town			Total			Namtemera			Baghedhara			Golaghat town			Total		
	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T
Neonatal (0-30 days)	5 (10 42)	6 (12 00)	11 (11 22)	6 (23 08)	2 (11 76)	8 (18 60)	7 (29 17)	3 (15 00)	10 (22 73)	18 (18 37)	11 (12 64)	29 (15 68)	2 (3 23)	4 (8 70)	6 (5 56)	3 (12 00)	2 (8 70)	5 (10 42)	-	-	-	5 (5 00)	6 (7 59)	11 (6 15)
Infant (0-12 month)	11 (22 92)	9 (18 00)	20 (20 41)	7 (26 92)	3 (17 65)	10 (23 26)	8 (33 33)	5 (25 00)	13 (29 55)	26 (26 53)	17 (19 54)	43 (23 24)	7 (11 29)	6 (13 04)	13 (12 04)	6 (24 00)	4 (17 39)	10 (20 83)	3 (23 08)	1 (10 00)	4 (17 39)	16 (16 00)	11 (13 92)	27 (15 08)
Toddler (1-3 years)	19 (39 58)	21 (42 00)	40 (40 82)	7 (26 92)	5 (29 41)	12 (27 91)	5 (20 83)	7 (35 00)	12 (27 27)	31 (31 63)	33 (37 93)	64 (34 59)	13 (20 97)	18 (39 13)	31 (28 70)	8 (32 00)	7 (30 43)	15 (31 25)	3 (23 08)	3 (30 00)	6 (26 09)	24 (24 00)	28 (35 44)	52 (29 05)
Primary school age (4-12 years)	13 (27 08)	14 (28 00)	27 (27 55)	6 (23 08)	7 (41 18)	13 (30 23)	4 (16 67)	5 (25 00)	9 (20 45)	23 (23 47)	26 (29 89)	49 (26 49)	40 (64 52)	18 (39 13)	58 (53 70)	8 (32 00)	10 (43 48)	18 (37 5)	7 (53 85)	6 (60 00)	13 (56 52)	55 (55 00)	34 (43 04)	89 (49 72)
Total	48 (100)	50 (100)	98 (100)	26 (100)	17 (100)	43 (100)	24 (100)	20 (100)	44 (100)	98 (100)	87 (100)	185 (100)	62 (100)	46 (100)	108 (100)	25 (100)	23 (100)	48 (100)	13 (100)	10 (100)	23 (100)	100 (100)	79 (100)	179 (100)

Source: Field survey conducted during 2nd May – 30th September 2011

The above table shows that out of the 364 children upto 12 years of age in both the villages and Golaghat town, 185 children have been vaccinated and the rest (179) children have not been vaccinated of which 100 are male child and 79 are female child. In Namtemera 98 children have been vaccinated of which 48 are male and the rest (50) are female children. On the other hand, 108 children have not been vaccinated of which 62 are males and 46 are females. Similarly, in Baghedhara, 43 children have been vaccinated of which 26 are males and 17 are females. Of course, more than 50% children upto 12 years of age have not been vaccinated in Baghedhara. The table shows that out of the total children of that category 48 children have not been vaccinated in this village of which 25 are males and 23 are females. Of course, in Golaghat town the number of vaccinated children is more in comparison to that in the two villages. As the table shows that out of the total children of that particular age group 44 children have been vaccinated of which 24 are males and 20 are females. On the other hand, the number of children who have not been vaccinated in Golaghat town is 23 of which 13 are males and 10 are females.

Regular Health Check-up

Regular health checkup is a valuable tool in maintaining good health. Taking proper care of one's health at the right time can prevent a lot of problems in the future. It is good to find out that one has a problem, before it is too late to cure it. So, appropriate tests should be done at the right time. The main aim of a check-up is to detect illness at an early stage, or better still prevent illness occurring in the first place. Some tests save so many lives that it is definitely worth the money spent on it. Regular health examination and tests can also help to find problems before they start by getting the right health services, screenings, and treatments.

The following table shows the habit of regular health checkup of the Mishings:

Table 7.12
Habit of Regular Health Check up
(Percentage in Parentheses)

Item	No. of Persons									Total		
	Namtemera			Baghedhara			Golaghat town					
	M	F	Total	M	F	Total	M	F	Total	M	F	Total
Blood Pressure	17 (2 87)	7 (1 40)	24 (2 19)	21 (7 61)	9 (3 35)	30 (5 50)	26 (11 87)	15 (8 62)	41 (10 43)	64 (5 88)	31 (3 28)	95 (4 67)
Blood sugar	4 (0 67)	1 (0 20)	5 (0 46)	3 (1 09)	2 (0 74)	5 (0 92)	12 (5 48)	5 (2 87)	17 (4 33)	19 (1 75)	8 (0 85)	27 (1 33)
Weight	-	3 (0 60)	3 (0 28)	-	2 (0 74)	2 (0 37)	13 (5 94)	9 (5 17)	22 (5 60)	13 (1 19)	14 (1 48)	27 (1 33)
Don't checkup	572 (96 46)	490 (97 80)	1062 (97 07)	252 (91 30)	256 (95 17)	508 (93 21)	168 (76 71)	145 (83 34)	313 (79 64)	992 (91 18)	891 (94 39)	1883 (92 67)
Total	593 (100)	501 (100)	1094 (100)	276 (100)	269 (100)	545 (100)	219 (100)	174 (100)	393 (100)	1088 (100)	944 (100)	2032 (100)

Source: Field survey conducted during 2nd May – 30th September 2011

The above table shows the habit of health checkup of the Mishing people of Namtemera and Baghedhara and the Mishings of Golaghat town. As the table shows the items of health check-up include blood pressure, blood sugar and weight. Of the total population, 4.64% have the habit of regular health checkup for blood pressure, whereas 1.33% have this habit for blood sugar and the rest (1.33%) have this habit for checking their body weight. On the other hand, 92.67% do not have the habit of regular health checkup. In Namtemera, of the total population 2.19% have the habit of health checkup for blood pressure. Similarly, 0.46% have this habit for blood sugar and only 0.28% have the habit of checking their body weight regularly. On the other hand, 97.07% persons of the total do not have the habit of regular health checkup in Namtemera. In Baghedhara, of the total population 5.50% have the habit of regular health checkup for blood pressure. Similarly, 0.92% have this habit for checking blood sugar and another 0.37% have the habit of checking body weight regularly. On the other hand, 10.43% of the total Mishings in Golaghat town have the habit of regular health checkup for blood pressure, 4.33% have this habit for checking blood sugar and 5.60% have this habit for checking body weight regularly.

Thus, the habit of regular health checkup among the Mishings is not good in both the villages and Golaghat town.

Habit of Taking Milk or Curd:

The Mishings of both the villages and the Mishings of Golaghat town dwellers have the habit of taking milk or curd in their daily life. They believe that taking milk or curd is good for health. So, almost all the people irrespective of gender take milk or curd. The routine of taking milk or curd is shown in the following table:

Table 7.13
Habit of Taking Milk or Curd
(Percentage in Parentheses)

Type of Routine	No. of Persons									Total		
	Namtemera			Baghedhara			Golaghat town					
	M	F	Total	M	F	Total	M	F	Total	M	F	Total
Daily	120 (20.24)	121 (24.15)	241 (22.03)	72 (26.09)	51 (18.96)	123 (22.57)	50 (22.83)	35 (20.12)	85 (21.63)	242 (22.24)	207 (21.93)	449 (22.10)
On alternate day	93 (15.68)	87 (17.37)	180 (16.45)	33 (11.96)	47 (17.47)	80 (14.68)	24 (10.96)	26 (14.94)	50 (12.72)	150 (13.79)	160 (16.95)	310 (15.26)
Twice in a week	131 (22.09)	66 (13.17)	197 (18.01)	53 (19.20)	41 (15.24)	94 (17.25)	39 (17.81)	37 (21.26)	76 (19.34)	223 (20.50)	144 (15.25)	367 (18.06)
Weekly	62 (10.46)	68 (13.57)	130 (11.88)	35 (12.68)	56 (20.82)	91 (16.70)	15 (6.85)	18 (10.34)	33 (8.40)	112 (10.29)	142 (15.04)	254 (12.50)
Occasionally	187 (31.53)	159 (31.74)	346 (31.63)	83 (30.07)	74 (27.51)	157 (28.81)	91 (41.55)	58 (33.34)	149 (37.91)	361 (33.18)	291 (30.83)	652 (32.08)
Total	593 (100)	501 (100)	1094 (100)	276 (100)	269 (100)	545 (100)	219 (100)	174 (100)	393 (100)	1088 (100)	944 (100)	2032 (100)

Source: Field survey conducted during 2nd May – 30th September 2011

The above table shows that in case of habit of taking milk or curds the Mishings are more particular as out of the total population (2032) of the three areas 22.10% persons take milk or curd on daily basis and 15.26% persons take it on alternate day. In Namtemera, though a large portion of the total population, i.e., 31.36% take milk or curd occasionally 22.03% persons take it on daily basis and another 16.45% persons take milk or curd on alternate day. Similarly, in Baghedhara also, though 28.81% persons of the total population take milk or curd occasionally 22.57% persons of the total

population of this village take milk or curd on daily basis and another 14.68% persons take milk or curd on alternate day. On the other hand, in Golaghat town also the same picture is reflected by the above table regarding the habit of taking milk or curd. In Golaghat town also most of the Mishing people take milk or curd occasionally though 21.12% of the total Mishing population take milk or curd on daily basis.

The sources of milk or curd include household dairy farm for the villages whereas it is the milk man for the town dwellers from whom they can purchase milk or curd every day.

Habit of Eating Meat:

Whether from a pig, bird, or other domestic animals, meat is universally enjoyed as part of the cultural culinary by human being. It is, as believed by the Mishings, to be an excellent source of protein, which is important for a healthy body. Therefore, they eat meat equally, irrespective of gender. The following table shows the habit of eating meat by the Mishings:

Table 7.14
Habit of Eating Meat
(Percentage in Parentheses)

Type of Routine	No. of Persons									Total		
	Namtemera			Baghedhara			Golaghat town					
	M	F	Total	M	F	Total	M	F	Total	M	F	Total
Daily	102 (17.20)	77 (15.37)	179 (16.36)	30 (10.87)	41 (15.24)	71 (13.03)	30 (13.70)	24 (13.79)	54 (13.74)	162 (14.89)	142 (15.04)	304 (14.96)
On alternate day	89 (15.00)	47 (9.38)	136 (12.43)	67 (24.28)	60 (22.30)	127 (23.30)	42 (19.18)	30 (17.24)	72 (18.32)	198 (18.20)	137 (14.51)	335 (16.49)
Twice in a week	149 (25.13)	89 (17.77)	238 (21.76)	86 (31.16)	61 (22.68)	147 (26.97)	53 (24.20)	55 (31.61)	108 (27.48)	288 (26.47)	205 (21.72)	493 (24.26)
Weekly	163 (27.49)	191 (38.12)	354 (32.36)	41 (14.85)	57 (21.19)	98 (17.98)	53 (24.20)	27 (15.52)	80 (20.36)	257 (23.62)	275 (29.13)	532 (26.18)
Vegetari-an	90 (15.18)	97 (19.36)	187 (17.09)	52 (18.84)	50 (18.59)	102 (18.72)	41 (18.72)	38 (21.84)	79 (20.10)	183 (16.82)	185 (19.60)	368 (18.11)
Total	593 (100)	501 (100)	1094 (100)	276 (100)	269 (100)	545 (100)	219 (100)	174 (100)	393 (100)	1088 (100)	944 (100)	2032 (100)

Source: Field survey conducted during 2nd May – 30th September 2011

The above table shows that most of the Mishings in the three areas take meat weekly as out of the total population, 26.18% take it on weekly basis. On the other hand, 24.26% of these areas take meat twice in a week. Similarly, 14.96% and 16.49% of the total population take meat on daily and on alternate day respectively. Thus, majority of the Mishings in both villages and Golaghat town take meat on weekly basis.

Habit of Eating Fish:

Like meat, fish is also considered as an important source of protein by the Mishings. Therefore, they have the habit of eating fish in their day to day lives. Most of the households in both the villages as well as Golaghat town have the habit of eating fish on daily basis. They got it from their household's ponds, nearby rivers and market. The following table shows the habit of eating fish:

Table 7.15
Habit of Eating Fish
(Percentage in Parentheses)

Type of Routine	No. of Persons									Total		
	Namtemera			Baghedhara			Golaghat town					
	M	F	Total	M	F	Total	M	F	Total	M	F	Total
Daily	129 (21 75)	115 (22 96)	244 (22 30)	93 (33 70)	92 (34 20)	185 (33 94)	79 (36 07)	54 (31 04)	133 (33 84)	301 (27 67)	261 (27 65)	562 (27 66)
On alternate day	177 (19 73)	174 (34 73)	291 (26 60)	56 (20 29)	58 (21 56)	114 (20 92)	37 (16 90)	26 (14 94)	63 (16 03)	210 (19 30)	258 (27 33)	468 (23 03)
Twice in a week	174 (29 34)	71 (14 17)	245 (22 40)	45 (16 30)	29 (10 78)	74 (13 58)	33 (15 07)	30 (17 24)	63 (16 03)	252 (23 16)	130 (13 77)	382 (18 80)
Weekly	83 (14)	44 (8 78)	127 (11 61)	30 (10 87)	40 (14 87)	70 (12 84)	29 (13 24)	26 (14 94)	55 (14)	142 (13 05)	110 (11 65)	252 (12 40)
Vegetarian	90 (15 18)	97 (19 36)	187 (17 09)	52 (18 84)	50 (18 59)	102 (18 72)	41 (18 72)	38 (21 84)	79 (20 10)	183 (16 82)	185 (19 60)	368 (18 11)
Total	593 (100)	501 (100)	1094 (100)	276 (100)	269 (100)	545 (100)	219 (100)	174 (100)	393 (100)	1088 (100)	944 (100)	2032 (100)

Source: Field survey conducted during 2nd May – 30th September 2011

The above table shows the habit of eating fish of the Mishings of Namtemera and Baghedhara villages and Golaghat town. They have followed four different routines

regarding eating fish like meat. The table shows that most of Mishings take fish daily as out of the total population 27.66% persons take fish daily. This is because of the easy availability of fish in their local areas as well as household ponds. Similarly, 23.03% persons of the total population take fish on alternate day. This also indicates the particularity of the Mishings regarding the habit of taking fish. In case of Namtemera also most of the villagers take fish daily. The table shows that out of the total population (1094) of this village 22.30% persons take fish daily and another 26.60% persons take it on alternate day. Like Namtemera in Baghedhara also most of the villagers take fish daily. Of the total population of this village 33.94% persons take fish daily and 20.92% persons take it on alternate day. In case of Golaghat town also out of the total Mishing population (393) of this area 33.84% persons take fish daily. Thus, the above table reveals that fish is one of the popular dishes taken by the Mishings in the name of nutritious food.

Habit of Eating Eggs

Eating eggs have many health benefits. The Mishings believe that eating egg is useful for the brain, heart, eyes, muscles, energy level, diet and appearance. Besides, they also believe that pregnant woman needs to eat the right amount of egg for the brain development of the fetus. Eggs can also be a great benefit to have a healthy and well appearance. Eating the right amount of food and having a balanced diet can be the key to have a healthy body and healthy appearance. Eggs contain lutein which is important to help increase elasticity, hydration and lipid content of the skin. Through this, appearance is good and healthy. In addition, right amount of protein is very important to have healthy hair and nails. However, the following table shows the habit of eating egg by the Mishings:

Table 7.16
Habit of Eating Eggs
(Percentage in Parentheses)

Type of Routine	No. of Persons									Total		
	Namtemera			Baghedhara			Golaghat town					
	M	F	Total	M	F	Total	M	F	Total	M	F	Total
Daily	32 (5.40)	38 (7.58)	70 (6.40)	41 (14.85)	38 (14.13)	79 (14.49)	21 (9.59)	27 (5.52)	48 (12.21)	94 (8.64)	103 (10.91)	197 (9.70)
On alternate day	65 (10.96)	73 (14.57)	138 (12.62)	59 (21.38)	66 (24.53)	125 (22.94)	53 (24.20)	40 (22.99)	93 (23.66)	177 (16.27)	179 (18.96)	356 (17.52)
Twice in a week	76 (12.81)	89 (17.77)	165 (15.08)	55 (19.93)	50 (18.59)	105 (19.26)	38 (17.35)	33 (18.96)	71 (18.07)	169 (15.53)	172 (18.22)	341 (16.78)
Weekly	330 (55.65)	204 (40.72)	534 (48.81)	69 (25.00)	65 (24.16)	134 (24.59)	66 (20.69)	36 (20.69)	102 (25.96)	465 (42.74)	305 (32.31)	770 (37.89)
Vegetari-an	90 (15.18)	97 (19.36)	187 (17.09)	52 (18.84)	50 (18.59)	102 (18.72)	41 (18.72)	38 (21.84)	79 (20.10)	183 (16.82)	185 (19.60)	368 (18.11)
Total	593 (100)	501 (100)	1094 (100)	276 (100)	269 (100)	545 (100)	219 (100)	174 (100)	393 (100)	1088 (100)	944 (100)	2032 (100)

Source: Field survey conducted during 2nd May – 30th September 2011

The table shows the habit of eating egg by the Mishings of the two villages and Golaghat town. In this case they have followed four routines, e.g., daily, on alternate day, twice in a week and weekly. The data presented in the above tables shows that the Mishings are not particular in case of eating egg with their dish as out of the total population (2032) of the two villages and Golaghat town, 37.89% persons take egg weekly, whereas only 9.70% persons take egg on daily basis, 17.52% persons take it on alternate day and 16.78% persons take egg twice in a week. The picture is same in both the villages and Golaghat town. The table shows that 48.81%, 24.59% and 25.96% persons of the total population take egg weekly in the village Namtemera, Baghedhara and Golaghat town respectively.

Habit of Taking Fruits

Habit of taking fruits and vegetables is one of the best healthiest and best tasting foods. Because these have low sodium and calories and most are fat free. These provide vitamins, minerals, fiber and other natural substances which are necessary to stay

healthy. The Mishings also believe that habit of eating fruits and vegetables help to control weight, lower the risk of stroke, heart disease and blood pressure. Therefore, they have the habit of taking uncooked green leafy vegetables as well as fruits. The following table shows the habit of taking fruits by the Mishings in both the villages as well as Golaghat town:

Table 7.17
Habit of Taking Fruits
(Percentage in Parentheses)

Type of Routine	No. of Persons									Total		
	Namtemera			Baghedhara			Golaghat town					
	M	F	Total	M	F	Total	M	F	Total	M	F	Total
Daily	32 (5 40)	37 (7 39)	69 (6 31)	9 (3 26)	16 (5 95)	25 (4 59)	11 (5 02)	13 (7 47)	24 (6 11)	52 (4 48)	66 (6 99)	118 (5 81)
On alternate day	29 (4 89)	41 (8 18)	70 (6 40)	26 (9 42)	31 (11 52)	57 (10 46)	35 (15 98)	34 (19 54)	69 (17 56)	90 (8 27)	106 (11.23)	196 (9 65)
Twice in a week	117 (19 73)	72 (14 37)	189 (17 27)	19 (6 88)	24 (8 92)	43 (7 89)	41 (18 72)	29 (16 67)	70 (17 81)	177 (16 27)	15 (13 24)	302 (14 86)
Weekly	91 (15 34)	84 (16 77)	175 (16 00)	76 (27 54)	85 (31 60)	161 (29 54)	62 (28 31)	37 (21 26)	99 (25 19)	229 (21.05)	206 (21 82)	435 (21 41)
Occasion ally	299 (50 42)	242 (48 30)	541 (49 45)	124 (44 93)	102 (37 92)	226 (41 47)	52 (23 75)	52 (29 89)	104 (26 46)	475 (43 66)	396 (41 95)	871 (42 86)
Not applicab-le **	25 (4 22)	25 (4 99)	50 (4 57)	22 (7 97)	11 (4 09)	33 (6 05)	18 (8.22)	9 (5 17)	27 (6 87)	65 (5 97)	45 (4 77)	110 (5 41)
Total	593 (100)	501 (100)	1094 (100)	276 (100)	269 (100)	545 (100)	219 (100)	174 (100)	393 (100)	1088 (100)	944 (100)	2032 (100)

Source: Field survey conducted during 2nd May – 30th September 2011

** Children below 0-12 months.

The table shows that though the Mishings of both the villages have the habit of taking fruits in their lives majority of them take it occasionally as out of the total population of Namtemera, 50.42% persons take fruits occasionally, whereas only 9.42% and 6.40% persons take fruits daily and on alternate day respectively. Similarly, the number of persons who take fruits occasionally in Baghedhara is also more. Of the total population of this village 41.47% take fruits occasionally, whereas only 4.59% person of this village take fruits daily. On the other hand, of the total Mishing population in

Golaghat town, 26.46% persons take fruits occasionally whereas only 6.11% persons take fruits daily. Thus, the table reveals the Mishings are not so interested in taking fruits irrespective of gender and nature of residence.

Of course, the villagers as well as the town dwellers believe that taking fruits is good for health as different fruits have different vitamins useful for health. According to them it is necessary to take seasonal fruits for maintaining good health. But, due to their poor economic condition and unavailability of the fruits in their local areas they do not take it daily.

Consumption of Alcohol

Both males and females of Namtemera and Baghedhara and Golaghat town drink large quantity of liquor (foreign or country made or local made). But less number of female takes country or foreign liquors. There is no special occasion for drink as most of the persons are found as habituated drunkards. Of course majority of them consume their local liquor known as *apong*. They believe that taking local made liquor has a good effect to health as it works as a medicine of jaundice or urinary problems.

Before drinking, a few drops of liquor are offered to their gods. They will dip the forefinger in the liquor and offer three drops of liquor to gods. Otherwise, the gods, they believe, may get angry with them. Therefore, both males and females follow this habit. The following table shows kind of liquor and the number of persons who have the habits of consuming alcohol:

Table 7.18
Kind of Liquor Used
(Percentage in Parentheses)

Type of Routine	No. of Persons									Total		
	Namtemera			Baghedhara			Golaghat town					
	M	F	Total	M	F	Total	M	F	Total	M	F	Total
Local made	423 (71 33)	284 (56 69)	707 (64 63)	206 (74 64)	184 (68 40)	390 (71 56)	151 (68 95)	102 (58 62)	253 (64 38)	780 (71 69)	570 (60 38)	1350 (66 44)
Country liquor	210 (35 41)	190 (37 92)	400 (36 56)	120 (43 44)	112 (41 64)	232 (42 57)	119 (54 34)	93 (53 45)	212 (53 94)	449 (41 27)	395 (41 84)	844 (41 54)
Foreign liquor	339 (57 17)	168 (33 53)	507 (46 34)	131 (47 46)	129 (47 96)	260 (47 71)	121 (55 25)	90 (51 72)	211 (53 69)	591 (54 32)	387 (41)	978 (48 13)

Source: Field survey conducted during 2nd May – 30th September 2011

The above table shows that the Mishings use three kinds of liquors, i.e., local made, known as *apong*, country liquor and foreign liquor. Among these, local made liquor is most popular in their society. Of the total population (2032) of the three areas, 66.44% use local made liquor, whereas 41.54% use country liquor and 48.13% use foreign liquor. Local made liquor is popular in both the village as well as Golaghat town as 64.63% persons of the total population in Namtemera use this liquor. On the other hand, 71.56% persons of the total population in Baghedhara and 64.38% persons of the total population in Golaghat town use this liquor in their day to day lives. It is found that the use of country liquor is not so popular among the Mishings in both the villages and Golaghat town.

The number of persons, who use country liquor, is fewer than the number of persons who use local made and foreign liquor. In Namtemera it is found that out of total population, 36.56% persons use country liquor, whereas the number of persons who use foreign liquor in this village is 46.34%. Similarly, in Baghedhara the number of persons using country liquor is 42.57% and the number of persons use foreign liquor is 47.71%. Of course, the number of Mishing persons who use country and foreign liquor in Golaghat town is almost same.

Thus, variation is observed in case of type of liquor consumed by the villagers as well as town dwellers. Variation in economic condition of the households is one of the main causes of this variation in the consumption of country and foreign liquors between the villages and town. Besides, taking too much country and foreign liquors may damage one's health. It may be a cause of cancer, liver disease, TB etc. But comparatively local made liquor is not harmful to health. On the other hand it may be assumed that consumption of alcohol is one of the main causes of economic backwardness of the Mishings. Because a major portion of their daily income is spent for this purpose. Besides, to prepare local liquor a heavy amount of rice is required.

Smoking and Chewing

The villagers as well as the town dwellers are very much fond of chewing betel nut. *Beedi* or cigarette is their secondary choice. They take a piece of betel leaf, a piece

of tobacco and a little lime with the betel nut. Some people chew tobacco only. Though the females use betel nut in their daily life they donot smoke cigarette or *beedi*. Of course, they are not aware of any restriction on this matter. They think that smoking is a sign of masculinity and therefore they should not smoke it.

Habits of Using Contraceptives

The process of family planning is influenced by the modern health care system. Though the Mishings use the herbal contraceptive in earlier days, now-a-days they use modern methods of family planning. In both the villages and Golaghat town, both the males and the females are aware of family planning method. However, the females are found greater in number than the males in its adoption, while males are reluctant in this regard. This may be due to the patriarchal society where the females play a secondary role and the decision about the method of birth control may rest on the male counterparts.

Women reported receiving a range of benefits from their contraceptive use. The majority of women perceive that using birth control allows them to better care for themselves and their families, either directly or indirectly through facilitating their education and career. Moreover, most women considered many reasons for using contraception to be very important. As might be expected for their stage in life, younger, unmarried, and childless women provided a broader set of reasons than women who were older, married, or already mothers did. This finding is consistent with the fact that young, unmarried women are generally at high risk for unintended pregnancy, and suggests that they see avoiding unintended pregnancy as integrally related to many aspects of their lives.

Some of the important reasons for contraceptive use include the fact that it leads to economic security, improved educational and career outcomes, and being able to better care for one's family. For example, not being able to afford a baby, not being ready for children, feeling that children would interrupt goals, not having a partner, and wanting to better care for children already born were all considered very important reasons by the majority of respondents. Among women with children, nearly all reported that the desire to care for their current children was a reason for contraceptive use.

Additionally, many women reported that birth control was a means to maintain control in their lives. Birth control appears to offer a means of personal empowerment, which may be especially important to certain women facing instability in other aspects of their lives. While financial realities are frequently a motivator in planning pregnancies, the importance of unemployment in this study may reflect the influence of the recent economic downturn. Nearly one out of four women in this study reported that being unemployed (either they or their partner) was a very important reason for their contraceptive use.

Community Health Seeking Behaviour

Like household and personal health seeking behaviour community health seeking behaviours are also important. In this context the practice observed in the community life of the Mishings are being discussed.

Belief in *Mantras*, Amulets & Magic

Despite the improvement of medical facilities in the form of modern medicines and improved equipments, the villagers as well as the town dwellers still rely mainly on their local medicine men. The Mishings believe that these medicine men have spiritual and magical methods of curing diseases. Most of them attribute diseases and premature death to evil spirits and magicians or breach of taboos. They go to the traditional medicine man, who finds out the causes of the ailment and prescribes sacrifices or counter magic. Sometimes, both traditional and modern treatments are taken simultaneously. Usually they go to hospital when the traditional treatment fails.

The illiterate village midwife attends to the delivery cases. The older women's injunctions, superstitious beliefs and folktales serve as clinic for maternal and child care in the rural areas. Added to these social and cultural factors, the low literacy level, poverty and unhygienic home conditions perpetuate the traditional belief system. Pregnancy is kept secret as far as possible and complications that arise at the time of delivery are sorted out either by the village *dhai* (midwife) or through prayers and offerings to the goddess.

The number of households believing in *mantras*/ amulets or any other magic for treatment in both the villages and town is shown in the following table:

Table 7.19
Belief in *Mantras*, Amulets & Magic
(Percentage in Parentheses)

Status	No. of Households			Total
	Namtemera	Baghedhara	Town	
Yes	59 (39.07)	48 (60.73)	17 (30.36)	124 (43.36)
No	92 (60.93)	31 (20.53)	39 (69.64)	162 (56.64)
Total	151 (100)	79 (100)	56 (100)	286 (100)

Source: Field survey conducted during 2nd May – 30th September 2011

The table shows that out of the total households (286) of the three areas, 43.36% households believe in *mantras* and magic as a remedy of disease. On the other hand, 56.64% households do not believe in it. The table also shows that majority of the households in the Baghedhara (60.73%) believe in *mantras*/ amulets or any other magic for treatment. Both males and females suffered from diseases caused by evil spirits use *mantras* and amulets from the *Bejs* of the village. On the other hand, in Namtemera and Golaghat town the number of households having belief in these *mantras*, amulets and magic is fewer in comparison to Baghedhara as 60.93% households in Namtemera and 69.64% households in Golaghat town do not believe in these systems of treatment. Of course, these systems still have a dominant role in Namtemera and Golaghat town.

Social Taboos for Good Health

In Mishing society health is equally important for both males and females. As the women are equally important in their economic activities, good health is as much necessary for women as for men. Traditionally there are no specific health practices for males and females in their society. Rather, the traditional health practices are common for men and women. In their traditional health practices observance of social taboos have played an important role. The taboos have originated from the belief in the supernatural forces. Any violation of such taboos invites the wrath of supernatural powers which will inflict diseases and other calamities upon the human beings. Therefore, the Mishings are very particular in following these taboos. If somebody happened to violate a taboo, he/ she will make the necessary offerings in the temple of the village and observe other rituals for the expiration of his sins.

Thus, taboos are meant to instill correct dispositions in people through fear-inducing moral sanctions. It should be noted that even though the taboos have limitations in that they do not disclose the true consequences of certain human character defects, the most important aspect of these taboos is to inculcate commendable character traits in their apprentices that would make them worthy members of society that would not only behave in a desirable way towards fellow human beings, but also relate to the environment in a manner that embodies respect for biodiversity as well as sustainable exploitation of nature's resources. These taboos provide prohibitions that forbid people from behaving in such manners that are a threat to the welfare and wellbeing of fellow human beings and the rest of the environment. Even though taboos foster commendable character traits among people through threat of severe reprisals for the ones who violate them, they have desirable utility because they help to keep the wicked in check. In this regard, though the means of enforcing desirable behavior among people are morally questionable, the end justifies the means.

Some of the important taboos observed by the Mishings in their day to day life are as follows:

(i) Eating of meat of cow, buffalo and elephant is a taboo as they have worshiped them. Cow is considered the mother of man, as it gives milk. Only her milk can be used. Buffalos are used in agriculture and elephants are considered as spirit so they do not eat their meat.

(ii) Walking over the rope of a cow, especially by a pregnant woman is also a taboo because, as they believe, it reduces the expectancy of life of the mother as well as the child.

(iii) Walking over a place where somebody has urinated or defecated is a taboo as it will pollute the person.

(iv) Sexual intercourse of a man with a menstruating woman is a taboo as it is harmful for the woman. Besides, such a man will be considered polluted.

(v) Entry of a menstruating woman into a crop field is a taboo. Her presence will be harmful to the crops.

Since the diseases caused by violation of taboo are supernatural in origin, neither herbal nor allopathic medicines can cure them. Only the treatment of a *Bej* will give relief to such a patient. Along with performance of some magical rites, a number of offerings will be made in the *Namghar* (prayer hall) of the village to please the deities.

Lastly, re-capitulation of the major aspects of the discussion is given below:

The health seeking behaviours of the Mishings were discussed in three broad categories, i.e., personal health seeking behaviour, household health seeking behaviour and community health seeking behaviour. In the system of health seeking behaviour, household as well as personal health care habits have played an important role. In the backdrop of newly generated awareness, health care habits of the Mishings, in both the aspects, are not satisfactory. They have to walk a long way to attain the goals of health and sanitary environment as is evident in the following findings:

1. Household hygiene is an important aspect of household health-seeking behaviour which is related to most of the aspects of living. Hygiene practices may be considered as preventative measures to reduce the incidence and spread of disease. In the process of preparation of food, cleaning utensils, household floor, etc. good hygiene is a key part of maintaining good health, while the neglect of hygiene can be considered disgusting, disrespectful or even threatening. In this regard the Mishings have some good health seeking behaviours in both Namtemera and Baghedhara villages and the Mishings of Golaghat town. All of them have the habit of washing hands before and after taking meal, eating uncooked green leafy vegetables, cleaning utensils and household floor, brushing teeth regularly by males and females, etc. According to the Mishings, eating uncooked green leafy vegetables helps keep their skin afresh. It also helps strengthen the digestive power of liver.

2. Using different materials for cleaning utensils is also observed among the Mishings of both the villages and Golaghat town. Basically, for this purpose they use ashes and (Vim bar or Pril) company product detergents. Out of the total households, 58.04% use ashes whereas 41.96% use either vim bar or pril for this purpose. Using ashes is most popular in both the villages in comparison to the Golaghat town. Out of the total households (151) of Namtemera, 86.75% use ashes for this purpose. Similarly,

44.30% of the 79 households in Baghedhara use it for cleaning utensils, whereas no Mishing households of Golaghat town use this material for cleaning their household utensils. Rather, all of them use either vim bar or pril for clean their household utensils. Thus, variation is noticed regarding the use of various materials for cleaning utensils in the two villages and Golaghat town.

3. Variation in methods for cleaning household floor is also observed. Basically three methods; namely, dusting, plastering and wiping are observed in this regard. Out of these majority of the households use dusting method for cleaning household floor followed by plastering and wiping. Out of 286 households of the field of the study, 64.68% use dusting method, 24.13% use plastering method and the rest (11.29%) use wiping method. The dusting method is most popular in both the villages as well as the Golaghat town. Out of the total households (151) of Namtemera, 70.86% use dusting method. In Baghedhara and Golaghat town, 68.36% and 42.86% households of the total use this method respectively. Likewise, the plastering method is also popular in both the villages and Golaghat town as out of the total households in Namtemera, 27.15% use plastering method. Similarly, 26.58% of the 79 households of Baghedhara use plastering method. On the other hand, wiping is the most popular method for cleaning household floor in Golaghat town as 44.64% of the total households (56) use this method, where as only 1.99% and 5.06% households in Namtemera and Baghedhara use this method respectively.

Variation in use of different methods for cleaning household floor is present due to the different patterns of houses. Households which have the *kaccha* pattern of houses use plastering method whereas the wiping method is mostly used by the households which have *pacca* pattern of house.

Division of labour on the basis of gender is observed among the Mishings in cleaning utensils and household floor in both the villages and Golaghat town. They believe that women are responsible for these types of work. Cleaning utensils and household floor are considered the works of women. Therefore, the women in both the villages and Golaghat town perform these activities.

4. Habit of brushing teeth is another health seeking behaviour practiced by the Mishings irrespective of gender. For this purpose they use different kinds of brush such as tooth brush available in the market, charcoal and small branches of plants. Of the total population, 70.13% use tooth brush available in the market, whereas 13.63% use small branches of different plants and 7.92% use charcoal to brush their teeth. Use of tooth brush is most popular in both the villages as well as Golaghat town. In Namtemera, 69.29% use tooth brush, whereas 14.81% use small branches of plants and only 7.95% use charcoal for brushing teeth. Similarly, in Baghedhara also 63.30% of the total population use tooth brush available in the market and 14.68% use branches of plants and another 13.58% use charcoal.

On the other hand, no person in Golaghat town uses charcoal for brushing teeth. It is found that 81.93% of the total Mishing population use tooth brush available in the market and the rest (8.91%) use branches of plants. According to their belief use of branches of plants, especially medicinal plants, is good for teeth.

5. The overall sanitary condition of the villagers is not good due to the factors like poverty, ignorance, social customs, religious sanctions, age-old habits, and climatic conditions, etc. But the sanitary condition of the Mishing households of the Golaghat town is much better in comparison to the two villages. Out of the 56 Mishing households of Golaghat town, 91.07% have *pacca* latrines and only 8.93% have *kaccha* latrines though there is no separate latrine for male and female.

On the other hand, only 4.64% of the total households in Namtemera have *pacca* latrines whereas 85.43% have *kaccha* latrines and 9.93% have the habits of open defecation. The situation is also similar in Baghedhara as only 16.46% households have *pacca* latrines and 83.54% have *kaccha* latrines.

6. The provision of urinal facility is also an element of health seeking behaviour. So, having this facility for both the genders indicates the hygiene consciousness of a population. All the Mishing households in Golaghat town and Baghedhara have the urinal facility either *pacca* or *kaccha*. But in Namtemera, out of the total households 90.07% have urinal facility and the rest (9.93%) households do not have this facility.

7. Generally, tribal people use different natural sources like springs, ponds, brooks etc. as source of drinking water. But this picture is quite different in case of Baghedhara and Golaghat town as no household uses any natural sources for this. But in Namtemera two different sources have been found as sources of drinking water; namely, deep tube well and rive. In this village, 88.74% households use deep tube well and 11.26% use river as source of drinking water, whereas all the households of Baghedhara use deep tube well.

On the other hand, three different sources of drinking water have been found in Golaghat town, e.g., deep tube well, urban water supply and water supplied by public health department office. Of the total Mishing households in Golaghat town, 25% use deep tube well 48.21% use urban water supply and 26.79% use water supplied by public health department office at Golaghat town.

8. The system of purifying drinking water is very much neglected in the tribal societies which provide an easy way for epidemics to spread from person to person through the medium of drinking water. So, purification of drinking water helps to avoid health hazards. Four different methods are used by the Mishings to purify drinking water. Among these, 42.66% of the total households use filtering method, 17.48% use filtering as well as boiling method, 10.84% use boiling method and 7.34% use electric purifier to purify drinking water. In Namtemera, use of filter for this purpose is found most popular as 54.79% households use this method. On the other hand 11.26% households use boiling method and another 15.23% households use both boiling and filtering methods for this purpose. Of course, 18.54% households do not use any method for purifying drinking water.

In Baghedhara majority of the households do not use any method to purify drinking water. In this village, 36.71% of the total households use non-filtered water whereas only 34.18% use filtered water and 20.25% use both boiling and filtering methods.

On the other hand, majority of the Mishing households in Golaghat town use electronic purifier. Of the total Mishing households, 37.5% in Golaghat town use this method whereas 21.43% use filtering method, 12.5% use boiling method and 19.64%

use both boiling and filtering methods. Of course 8.93% households of Golaghat town use non-filtered water.

9. The personal health seeking behaviour practices include personal hygiene such as bathing habits, eating habits, drinking habits, consumption of alcohol, smoking and chewing, habit of taking milk or curd, fruits, etc. In bathing habits variation is observed between males and females among the Mishings. Generally, the Mishings take bath once in a day. But the women are not particular in washing their heads daily due to their long hairs and heavy household workload. They take bath either in ponds or rivers and bath rooms. But the proportion of those using bath rooms is very less in the two villages.

Majority of the Mishings in both the villages and Golaghat town take bath once in a day. Of the total Mishing population (2032) of the two villages and Golaghat town, 53.17% have the habit of bathing once in a day. On the other hand, 22.64% persons have the habit of bathing twice in a day and 22.19% persons of the total population have this habit on alternate day. Thus, the Mishings are found to be a little more conscious on bathing habit. They think that they can keep away the diseases such as skin disease by maintaining personnel cleanliness.

10. In respect of eating habits the Mishings are found more conscious as they take meal three times in a day. Their staple food is rice and they do not observe any difference of males and females in case of taking meal. It is found that majority of the Mishings are non-vegetarian as out of the total population (2032) in the areas of study, 81.89% are non-vegetarian and only 18.11% persons are vegetarian. In Namtemera out of the total population, 82.91% are non-vegetarian and the rest 17.09% are vegetarian. Similarly, in Baghedhara also 81.28% persons of the total population are non-vegetarians and only 18.72% persons are found as vegetarians. On the other hand, out of the total Mishings of Golaghat town, 79.90% are non-vegetarian and 20.10% persons are vegetarians.

11. In case of vaccination or immunization of children the Mishings are not so conscious in both the villages and the Golaghat town. Out of the 364 children up to 12 years of age in both the villages and Golaghat town, 50.82% children have been vaccinated and the rest 49.18% children have not been vaccinated. In Namtemera out of

206 children of this category only 47.58% children have been vaccinated and the rest 52.42% children have not been vaccinated. Similarly, in Baghedhara also 47.25% out of 91 children have been vaccinated 52.75% children have not been vaccinated. Of course, in Golaghat town the number of vaccinated children is more in comparison to the two villages. As found out of the total children (67) of that particular age group 65.67% children have been vaccinated and only 34.33% children have not been vaccinated. This is so because of the consciousness of the guardians in this regard.

12. In case of regular health check up, the Mishings are also not conscious in both the villages and town. The Mishings who have the habit of health check up regularly generally get checkup of their health for high blood pressure, blood sugar and body weight. Out of the total population (2032) only 4.64% have this habit for high blood pressure, 1.33% have this habit for blood sugar and another 1.33% have this habit for checking their body weight. But, 92.67% have not the habit of regular health checkup for any causes. In Namtemera out of the total population, 2.93% have the habit of health checkup, whereas 97.07% do not have this habit. Similarly, in Baghedhara out of the total population (545), 6.79% have this habit and the rest 93.21% have not the habit of health checkup regularly. On the other hand, in Golaghat town, 20.36% persons of the total population have the habit of regular health checkup and the rest 79.64% do not have this habit. Thus, the habit of regular health checkup among the Mishings is not evident in both the villages and Golaghat town which indicates the absence of health conciousness among them.

13. In case of drinking habit of the Mishings, gender variation is observed as males are found habitual drinkers in both the villages and Golaghat town. It is found that the Mishings use three kinds of liquors, i.e., local made, knows as *apong*, country liquor and foreign liquor. Among these, local made liquor is most popular in their society as out of the total population (2032) of the areas of study 66.44% use local made liquor, whereas 41.54% persons use country liquor and 48.13% persons use foreign liquor. On the other hand, of the total population of Namtemera, 64.63% take local made liquor whereas 71.56% persons of the total population in Baghedhara and 64.38% persons of the total Mishing population in Golaghat town use this liquor in their day to day lives.

14. The Mishings are found very much fond of chewing betel nut. *Beedi* or cigarette is their secondary choice. Some people chew tobacco only. Though the females use betel nut in their daily life they do not smoke cigarette or *beedi*. Of course, they are not aware of any restriction on this matter. They think that smoking is a sign of masculinity and therefore they should not smoke it.

15. So far as family planning is concerned, both the males and the females, in both the villages and Golaghat town, are found aware of this method. However, the females are found greater in number than the males in its adoption, while males are reluctant in this regard. This may be due to the patriarchal society where the females play a secondary role and the decision about the method of birth control may rest on the male counterparts.

16. The community health seeking behaviour practices include belief in *mantras*, amulets and magic and social taboos practice by the Mishings for good health. Despite the improvement of medical facilities in the form of modern medicines and improved equipments, the Mishings still rely mainly on their local medicine men. They believe that medicine men have spiritual and magical methods of curing diseases.

Out of the total households (286) of the areas of the study, 43.36% households believe in *mantras* and magic as a remedy of disease. Majority of the households in Baghedhara i.e. 60.73% believe in *mantras*/ amulets or any other magic for treatment. On the other hand, in Namtemera and Golaghat town the number of households believes in these *mantras*, amulets and magic is less in comparison to Baghedhara as 60.93% households in Namtemera and 69.64% households in Golaghat town do not believe in these systems of treatment.

17. Another important aspect of community health seeking behaviour in their society is observation of social taboos. They believe that violation of taboos invites the wrath of super natural powers which will inflict diseases and other calamities upon the human being. Therefore, they are very particular in following these taboos. But, these taboos are mostly related to women, directly or indirectly, though males also observe some taboos. Some of the taboos which are still observed by the Mishings are:

(i) Eating of meat of cow, buffalo and elephant is a taboo as they have worshiped them. Cow is considered the mother of man, as it gives milk. Only her milk can be used. Buffalos are used in agriculture and elephants are considered as spirit so they do not eat their meat.

(ii) Walking over the rope of a cow, especially by a pregnant woman is also a taboo because, as they believe, it reduces the expectancy of life of the mother as well as the child.

(iii) Walking over a place where somebody has urinated or defecated is a taboo as it will pollute the person.

(iv) Sexual intercourse of a man with a menstruating woman is a taboo as it is harmful for the woman. Besides, such a man will be considered polluted.

(v) Entry of a menstruating woman into a crop field is a taboo. Her presence will be harmful to the crops.

In sum, we can say that the pattern of health seeking behaviour among the Mishings revel dismal picture. Poor health seeking behaviour among the Mishings can be attributed to social and living conditions, lack of favourable economy, illiteracy, ignorance, superstitions, improper and poor sanitation, unawareness of health education, underutilization of health resources, cultural lag, poorly developed mass media, poor medical and health opportunities and infrastructure, etc. However, in the process of modernization the Mishings have followed some good health seeking behaviours in their day to lives.