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Culture of attitude to health in traditional cultures**Markha I. Kudusova**

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Abstract

People who are fully assimilated into society are developing a culturological concept of the value of health, which, for all its necessity, should not limit human rights to make their own decisions. It is shown that not all decisions in the field of health are reliable, there are different opinions on the instruments of treatment methods. However, despite the proven harm in modern science regarding harmful habits that are not generally antisocial, everyone can make their own decisions about their health, except in critical situations. In this regard, of course, the "imposition" on the indigenous population of the idea of how to implement an approach to preserving health can be determined by cultural customs, except in cases where it can directly affect the life of a person or society as a whole. However, the forms of its manifestation should take into account the cultural characteristics of the indigenous population. It is concluded that it is necessary to search for a model for the distribution of medical care, taking into account the cultural characteristics of indigenous peoples, primarily through the dissemination of information about its provision, access opportunities, and its provision at the present stage. Thus, it is shown that it is necessary to study the culture of indigenous peoples in the aspect of the value of health, to identify customs that prevent receiving medical care.

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Keywords

Health culture, medical care, indigenous peoples, traditions, customs.

Introduction

Currently, there are 370 million people around the world who maintain a traditional way of life (according to the UN in 2010), who represent hundreds of small indigenous peoples living on virtually all continents of the world. However, at the same time, it can be said that there is no country in which the number of inhabitants leading a traditional way of life would be predominant, regardless of the level of its economic development. Therefore, the cultural problems of interaction between the population of cities and communities leading a traditional way of life are very relevant.

Modern studies differ in the concepts of what kind of lifestyle is considered traditional – such as acceptance by society as persons belonging to traditional culture, or citizens using traditional elements of culture in everyday life - language, religion, rituals. There is a significant problem whether to consider a representative of the indigenous population who has adopted any of the widespread religions as a result of missionary activity, or who has received an education and carries out, for example, any of the types of social services of the indigenous population as belonging to the population is open. However, first of all, this problem is of a legal nature and how the possibilities of obtaining preferences are determined [Senese, Wilson, 2012]. More significant is the issue of limiting the availability of medical care due to the cultural characteristics of indigenous peoples leading a traditional way of life.

Main content

In modern research, it is proven that despite the fact that the actual all small nations around the world differ significantly, the common thing is that they all suffer from poor health indicators compared to other residents of the country. At the same time, these differences are currently increasing more and more. Also, modern research shows that a significant number of studies have shown that the rights of indigenous peoples are being infringed all over the world, despite the fact that many of them are constitutionally guaranteed. .

In addition to the direct factor of accessibility of medical facilities associated with transport restrictions, no less significant are such negative phenomena that have developed around the world as the deprivation of land rights, environmental pollution in traditional areas. Meanwhile, the UN Declarations enshrine the rights of the indigenous population to self-determination, including the possibility of continuing the transfer of cultural values. However, these rights are being violated all over the world, and this is primarily due to the "clash" of principles and approaches to the implementation of community life with the processes of urbanization. Thus, according to the UN data of 2010, about 50% of the indigenous population of the USA and New Zealand, and about 70% of the population of Australia and Canada live in cities, and this migration process is constantly continuing [Senese, Wilson, 2013].

In the modern political system of developed and developing countries, including Russia, there is a tendency towards equality of rights between indigenous populations. However, whether such citizens are representatives of the indigenous culture with a traditional way of life is a controversial issue. According to the authors, it is impossible to attribute such citizens to the indigenous population with a traditional way of life, since they are already "disconnected" from their culture and traditions, primarily related to their place of residence. Thus, the right to lead a traditional lifestyle involving the gratuitous use of natural resources. At the same time, this right is based on the use of land for compact residence of indigenous residents in their activities.

In this regard, the question of how it is possible to preserve the cultural identity of indigenous

peoples on the one hand and the right to medical care in the cultural aspect is becoming increasingly important.

The modern period in the context of the pandemic, there are more and more questions about the impact of cultural values on the preservation of the health and life of indigenous people leading a traditional lifestyle. It cannot be denied that many practices of preserving the health of the indigenous population are scientifically proven to be effective. So, the aborigines of Canada have a practice of using steam rooms, which has a positive effect on the cardiovascular system and participation in them is a significant ritual part of their life. Many indigenous peoples of the north of Russia effectively use herbal treatment. But at the same time, it is obvious that not all representatives of indigenous peoples are equally positive about the possibility of receiving qualified medical care. In addition, a number of medical influences may directly conflict between their customs and the need to preserve health. In the conditions of the current epidemiological situation, this situation is becoming more and more complex.

For example, in a number of nations there are ideas about how a new member of society should be born, and the use of technologies of maternity care leads to the fact that the newborn is not recognized by members of the community as their representative. Also, representatives of indigenous peoples have culturological features associated with early marriage and childbirth, which in turn contradicts medical conditions. Thus, there is a dilemma about how it is possible to find a balance between preserving the cultural identity of the indigenous population on the one hand and creating conditions for their survival on the other. So, it is obvious that it is wider contact with modern civilization in all aspects that is the main reason for the destruction of the lifestyle of the indigenous population, and often the need for more medical care. Therefore, it is necessary to explore the areas of interaction between traditional cultures and the values of health in general. It is obvious that for many representatives of indigenous peoples, they may come into conflict.

Thus, it is necessary to make a compromise in the search for an acceptable model for the distribution of medical care, taking into account the cultural characteristics of indigenous peoples, primarily through the dissemination of information about its provision, access opportunities, and its provision at the present stage. And for this purpose, it is necessary to study the culture of indigenous peoples in the aspect of the value of health, to identify customs that prevent receiving medical care.

Conclusion

In modern conditions, a part of humanity living and fully assimilated into society is developing a cultural concept of the value of health, which, for all its necessity, should not limit human rights to make their own decisions. Obviously, not all decisions in the field of health are reliable, there are different opinions about the methods of treatment. At the same time, despite the harm proven in modern science regarding harmful habits that are not generally antisocial, such as smoking and overeating, everyone can make their own decisions about their health, except in critical situations. In this regard, of course, the "imposition" on the indigenous population of the idea of how to implement an approach to preserving health can be determined by cultural customs, except in cases where it can directly affect the life of a person or society as a whole. However, the forms of its manifestation should take into account the cultural characteristics of the indigenous population.

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Культура отношения к здоровью в традиционных культурах

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Аннотация

Люди, полностью ассимилированной в общество осуществляется развитие культурологической концепции ценности здоровья, которая при всей своей необходимости не должна ограничивать права человека на принятие собственных решений. Показано, что не все решения в области здоровья носят достоверный характер, существуют различные мнения инструментов способов лечения. Однако, несмотря на доказанный в современной науке вред относительно вредных привычек, не относящихся в общем смысле к антисоциальным, каждый человек может принимать свои решения относительно своего здоровья, за исключением критических ситуаций. В этой связи, безусловно, «навязывания» коренному населению представления о том, каким образом необходимо осуществлять подход к сохранению здоровью может определяться культурологическими обычаями, за исключением тех случаев, когда это прямо может воздействовать на жизнь человека или общества в целом. Однако формы ее проявления должны учитывать культурологические

особенности коренного населения. Делается вывод о том, что необходимо осуществлять поиск модели распространения медицинской помощи с учетом культурологических особенностей коренных народов, в первую очередь за счет распространения информации о ее предоставлении, возможностям доступа, обеспечения его на современном этапе. Таким образом, показано, что необходимо осуществлять изучение культуры коренных народов в аспекте ценности здоровья, выявления обычаев, препятствующих получения медицинской помощи.

Для цитирования в научных исследованиях

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Ключевые слова

Культура здоровья, медицинская помощь, коренные народы, традиции, обычаи

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