

Gender, Religion and Sanitation Behaviour of People in the Bishnupur District of Manipur

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Abstract: *The study aims to reveal the pattern of sanitation adoption behaviour among the people in the Bishnupur district of Manipur, to understand social and cultural variation, such as rural-urban residence, castes/ class/ tribe and religion that go along sanitation behaviour among the people and the gender difference of sanitation behaviour in the context. The paper therefore analyses the sanitation practices, habits or acts of individuals, household and community oriented to efficient disposal of disease-causing substances and as a result people get clean disease-free living and health protection. The studies surveyed here are divided into three categories, which are discussed in three levels; namely, personal, household and community levels and the gender difference of sanitation behaviour at personal, household, and community sanitation among the respondents of Bishnupur district of Manipur on the basis of primary data collected through a household survey.*

Keywords: Gender, Religion and Sanitation Behaviour

1. Introduction

Sanitation refers to a group of methods used to collect human excreta and urine as well as community waste and waters in a hygienic way where human and community health is not altered. As such it signifies the interventions made to reducing people's exposure to diseases, which usually include disposing and hygienic management of human excreta, animal excreta and waste water, control of diseases and provision of water facilities for personal and domestic hygiene. Improving hygiene behaviour and promoting latrine-use have become a major concern in most of the developing nations because of their need to fight against poverty, improve health and promote education. Safe disposal of human waste leads to decreased morbidities and mortalities that are linked to oral-fecal diseases and transmission such as diarrhea, helminthic infections and roundworms etc. Where one finds very low access to basic sanitation, increasing the effectiveness of management of excreta at the household level may have the biggest health implications and it may be the biggest challenge. Therefore, each community, region or country needs to work out the most sensible and cost effective way of thinking about sanitation in short and long terms and then act accordingly. Progress in sanitation and improved hygiene has greatly improved health, but many people still have no adequate means of disposing of their waste. This is a growing nuisance for heavily populated areas, carrying the risk of infectious disease, particularly to vulnerable groups such as the very young, the elderly and people suffering from diseases that lower their resistance. Poorly controlled waste also means daily exposure to an unpleasant environment. The built up of fecal contamination in rivers and other water bodies is not just a human risk: other species are affected, threatening the ecological balance of the environment. Human excreta have been implicated in the transmission of many infectious diseases, including cholera, typhoid, infectious hepatitis, polio, and ascariasis. Health impact of inadequate sanitation leads to a number of financial and economic costs including direct medical costs associated with treating sanitation-related illnesses and lost income through reduced or lost productivity and the government

costs of providing health services. Improved sanitation reduces environmental burdens, increases sustainability of environmental resources and allows a healthier, more secure future for the population. However, many people do not realize the health and economic benefits to the individual, the community and to society from improved sanitation. The high cost of improving sanitation is often cited as a barrier to implementing sanitation projects. Improving sanitation gets often low priority in the list of so many other pressing needs for the attention of governments. Most people are aware of poor sanitation having a health impact, but there is a lack of awareness of the extent of ill health it causes. To achieve the targets, action must start immediately households, communities, local and national governments, civil society, and private companies coming together. Though Water supply and sanitation were added to India's national agenda during the first five-year plan (1951-56), only in the early 1980s, with the thrust of the International Water and Sanitation Decade, that India's first nationwide programme for rural sanitation, the Central Rural Sanitation Programme (CRSP), could be launched in 1986 in the Ministry of Rural Development to improve the quality of life of rural people and to provide privacy and dignity to women. Providing huge subsidy for construction of sanitary latrines for BPL households it was supply driven, highly subsidized, and emphasizing on a single construction model. In 1992, it was again revised to make it an integrated approach of many sanitation programmes implemented by Government of India, Ministry of Rural Development (2012), including significant ones like total sanitation campaign, launched in April 1999, for rural areas and Jawaharlal Nehru National Urban Renewal Mission (JNNURM). Total Sanitation Campaign was implemented by many of the states in India, but in spite of that, rural and urban India continued to lack adequate sanitation, and sanitation related diseases take a heavy toll of lives, especially children's lives, costing upon productivity and draining incomes. Due to lack of awareness and socio-cultural attitudes sanitation has not received the recognition it deserves. This compels a large number of households to continue indignity of open defecation. This has an adverse impact on health, well-being and dignity, and is an acute problem especially for women and young girls

who often have to wait for darkness at night to defecate, which increases the risk of urinary tract infections, chronic constipation and psychological stress. Lack of toilets also makes it difficult to manage discreetly symptoms related to pregnancy, menstruation and child birth. The absence of sanitary facilities in schools also links to increase of girls' school dropout especially at their puberty period. Therefore, sanitation is not a matter of concern for community or nation only but rather a practice at individual and household levels, ultimately affecting the community, nation and society at large. Difference of sanitation is found not only among communities and societies but also between males and females in families and communities. In societies, due to patriarchy or otherwise, women are deprived of sanitation facilities in households, markets, schools and other public places, on the one hand, despite the fact that many of sanitation activities are generally carried out by women in households and outside. This indicates that needs for sanitation is embedded into gender differences in terms of normative and role structures of a community. Thus, gender defines and limits the need for sanitation among members of a community and these definitions and limitations vary in terms of other socio-cultural characteristics such as caste, class, religion and rural-urban residence. Gender difference of sanitation is found across communities in multicultural regions and communities in the valley of Manipur which houses the communities with a high level of consciousness for sanitation in North-East India. It makes a case for understanding the sanitation problem in the context of gender based relations and norms of behaviour among individuals in the communities. Therefore, the study addressed the question: What patterns of interrelationship between gender and sanitation are perceived at individual, household and community levels in India, especially in the Bishnupur district of Manipur? The question is being attempted with reference to the Bishnupur town and three villages: Toubul, Nachou, Kwata Khuman in the Bishnupur district of Manipur.

2. Objective of the Study

- i) To probe into the pattern of sanitation adoption behaviour among the people in the Bishnupur district of Manipur,
- ii) To understand social and cultural variation, such as rural-urban residence, castes, class, tribe and religion that go along sanitation behaviour among the people and the gender difference of sanitation behaviour in the context.

3. Research Methodology

The study is mainly based on the field data collected from a sample of 343 respondents of the households drawn from the town and three villages of Bishnupur district of Manipur. Respondents were selected from both the Bishnupur towns and three villages; namely, Toubul, Nachou and Kwakta khuman out of their adult population, using multi-stage sampling. The Bishnupur town consisted of 12 wards out of which three wards (No.2, No.7 and No.8) were chosen purposively so as to include considerable number respondents of Meitei, Pangal and tribal communities in the sample. Ward No. 2 has 161 Muslim households, ward No. 7 has 262 Christian household and ward No. 8 has 285 Hindu

and Sanamahi households. Similarly, all the household of the Meitei, Pangal and tribal communities were enlisted from the three villages (namely Toubul village, Nachou village and Kwakta khuman village) of Bishnupur district. Toubul village consist of 6 wards, out of which three wards (No. 1, No.5 and No. 6) were chosen. Ward No 1 has 191 Christian &TRC households, ward No 5 has 218 Hindu households and ward No. 6 has 228 Sanamah/Meetei households. Nachou village has 6 wards out of which ward No 3 is chosen it has 241 Hindu households. Kwakta has 18 wards 9 in urban and 9 in rural area. From rural, kwaktakhuman ward No 6 has chosen, it has 132 Muslim households. Then, households in the selected wards as well as men and women were enlisted. A sample of 20% of men and women, each, from the communities in the wards was taken. An interview schedule constructed to collect information was administered to the respondents from June 2017 to January 2018. The schedule consisted of the questions divided into three sections; namely, (I) Personal dimension of sanitation behaviour, (II) Household dimension of sanitation behaviour, (III) Community dimension of sanitation behaviour. A discussion on the disposal practices in each of these dimensions is being undertaken to understand the sanitation behaviour of the respondents.

4. Operational Definition

The term **socio-cultural correlates**, in the present study, refers to social and cultural factors such as rural-urban residence, caste, class, tribe and religion influence sanitation behaviour among people. **Gender** refers to distinction of men and women among the people which creates inequality in their access to sanitation. **Sanitation behaviour** refers to acts of individuals, household and community oriented to efficient and hygienic disposal of human waste (excreta, urine, sweating, nails, etc), animal excreta and carcasses, garbage, wreckage, dirt, spit, stagnant water, etc, reducing their exposure to diseases.

4.1 Personal Sanitation Behaviour

Personal sanitation behaviour includes individual's sanitary habits and practices like regular and appropriate cleaning of bowels, proper urinating, bathing, washing of clothes, teeth cleaning, paring of nails, etc which affect the state of one's living and health immediately and, as well, of those who come in contact with him/ her.

4.1.1 In general, most of the respondent (38.63%) clear bowels once a day. More females than males go for one time and irregular clearing of bowels. The gender and religious differences of bowel cleaning seem to be insignificant. The difference is mainly due to irregular eating habits, poor health condition and illness etc among the respondents. This means that the respondents across the genders and religious categories have a habit of clearing bowels in the morning in the given social situation.

4.1.2 Most of the Hindu and Sanamahi, Muslim, Christian & RTC respondent have to hold urine for long hours due to lack of urinal in market and other public places. Thus in public places the respondents have to hold urine for long

hours in absence of proper urinal/toilet facilities. For example, Muslim culture needs to use water after urination.

4.1.3. More males (25.23%) use public ponds and river to bathe. These patterns found similar across the religious groups determined by cultural norms governing gender behaviour as well as the available facility in public and private places. Similarly, Hindus seem to be having greater frequency of bathing due to religious concept of purity and worship. More Muslims (96.30%) and Hindu (64.5%) females take bath in the morning while more Christians (55.88%) females take bath in the afternoon, rest of the patterns are similar across the religious groups.

4.1.4 Most of the respondents, including Hindu and Muslim males and females, wear clothes once a day before washing. More females than the males wear clothes for one or two. Over one tenth of the Hindu and Muslim respondent including males and females, wear clothes for two days. Of the Christian respondents nearly half wear clothes for one day; over two fifth for two days and over one tenth for three days before washing. This means that the Hindu and Muslim respondents, males and females, have better clothes washing practice. This owes to their occupations living conditions and sanitation culture.

4.1.5 Most of the respondents use effective agent such as powder or soap and powder, both. Comparatively, Hindu and Christian respondents, including females go for rigorous washing by application of soap as well powder as compared with the Muslim respondents including their females. This means that the respondents have a good sense of washing.

4.1.6 Most (91.25%) of the respondents clean teeth once a day. Some (8.75%) respondents clean teeth twice a day. This pattern is more or less observed across the religious groups. The difference is that some of the Hindu & Sanamahi females clean their teeth at night for purification when they worship God at night, while Christian females clean their teeth at night for good oral health and hygiene.

4.1.7 Two fifths (40.82%) of the respondents have the habit of paring their nails four times a week, followed by twice (27.99%) , thrice(25.07%) a month. By and large a similar pattern is observed across the religious and gender groups. The purpose of nail paring is to keep nails healthy, but it varies among people depending on their understanding. The respondents who pare their nails for looking good are only Hindu and largely the Muslim males (35.48%). Most Muslim males keep their hands clean and nails well pared to look good as well as to stay hygienic.

4.1.8 Over two fifths (45.77%) of the respondents wash hands with soap and water, and nearly one fifth(18.08%) wash hands with water only before eating across the religious and gender groups. A small fraction (0.29%) of the respondents, one Hindu, washes hands with water and detol hand wash before eating. Comparatively the Muslim males and the Christian females who wash their hands with water and soap are less than their respective counterparts.

4.1.9 The number of those who suffered from ailments is the highest (45.45%) among the Christian respondents, trailed

behind by that of the Muslims respondents (25.86%) and the least among the Hindus respondents (13.7%). The female respondents across the religious groups who suffered ailments are less than their male counterparts. Besides, among the Christian and the Muslim respondents those who suffered from ailments the males are far more than females as compared to the Hindu respondents. This difference is mainly because of the meat eating and wine drinking habits of male respondents, they mostly have habits of heavy drinking and eating meat after work almost every day. That is one of the reasons for most males suffering from ailments.

4.1.10 Across the religious and gender groups majority (76.09%) of the respondents use hanky to clean running nose and about one fifth (19.24%) clean the running nose with hand and wash it while the rest use tissue paper and hand only to clean it. Among the Muslim respondents the hanky users are less than those who wipe nose and wash hand as compared with the Hindu and Christian respondents. The patterns are similar across the two gender categories.

4.1.11 Majority (52.77%) of the respondents bathe or wash to clean their sweating body, common among the Hindu and Christian respondents as well, while the rest wipe their sweating body with a cloth. The female respondents who bathe or wash sweating body are more than their male counterparts across the religious groups. This points out that the females have a better sense of sanitizing their sweating bodies. That is because females have to stay clean and fresh and attractive while looking after the family like, cooking, serving, caring for children and elder members of the family.

4.1.12 Most (82.80%) respondents across the religious groups have awareness of the sanitation acquired in the programmes organized by the local club, NGO, Govt. The male respondents are far more aware of sanitation than the female respondents. There is no gender difference of sanitation awareness among the Christian respondents while there is a huge gender gap of sanitation awareness of the Muslim female respondents as compared to their male counterparts. As more than half of the Muslim female respondents could not attend the program of sanitation awareness organized by local club/NGO/Govt. Only male respondents have more awareness of sanitation programme. Female members across the religious group could not attend the awareness programs as they are busy in household works.

4.2 Household Sanitation Behaviour

Household sanitation behaviour refers to disposal practices of human and animal waste, garbage and drainage, and animal keeping which constitute the family culture of sanitation affecting the health of the whole family and, then, affects other families and individuals in its vicinity.

4.2.1 Across the religious and gender categories most (88.92%) of the respondents keep dustbins to manage household garbage/ litters. The male respondents who keep it in dustbins are more than their female counterparts while it is found reverse in case of the respondents who throw away household garbage and litters.

4.2.2 About three fifths (58.90%) of the respondents household garbage/ litter is managed by males as well as

females whereas in case of two fifths (40.52%) of the respondents it is managed by females only. These patterns are by and large found in the Hindu and Christian groups and their gender categories while in case of the Muslim respondents the females only is responded by more females than their counterparts. In most of the Muslim families female does the household work herself as she thinks that it is her duty to look after her family while the male member is earning for the whole family. In case of the Christian respondents the males who believe that the task is socially assigned to females only are more than their female counterparts. Most of the females are doing household work out of their love for family and also believed that it is socially assigned to females only. People think that male member will earn for the family and female will look after the family. It is the nature of female to do the household works even if she earns for the family. Some males help in household work when they are free, but female will manage to do household work as well as earning work.

4.2.3 In majority of the Hindu and the Christian respondents either of the gender cleans the drain while in majority of the Muslim respondents it is done by females only. In our society Muslim females thinks drain cleaning is also a household task and mentioned that it is compulsory for females to do it.

4.2.4 Most (82.51%) of the respondent's household toilets are cleaned by females only and in case of over one third respondents (15.16%) it is done by either male or female across the religions and gender. But the female respondents seem to be emphasizing that it is mostly done by females only whereas their male counterparts, majority tells that it is done by males as well as females. This means that among Muslims toilet cleaning responsibility lies with the females only.

4.2.5 Majority of the respondents females dispose of children's feces in toilets across the religious categories, but the Muslim females and the Hindu and Christian males who throw away feces in meadow are greater than their respective counterpart. Thus, most of the respondents' females disposed of feces in toilets. However the Muslim females and Hindu & Christian males largely threw away in the meadows.

4.2.6 All but two (Hindu) respondents have habit of washing their hands with soap and water. The pattern is found across the religion and gender categories. The two respondents wash hands with water only after cleaning children's feces. As the two Hindu respondents who do not wash hands with soap and water after cleaning children's feces mentioned that they wash hands with soap and water before eating. Thus most male and female wash their hands with soap and water after children's feces disposal.

4.2.7 Over four fifths (88.92%) of the respondents children's running nose in the family is cleaned by female only and in case of over one tenth (11.08%) it is done by either of the two. Thus most female cleans children's running nose in the household across the religious and gender categories. Most females are assigned to clean children's running nose.

4.2.8 Over half (52.54%) of the respondents waste of hens/ducks is disposed of by either of the two and in case of over two fifths (41.53%) it is not done by females only. Among the Muslim and the Christians it is assigned to females only while among the Hindus it can be done by either male or female. Among the Hindu and the Christian respondents, across the two genders, most buried the waste underground. While among the Muslim respondents, across the genders, it is thrown in the meadow. Thus, most carcasses of birds and animals are disposed of by burying underground but most of the Muslims threw it in the meadow. Disposal of animals and birds' carcasses depends on type and size of the animals. Disposal of big animals is done by male member alone or with the help of female members in family. For the disposal of carcasses of small domestic animals such as hens and ducks, female member can do alone.

4.2.9 More male respondents dispose the birds and animals carcasses. The gender patterns differ within the religious group of the respondents. The Hindu respondents largely (60%) believed that either of the two gender can do it; the Muslim respondents believed that it is socially assigned to the females and the Christian respondents largely (38.6%) believed that it can be done by either of the gender; subsequently followed by female only (31.58%) and males only (29.82%). This indicates that the Hindus are moving towards gender neutrality while Muslims are still gender biased in this act of sanitation, socially assigned to the women. The reason is that Muslim females believed that household work should be done by females as most of them do not go out for earning. Muslim male earn for the family and most females take care of the families.

4.2.10 Among the Muslim respondents, female members in family suffered most while among the Hindu and Christian respondents male family members suffered largely. Thus most males suffered ailments in the last one year.

4.3 Community Sanitation Behaviour

The community level sanitation behaviour includes disposal of human excreta, dirt, garbage, litters etc, drainage and sewerage disposal of wreckage and stagnant water and restrained spitting at common places like roads, offices, markets, bus stands, railway stations, airports, common fields, fairs, ground, cinema halls, educational institutions, etc. These public practices comprise the environmental sanitation in community/ society and also affect the living and health of all the families in its surroundings and the individual who visit these places of common use. The environmental sanitation is function of both the culture of sanitation prevailing at personal and family levels and the institutional arrangement of the community/ society operative for sanitization of the environment.

4.3.1 Most respondents (71.43%) clean household surroundings regularly/ daily across the religion and gender categories. Most of the Hindu (64.84%) and Christian (71.21%) respectively burnt garbage while most of the Muslim (68.97%) respondents threw it in the meadow. Most of the Hindu (64.84%) and Christian (71.21%) respondents burnt it while most of the Muslim (68.97%) respondents threw it in the meadow.

4.3.2 Among the Hindu (72.6%) and Muslim (67.24%) respondents household surroundings are cleaned by either of the genders while among the Christian respondents it is largely done by females (45.45%), followed by either of the genders (36.37%). Thus either of the two can clean the household surroundings mostly.

4.3.3 In case of nearly half (47.23%) of the respondents' drains outside home are cleaned by males as well as females; in case of another nearly half (46.36%) it is done by males only and in a few cases (6.41%) it is done by females only. In case of the Muslim respondents, it is mostly (63.79%) done by males as well as females and in the case of the Hindu (53.42%) and Christian (53.03%) it is done by males only. The female respondents have largely stressed that it is done by males as well as females.

4.3.4 In case of almost all the Muslim respondents (98.29%) it is done regularly while in majority cases of the Hindu (55.71%) and most cases of the Christian (74.24%) respondents it is done regularly across their gender.

4.3.5 The Hindu (60.73%) and the Christian respondents (62.12%), across their genders, burnt the garbage while among the Muslim respondents across their gender it is mostly (62.07%) thrown away in the meadow.

4.3.6 Most of the Hindu (86.73%) and the Christian (98.48%) respondents have good drainage system while most of the Muslim respondents (84.48%) have bad drainage system. The respondents belonging to Meitei, Tribal and Pangal communities, all clean garbage of their public place.

4.3.7 Most persons disposing of garbage of public place are males as well as females across the two genders. However, among the Hindu (34.25%) and Christian (46.97%) respondents it is also largely done by males only.

4.3.8 A greater number of the Muslims (51.15%) and Christian (53.03%) respondents across the genders use community bath room while that of the Hindu (56.62%) respondents use public pond as observed across the genders.

4.3.9 Most Hindu female respondents (82.08%) and majority of Christian female respondents (61.76%) reported of public dustbin being cleaned by males as well as females. While 46.55% each of the Muslim respondents reported of it being done by males only and males as well as females. Most of the males and females thus clean the public place dustbin in the community.

4.3.9 The Hindu (63.93%) and the Christian (56.06%) respondents across genders burnt the waste while the Muslim (62.07%) respondents threw away the waste in the meadows.

4.3.10 Over half (59.68%) of the respondents suffered from ailments in communities due to pollution, about one third (35.48%) respondents due to infection, (3.23%) respondents causes of ailments in the communities is indigestion and few (1.61%) respondents due to harmful bacteria. Nearly half (45.16%) of the respondents who suffered most of ailments are either of the two, about two fifth (40.32%) respondents who suffered most are male only and over one tenth

(14.52%) respondents who suffered most ailments are female only.

5. Conclusion

In general, most of the respondents clear bowels once a day. Most of the respondents specially, females clear their bowels in the morning. A few clear their bowels in the morning as well as evening. In public places the respondents have to hold urine for long hours in absence of proper urinal/toilet facilities. Hindus seem to be having greater frequency of bathing due to religious concept of purity and worship. Muslim males and the Christian females who wash their hands with water and soap are less than their respective counterparts. Christian and the Muslim respondents those who suffered from ailments the males are far more than females as compared to the Hindu respondents. Among the Muslim respondents the hanky users are less than those who wipe nose and wash hand as compared with the Hindu and Christian respondents. Females have a better sense of sanitizing their sweating bodies. The male respondents are far more aware of sanitation than the female respondents. There is no gender difference of sanitation awareness among the Christian respondents while there is a huge gender gap of sanitation awareness of the Muslim female respondents as compared to their male counterparts. As more than half of the Muslim female respondents could not attend the program of sanitation awareness organized by local club/NGO/Govt. Female members across the religious group could not attend the awareness programs as they are busy in household work. In majority of the Hindu and the Christian respondents either of the gender cleans the drain while in majority of the Muslim respondents it is done by females only. Among Muslims toilet cleaning responsibility lies with the females only. Most of the respondents' females disposed of feces in toilets. However the Muslim females and Hindu & Christian males largely threw away in the meadows. Most male and female wash their hands with soap and water after children's feces disposal. Most females are assigned to clean children's running nose. Most carcasses of birds and animals are disposed of by burying underground but most of the Muslims threw it in the meadow. Disposal of animals and birds' carcasses depends on type and size of the animals. Disposal of big animals is done by male member alone or with the help of female members in family. For the disposal of carcasses of small domestic animals such as hens and ducks, female member can do alone. Most males suffered ailments in the last one year. Most respondents clean household surroundings regularly/ daily across the religion and gender categories. The Hindu and the Christian respondents across their gender burnt the garbage while among the Muslim respondents across their gender it is mostly thrown away in the meadow. The respondents belonging to Meitei, Tribal and Pangal communities, all clean garbage of their public place. Thus, most of the males and females clean the public place dustbin in the community.

6. Appendix of Tables

Table 1.1: Gender of the Respondents (Percentage in Parentheses)

Gender of Respondent	No. of Respondents	Percentage
Male	176	51.31
Female	167	48.69
Total	343	100

Source: Field Data Collected from June 2017 to January 2018

Table 2.2: Religion of the Respondents by Gender (Percentage in Parentheses)

Religion	No. of Respondents		
	Male	Female	Total
Hindu & Sanamahi	113 (64.20)	106 (63.47)	219 (63.85)
Islam	31 (17.61)	27 (16.17)	58 (16.91)
Christian & TRC	32 (18.18)	34 (20.36)	66 (19.24)

Source: Field Data Collected from June 2017 to January 2018

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