

# **INFLUENCE OF CLASS CASTE AND RACE SYSTEM ON HEALTH**

**Ms Bushra Nazir Karjekar  
Clinical Instructor  
Dept Community Health  
Nursing  
MES COLLEGE OF NURSING  
GHANEKHUNT LOTE**

# INTRODUCTION

- *Caste, class and race are the major components of social stratification.*
- *Health is affected by both genetic and environmental factors.*
- *Many research studies have shown that certain diseases are prevalent in one particular caste, class or race, mostly due to their lifestyle pattern.*
- *Lifestyle includes eating, living habits, daily routine activities, smoking and drinking of alcohol, etc.*

# DEFINITION

## Caste

“When a class is somewhat strictly hereditary, we may call it a caste.”

**C.H.Cooley**

“Caste is a system in which an individual’s rank and its accompanying rights and obligations is ascribed on the basis of birth into a particular group”.

**Williams**

# **SOCIAL CLASS**

**“A social class in one or two or more broad groups of individuals who are ranked by the members of the community in socially superior and inferior positions”.**

**Ogburn and Nimkoff**

**“Class or aggregates of individuals, who have the same opportunity of acquiring good, the same exhibited standard of living”.**

**Max Webber**

# RACE

“A race is a large, biological human grouping, with a number of distinctive inherited characteristics which vary within a certain range.”

*Greens*

“A race is a large group of people distinguished by inherited physical difference”.

*Biesanz*

# **INFLUENCE OF CASTE ON HEALTH**

*Some castes follow food restrictions such as eating vegetarian or non-vegetarian diet.. Some castes have many superstitions, beliefs, religious sentiments related to food.This increases the risk of nutritional deficiency related disorders.*

*In some castes, marriages are allowed within their families thereby increasing the risk of genetic problems in future generations.*

*Due to improper hygienic practices, poverty, poor eating habits and inadequate knowledge about health and diet, the scheduled castes and scheduled tribes are more prone to infectious diseases when compared to other castes such as Bramins*

**National Family Health Survey 2005-2006 clearly highlights the caste differentials in relation to health status. These are:**

**The reduced access to maternal and child health care services, reduced levels of antenatal care, institutional deliveries and vaccination coverage among some castes compared to forward caste.**

**It is also observed that there is a higher incidence of anemia, underweight and infant and child mortality rate among people of lower caste.**

# INFLUENCE OF SOCIAL CLASS ON HEALTH

Income, occupation and education are important determinants health. There is evidence that risk behaviors are unevenly distributed between the social classes. Many research studies have shown a correlation between social class and incidence of disease .

Communicable diseases have a higher incidence among the lower class. Infant, child and maternal mortality rates are higher among the lower Class.

Non Communicable diseases such as Hypertension, diabetes, coronary artery disease are more prevalent in higher classes than in lower classes due to the rapidly changing lifestyle of individuals in that class.



- Life expectancy is less in people of lowerclass.
- Utilization of health services is better in upper social classes. Family welfare services, immunization, number of doctor consultations, antenatal visits, institutional deliveries and postnatal care are utilized better by upper classes than lower classes.
- Health problems related to under nutrition, infectious diseases and sexually transmitted diseases are more in lower and middle classes.
- Chronic diseases such as obesity, hyper- tension, etc., is more common in people belonging to the higher class.

# **FACTORS RESPONSIBLE FOR HEALTH DIFFERENCES AMONG SOCIAL CLASSES**

## **Physical environment**

Upper classes enjoy better physical environment such as safe water, housing, disposal of wastes, etc. Poorer people live in unhealthy environment. Their dwellings are small and lack lighting and ventilation. Their congested life breeds deadly diseases like cholera, TB and malaria.

## **Nutrition**

**Nutrition is an important determinant of health. Balanced diet with adequate amount of proteins, vitamins and minerals ensure better immunity in individuals belonging to upper classes. However, consumption of junk food and overeating coupled with sedentary lifestyle are responsible for higher incidence of lifestyle diseases such as diabetes, hypertension, etc. in upper class. Food consumed by people of the lower class is non-nutritive and of poor quality.**

## **Affordability of medical facilities**

People from higher class can afford good medical facilities and pay greater attention towards maintenance of health. However, people from lower class cannot afford superior health facilities. They resort to blind and superstitious ways of cure.

## **Education status**

Illiteracy, unemployment and superstitions are more prevalent in people belonging to lower class. All these factors are correlated with poor health.

## ***Economic status***

***Poverty is evidently bad for health. People from lower class lack employment, decent inhabitation, safe drinking water and sanitation. All these factors are responsible for their poor health.***

## **Attitude towards health and disease**

**People from lower class are more superstitious as regards health and food habits owing to their illiteracy and lack of awareness.**

# INFLUENCE OF RACE ON HEALTH

**Some health problems are more common in a particular race as compared to other races or groups.**

**For example, people with white skin are more prone to skin cancers.**

**An understanding of the social forces leading to racial differentials in health will give further direction to preventive Services.**

# SUMMARY

## REFERENCE

Form college library

- 1) Applied sociology For Nursing \_R Shrivani
- 2) Sociology for Nursing \_KP Neeraja
- 3) <https://www.slideshare>.



**THANK YOU**