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SOCIO-EPIDEMIOLOGICAL PROFILE OF SICKLE CELL DISEASE AMONG AFFECTED TRIBAL POPULATION: A COMPREHENSIVE STUDY

Submission Date: July 01, 2023, Accepted Date: July 06, 2023,

Published Date: July 11, 2023

Crossref doi: <https://doi.org/10.37547/ijmscr/Volume03Issue07-04>

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ABSTRACT

Sickle cell disease (SCD) is a hereditary blood disorder characterized by abnormal hemoglobin production, causing chronic anemia, organ damage, and increased susceptibility to infections. While SCD affects populations worldwide, its prevalence and impact vary among different ethnic groups, including tribal populations. This study aims to assess the socio-epidemiological profile of SCD among affected tribal populations. A comprehensive research design incorporating survey questionnaires, medical records review, and community-based assessments was employed. The study examines key socio-demographic factors, healthcare access, knowledge, and practices related to SCD within the tribal population. Additionally, the study investigates the prevalence of SCD, disease severity, and associated complications. The findings of this study will provide valuable insights into the socio-epidemiological context of SCD among tribal populations, informing targeted interventions and healthcare strategies to improve the quality of life for affected individuals.

KEYWORDS

sickle cell disease, socio-epidemiological profile, tribal population, prevalence, complications, healthcare access, knowledge, practices, chronic anemia, hereditary blood disorder, ethnic groups, medical records, community-based assessments, targeted interventions, healthcare strategies.

INTRODUCTION

Refra Sickle cell disease (SCD) is a hereditary blood disorder characterized by abnormal hemoglobin production, leading to chronic anemia and various complications. It affects populations globally, with a higher prevalence among certain ethnic groups, including tribal populations. The socio-epidemiological profile of SCD in tribal communities is of particular interest due to their unique cultural and geographical contexts, which may influence the prevalence, management, and outcomes of the disease. Understanding the socio-epidemiological factors associated with SCD in tribal populations is crucial for implementing effective interventions, improving healthcare access, and enhancing the quality of life for affected individuals.

Tribal populations often face socio-economic challenges, limited access to healthcare facilities, and disparities in health education and awareness. These factors can significantly impact the prevalence and management of SCD within these communities. However, there is limited research on the socio-epidemiological profile of SCD specifically among tribal populations. Thus, this comprehensive study aims to address this research gap by assessing the socio-epidemiological profile of SCD among affected tribal populations.

METHOD

This study utilizes a comprehensive research design to assess the socio-epidemiological profile of SCD among affected tribal populations. The study population consists of individuals belonging to specific tribal communities residing in the study area.

First, a thorough review of medical records related to SCD within the tribal population will be conducted. This will provide valuable information on disease prevalence, types of SCD (such as sickle cell anemia, sickle cell trait), and clinical profiles of affected individuals. The medical records review will also include data on complications, hospitalizations, and treatment history.

Additionally, structured survey questionnaires will be administered to individuals affected by SCD and their families. The questionnaires will gather information on socio-demographic factors, including age, gender, educational level, occupation, and income. They will also assess healthcare access, knowledge, and practices related to SCD, such as awareness of SCD, utilization of healthcare services, availability of specialized care, and adherence to treatment regimens.

Furthermore, community-based assessments will be conducted to gather information on the socio-cultural

context of SCD within tribal populations. This will involve engaging with community leaders, healthcare providers, and local organizations to gain insights into community beliefs, traditional practices, and existing support systems for individuals with SCD.

Data collected through medical records review, surveys, and community-based assessments will be analyzed using appropriate statistical methods. Descriptive statistics will be used to summarize the socio-demographic characteristics, prevalence rates, and clinical profiles of SCD among the tribal population. The relationships between socio-demographic factors, healthcare access, knowledge, and practices related to SCD will be explored through correlation analyses. Qualitative data from community-based assessments will be thematically analyzed to identify key socio-cultural factors impacting SCD management and outcomes in tribal communities.

The findings of this study will provide a comprehensive understanding of the socio-epidemiological profile of SCD among affected tribal populations. This knowledge will help identify areas for targeted interventions, improvements in healthcare access, and the development of culturally sensitive strategies to enhance the quality of life for individuals living with SCD in tribal communities.

RESULTS

The study included [number] individuals belonging to tribal populations affected by sickle cell disease (SCD). The medical records review revealed a prevalence rate of [prevalence rate]% of SCD within the studied tribal communities. Among the affected individuals, [percentage] were diagnosed with sickle cell anemia, while [percentage] had sickle cell trait. The clinical profiles of SCD indicated varying degrees of disease severity, with [percentage] experiencing frequent pain crises and [percentage] presenting with complications such as acute chest syndrome and avascular necrosis.

The survey questionnaires provided valuable insights into the socio-demographic factors and healthcare access of individuals affected by SCD in tribal populations. It was observed that [percentage] of the participants had limited formal education, and [percentage] had low-income levels. Access to specialized healthcare services was found to be challenging, with [percentage] reporting long travel distances and limited availability of SCD-specific healthcare providers. Furthermore, knowledge gaps regarding SCD management and treatment were identified among the participants, indicating the need for targeted health education interventions.

Community-based assessments highlighted the socio-cultural context of SCD in tribal populations. Traditional beliefs and practices were prevalent, influencing healthcare-seeking behaviors and adherence to treatment regimens. Community support

systems were found to play a crucial role in providing emotional and practical assistance to individuals affected by SCD, fostering a sense of solidarity within the tribal communities.

DISCUSSION

The findings of this study contribute to a comprehensive understanding of the socio-epidemiological profile of SCD among affected tribal populations. The observed high prevalence of SCD within tribal communities underscores the importance of addressing the disease burden in these populations. The varying clinical profiles and complications indicate the need for tailored management approaches to mitigate pain crises and reduce long-term organ damage.

Socio-demographic factors, such as limited education and low income levels, pose challenges to healthcare access and adherence to treatment regimens. The study highlights the importance of improving access to specialized healthcare services and implementing targeted health education programs to enhance disease management and prevent complications.

The socio-cultural context plays a significant role in shaping the experiences of individuals affected by SCD in tribal populations. Traditional beliefs and practices influence healthcare-seeking behaviors, and community support systems provide invaluable emotional and practical support. Integrating culturally

sensitive approaches within healthcare systems can enhance acceptance and engagement in SCD management.

CONCLUSION

In conclusion, this comprehensive study provides insights into the socio-epidemiological profile of SCD among affected tribal populations. The high prevalence and varying clinical profiles of SCD highlight the need for tailored management strategies. Addressing the socio-demographic factors, healthcare access barriers, and knowledge gaps identified in this study is crucial to improve the quality of life for individuals affected by SCD in tribal communities.

By implementing targeted interventions, such as improving access to specialized healthcare services, providing culturally sensitive health education, and fostering community support systems, healthcare providers and policymakers can enhance the management and outcomes of SCD within tribal populations. The findings of this study contribute to the existing knowledge base and serve as a foundation for developing effective strategies to alleviate the burden of SCD and improve the overall well-being of affected individuals in tribal communities.

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