AN OBSERVATIONAL STUDY REGARDING PREVALENCE OF SUPERSTITIOUS BELIEFS AMONG PATIENTS ADMITTED AT A TERTIARY HOSPITAL IN INDORE

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ABSTRACT: INTRODUCTION: Superstitions have always been deep rooted in the Indian culture, and an integral part of everyday lives. Moreover, the people are tightly locked up in religious taboos thus taking useless Practices. Any cure for this disease brought about by means other than medical treatment, has a dramatic effect on people and strengthens their belief in supernatural powers. Ignorance of scientific reasons behind these phenomena increases the mystery and consequently gives a boost to superstition. MATERIALS AND METHODS: The present study was conducted to find out the prevalence of superstitious practices pertaining to medical conditions-i.e. typhoid, jaundice and psychiatric illness among 300 patients admitted at tertiary care hospital as studied in an interval of 3 months. A pre tested semi-structured questionnaire framed to assess the prevalence of superstitious practices in them. RESULTS: Superstitious practices were found more common in literate/Uneducated/Unemployed peoples. The most common age group involved was found to be 20-40 yr. group. Males are more involved in superstitious practices. The main reason found for the ignorance of scientific medical care are like- large distance from medical care, poor financial condition, fear of investigations, less trust on doctors, more belief on faith healing mid-way. However at last they convinced that the cure of any grave illness is not possible with means of faith healing alone. **CONCLUSION:** The present study clearly shows that superstitious beliefs still prevail in this modern world. This prevalence may block the wellbeing of the individuals and hinder their positive personal growth. Thus, steps should be taken to alleviate or at least reduce such superstitious beliefs, thus urging the people to think rationally and logically.

KEYWORDS: Superstition, Indian culture, Religious taboos, Faith healing.

INTRODUCTION: Superstitious rituals are defined as "unusual, repetitive, rigid behaviour that is perceived to have a positive effect by the actor, whereas in reality there is no causal link between the behaviour and the outcome of an event". In simple words, superstition is defined as "WIDELY HELD BUT WRONG IDEA".¹ There are many superstitions in the world based on religion, old story, legend, fortune telling, & personal experience. Such superstitions influence people's behaviour in various social situations.² How does this superstitious behaviour originate and why does it continue?

Several possible behavioral and cognitive explanations for superstitious behavior may be advanced. First, one line of reasoning may be derived from Classic work by Skinner (1948, 1953), who discovered that superstitious Behavior can arise through conditioning. The upbringing plays an influential role in the process of conditioning. What they see practiced around them, results that

these practices of superstition become deep rooted in their belief system. Also, people are inclined to see themselves as a cause, even in situations in which they are not influencing the situation.

This explanation holds that people carry out superstitious behavior in order to influence situations in which, in reality, they have no control. We argue that people carry out rituals in an uncertain situation; in which the outcome is not only uncertain, but the outcome also is important to them. Say for example a disease. The outcome of it is not only uncertain, but it's also important to them, in terms of life expectancy.³

Ignorance and poverty are necessarily accompanied by disease and superstition.⁴ Women surrounded by so many adversities- malnutrition, neglect in childhood, ignorance, early pregnancies, deliveries without any medical help, rigors of bringing up the children and facing responsibilities without receiving proper training and education-become victims of superstition.

Solution to the problem of superstition involves solving all these related problems and should find a place in 'Women's declaration on eradication of superstition. Thus, superstitions have always been deep rooted in the Indian culture, and an integral part of everyday lives. Moreover, the people are tightly locked up in religious taboos thus taking useless Practices for necessary practices.⁵

On a positive note, with education, awareness has started to creep among the masses. Despite the promising numbers, a significant proportion of the society, still turn to these self-confessed godmen, especially when it comes to ailments- physical or mental. Not only does it significantly increase the morbidity and mortality, it also brings disrepute to the medical profession, if and when the doctors are unable to help such cases.

MATERIALS AND METHODS: An Observational Cross-sectional study was conducted over a period of 3 months in a Tertiary Care Hospital in Indore city. Study population comprises of 300 Patient admitted in Hospital in Indore were chosen with simple random sampling method with complaints of Typhoid (100), Jaundice (100), psychiatric problems (100).

A pre tested semi-structured questionnaire framed to assess the prevalence of superstitious practices in them.

All the patients with Typhoid, Jaundice and Psychiatric illnesses who believe in faith healing/superstitious practices and who gave informed consent to participate in the study were included in this study. Written consent was taken from every patient before filling the questionnaire. Those patients who were not willing full two give written consent were excluded from this study. Data were entered in Microsoft Excel Office 2007. The Epi Info software (version 3.5.1) was used for analysis of data.

RESULTS: The study was conducted on 300 patients admitted in a Tertiary Hospital in Indore City, over a period of three months to ascertain the prevalence of Superstitious Practices in them. We found that 50% of those who believed in faith healing were either illiterate or educated up to primary school. In present study, highest percentage (46%) of people was in between 20-40 years of age. Among the believers of faith healing, 41.3% were laborers, while 31.3% unemployed. Among the interviewed persons, 43.6% were not earning. 90.66% did not consult ASHA/any health worker in relation to their condition. As regards to information about places where faith healing is practiced, 48.33% gained information from their neighbors, while 41% from their relatives. 30% of those interviewed, sought help of these services for typhoid, and 26.6% for psychiatric illnesses. 49% said they were benefitted with the aid of these services, and 51% replied in the negative. Impressively,

100% candidates convinced that the cure of any grave illness is not possible with means of faith healing alone. After being treated by faith healing, 56% said that they turned to medical treatment owing to their better judgment. 43.6% patients said they preferred the services of both sciences for being treated for a particular condition and 40.6% said they would prefer medical treatment only.

Among reasons for not preferring medical treatment first, 46% cited large distance from the health care facility as the cause, while 42% said poor financial condition was the reason.33% said they were unaware that medical treatment for their condition was being offered. When patients were asked to bring out the flaws, they felt existed in medical treatment, 29% said high cost was the main deterrent.14.6% said that timely treatment was not offered at the government health care facilities. When asked which treatment satisfied them more, 70.6% unanimously agreed on medical facility. 80.3% said they would seek medical care first in any case of future illness.

DISCUSSION: We found that 50% of those who believed in faith healing were either illiterate or educated up to primary school. Similar study done in Karachi5 revealed that the number of illiterates believing in superstitions was far more than the number of literates.

In our study, highest percentage (46%) of people was in between 20-40 years of age. Similar results were found in a study done by Edmund S.Colin⁶ of University of Oregon for superstitious belief and practice among college students which reveals that superstitious belief and habits of superstitious practices are common among college students.

In our study there was found a male preponderance in beliefs of superstition. This result was in contrary to the study done by Dressler.^{7,8,9} in California. He asked 875 normal school students about Superstitions to know their attitude toward it in the terms, no belief, partial belief, and full belief. Of these students majority of respondents with full belief in superstition were women (80%).

In the present study, religion wise the group most commonly following the superstition was of Hindus followed by Muslims. Although there may be a link between religiosity and superstitious belief, the connection may not be as simple as this study attempted to make it to be. Previous researches have often looked at the relationship between more specific personality characteristics in addition to religiosity as they relate to superstitious belief. Beck and Miller.¹⁰ (2001) found a correlation between a high degree of religiosity and higher level of belief in the supernatural. They also found that participants high in religiosity who has also encountered an emotionally negative experience in the past years decreased in their degree of supernatural belief. Their study suggests that there is a correlation between religiosity and superstitious belief when combined with experiences of life.

Majority of those interviewed said that they did not consult ASHA/health workers, in relation to their condition. This finding brings out the near failure of the government in the implementation of these schemes.

CONCLUSIONS: Majority of our population believes in superstitions, which are more common in illiterates. This stresses the importance of education, which is the only means, by which such malpractices can be uprooted from our society. The major problem encountered with such malpractices is that the once curable, and conditions earlier amenable to treatment, now become refractory to medical treatment. Most of the believers in superstitious practices were the young adults. This gives us the magnitude of the problem. Progress of the community is not possible, unless the youth give up their blind beliefs in these irrational practices. When asked what treatment they

preferred, most said they would seek advice of both. That is to say, although they believed in the ability of the doctors, still they would resort to faith healing in order to derive psychological satisfaction. This is the extent to which superstitious beliefs have found roots in our society! Among reasons for not preferring medical care first, they said large distances from the facility were the major one. Poor financial condition emerged as the next big cause. A significant number said they were unaware about the medical treatment of their condition. Bringing out the various flaws in medical care, they labeled high cost and the fact that timely care is not provided, as the major ones. On a positive note, majority opined that medical treatment satisfies them more, and that they would prefer medical care in case of a future illness. This proves that awareness among masses about medicine is only increasing.

Thus, the present study clearly shows that superstitious beliefs still prevail in this modern world. This prevalence may block the wellbeing of the individuals and hinder their positive personal growth. Thus, steps should be taken to alleviate or at least reduce such superstitious beliefs, thus urging the people to think rationally and logically.

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Age in years	No. of Patients	M	F	%
<20	58	34	25	19.33
20-40	138	78	58	46
40-60	90	52	38	30
60-80	13	10	4	4.3
>80	1	1	0	0.3
Total	300	175	125	100

Table 1: Distribution of patients according to their age & sex

Out of the 300 patients studied, majority were in the age group of 20-40 yrs and least number of patients were > 80 years of age.

OCCUPATION	No. of Patients	%		
HOUSEWIVES/UNEMPLOYED	94	31.3		
STUDENTS	38	12.66		
LABOURERS	124	41.3		
FARMERS	22	7.3		
BUSINESSMEN	10	3.3		
GOVERNMENT /PRIVATE SECTOR	12	4		
TOTAL	300	100		
Table 2: Occupation of the nationts studied				

Out of the 300 patients studied, most (41.3%) were laborers.

CAUSES OF NOT PREFERING HOSPITAL TREATMENT	No. of PERSONS	%
LARGE DISTANCE	138	46
POOR FINANCIAL CONDITION	132	44
FEAR OF INVESTIGATIONS	29	9.66
DO NOT TRUST DOCTORS	51	17
CANNOT LEAVE FAITH HEALING MID WAY	15	5
FAITH HEALING PRACTIONER ASKED NOT TO	5	1.66
CANNOT LEAVE HOME UNATTENDED	7	2.33
OTHERS	47	15.66

Table 3: Patients' reasons for not preferring the hospital treatment first

Out of the 300 patients studied the majority (46%) cited large distance from the hospital as the reason, while very few (1.66%) said that the faith healing practitioner asked them not to do so.

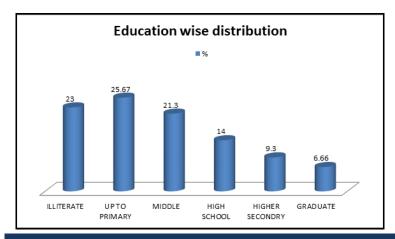


Fig. 1: Showing Education status of the patients studied

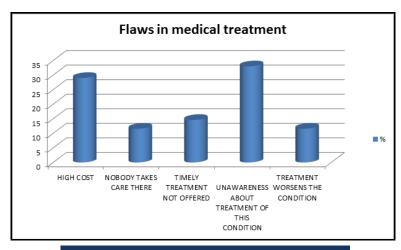


Fig. 2: Showing various flaws in medical Treatment as per the patients

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