

Chapter –X

Conclusion

CONCLUSION

To have a clear picture about the ‘Effect of education on health care practices amongst the tribal women of Kalahandi district’, one must have some idea about their population. It is found that out of 62 tribes of Odisha, 48 are found in Kalahandi. They constitute 28.64% of the total population. From 13 primitive tribes of Odisha 8 primitive tribes are found in Kalahandi (Census 2001). Bhuiya, Bhunjia, Birhor, Bondo Paroja, Kutia and Dongria khond, Saora and Lanja Saora are identified as Primitive tribes. The total number of males and females counted are 88,442 and 90,787 respectively from among primitive tribes, out of total population 1,79,229. The number of females predominates both among tribes and primitive tribes in Kalahandi. That means the females in tribal society are never neglected. This also indicates that the females are in an advantageous position than males in tribal communities.

Literacy is another factor from which social life can be picturised. Among tribes of Kalahandi the literacy among males, females and total are 59.17, 34.76 and 47.10 per cent respectively (2001 census). Incidence of poverty reduction among Scheduled Tribes has become a wide spread concern. It is presumed that forest can play an important role in reducing poverty among the tribals. Like other land-based resources, forest provides means to diversify local economies, to absorb excess labour and to contribute significantly to livelihood and food security of the tribal poor. A major cause of the backwardness of tribal regions is the weak organisational base of the tribal society.

About two-thirds of the populations of Kalahandi are Khonds. The Khond inhabitants of this district are of two classes—one living in the open country and forming the largest portion (probably about the three-fifths of the whole) called ‘Kotchriah’ Kondhs or Desia Khonds and the other confined to the hills called ‘Paharia’ or ‘Dongriah’ Khonds. The former is more civilized than the latter. They differ slightly in customs, depending chiefly on their relative positions and though this may be supposed to have determined their division, yet they do not intermarry nor do they have any interpersonal relationships among them one with another. The former are described as peace loving, loyal and industrious generally being cultivators. Their clothing generally consists of a single cloth and in some rare exceptions a turban.

They worship the same gods as the hill tribes; marry one wife and their ceremonies are conducted by the Majee of the village, or one of the elders of the tribe. The Dongria Khonds pay no tax whatever, their only contribution being a sheep or some small present at the Dusserah. It is probable that the establishment of periodical bazaars, as yet unknown to them here will tend beneficially in attracting them to the open country and inspiring and inducing them to mixing with the other inhabitants of the country. The gods worshipped by both the tribes of Kondhs are represented by two sticks of unequal length inserted in the ground without any tenement or temple. The names locally given are 'Dhurmee' or earth and 'Dhurma' (the judge of departed soul) and the offerings, which usually consist of arrack and live animals, such as fowls, sheep and buffaloes. As regards their food they are wholly indiscriminate and they prefer to cook in old earthen vessels which they obtain from the villagers of the open country when they bring these vessels with them carrying the turmeric, chilies, tobacco, oilseeds, Kandul (a large variety of pulse) and edible roots for exchanging for salts, clothes, etc. This age old practices of Barter system are still prevalent in their societies.

Many castes and tribes maintain each other's cultural specificity and uniqueness through the complex network of caste status either prescribed for the group or achieved through social process excepting for a few characteristic cultural identity, without which the basic uniqueness of the group would be difficult. But although the co-existing ethnic groups project a composite and universal culture, they do not completely give up their ethnicity and cultural settings. There are certain reasons and traditions for maintaining their ethnic specificity. The economically dominant groups have the ideological predomination upon the minor ethnic groups staying with them. In such cases the arts and ideologies of the dominant group influence the culture of small groups. As a result of which they completely assimilate with the dominant culture. In such cases, they feel insecure and their group identity is insecure. So they try to maintain their ethnic uniqueness through retaining the cultural peculiarities of the group.

The tribal people express their cultural identity and distinctiveness in their language, rituals, social organisation and festivals and also in their ornament, dress, art and craft. They have retained their own way of managing internal affairs of the village mainly through two institutions viz. the village youth dormitory and the

council. The dormitory is the core of tribal culture and it reinforces the age-old traditions in Kalahandi. Social systems Culture and are dynamic. While we speak about traditional tribal societies we always depict a society in transition. The rapid depletion of natural surrounding and eco- system of tribal people compounded with infiltration and intrusion of non-tribal elements into tribal domain play a major role in changing values, tribal ethos and tribal worldviews. The study certainly points out that the traditional health care system still finds its meaning of survival in tribal society. The traditional medicines, healers and the priests can still relate links between men, nature and the super-natural beings. This is the link on which the uniqueness of prevalent tribal society. Obviously, the tribals possess homely feeling with the protection given by their traditional healers against psychosocial problems or spiritual insecurity. This very spiritual insecurity plays vital role in tribal health care services, lack of which leads to failure of the system.

Modern traditional medicines owe their allegiance to tribal medicines to a large extent and many researches are being conducted for scientific explanations. Tribal populace being poor and weak economically, their medicines suit to majority of Indians as it is easily affordable. Cultural variations act as a hindrance to universal acceptability. However, herbal principles can be safely analysed for future acceptability in majority of Indians as alternative medicines of choice. For historical reasons, the Scheduled Tribes have remained socially and economically backward and are treated as socially disadvantaged groups. Therefore, concentrated efforts are needed to bring them into the mainstream of development. As sustainable livelihood options for the tribal are fast deteriorating; traditional indigenous system of health care options are to be restored. Research and documentation of indigenous plants and herbs will definitely go a long way in ameliorating the health condition of the tribals for better living conditions.

The total forest cover in India is reported to be 765.21 square kilometers of which 71% is adivasi areas. Of these 416.52 and 223. 30 thousand square kilometers each is categorized as reserved and protected forests respectively. About 23% of these is further declared as wild life sanctuary and National parks which alone has displaced some half a million tribals. By the process of colonization of the forests that began formally with the forest act of 1864 and finally the Indian forest act - 1927, the rights of tribals were reduced to mere privileges conferred by the state.

Kalahandi in the present scenario is rich in biodiversity. The tribal people have been helping in conservation of bio-diversity. However, enormous efforts for conservation have to be made in both directions- vertical as well as horizontal due to rapid industrial revolution. Conservation of diversity, sustainable management, propagation of such valued flora and their in-situ as well as ex-situ conservation is the need of this decade. Therefore various disciplines like Pollen biology, Genetics, Tree Breeding, Physiology, Ecology, Botany, Ethno-botany, Eco - restoration, Taxonomy, Bio-chemistry, Biometrics, Bio-statistics should work at single platform and linkages have to be established in sacred forests as well as in localities dominated by ethnic people. There is a need for identification of plants associated with various ethno-botanical uses followed by phytochemical studies. Awareness campaigns and training programmes are to be organized in tribal localities for eco-restoration and for conservation of the prevailing flora and fauna.

The information gathered/obtained from the present study regarding the medicinal plant use by the tribal people of Kalahandi needs a thorough phytochemical investigation which includes alkaloid extraction and isolation along with few laboratory methods. This may help in creating mass awareness regarding the need for conservation of such plants and also in the promotion of ethno-medico-botany knowledge within the region besides contributing to the preservation and enrichment of the gene bank of such economically important species before they are extinct. World Health Organisation, after careful observation suggests for alternative medicines. The tribals of Kalahandi are seen using several medicinal plant species and animals in special cases. Among the animals they use liver of crow, flesh of bat, house sparrow and several species of fish, snakes, frog, dove, etc. They use liver of baby crow in cases of epilepsy, flesh of bat for chronic asthma, flesh of male house sparrow for male impotency, small fishes for calcium deficiency, flesh of rat snakes and frog for aphrodisiac, flesh of dove and house fowl for kidney stones. One way of treating *Bata* patient is that the tribals use flesh of *Kochilakhai* for chronic cases. *Kochilakhai* is a bird species that survives by eating fruits of *Kochila* (*Nux vomica*).

For Healthcare & magico-religious practices the tribals of Kalahandi use several animals such as Salamander, Kumbhatua, Chicken, Sheep, Goat, Male sparrow, Pig, House fowl, Bajrakapta, Dove, Owl, Jackal, tiger, etc. Salamanders are used for the purpose of love affairs; Kumbhatua is used for making special weapon. It is said that when kumbhatua makes nest in the tree and when the chicks attain in the

flying stage, the tribals tie the leg of the kumbhatua chick with an iron chain. The parent of the chick first try to brake the chain and when they fail in doing so, it is said that they collect a rare medicinal plant which they know and when they place the plant near the chain it brakes and ultimately the chicks are freed. The tribal who is involved in this practice enquires about the activities of the bird and at last takes away the entire nest and starts dropping the sticks of the nest one by one in water with keen observation. When a stick after being dropped in the water produces a hissing sound he confirms that he has found the required plant extract.

For magico-religious practices the black cock is in great demand. It is often used for curing many diseases. Male house sparrows are used in cases of male sexual impotency. Nails of tiger are used in the neck of children as well as adult members with the belief that this would protect them from certain contagious diseases. Nails of owl are also used for magico-religious practices. The scale of Bajrakapta is used as a ring in the fingers and it is believed that it is panacea for muscular pain. The flesh of dove and pigeon is used as a medicine to cure stones in the kidney as well as in the duct. Also the skin of jackal is used for magico-religious practices. Skin of tiger also used in some cases to sit during austerities and auspicious occasions. Feathers of pigeons are used for cleaning internal portions of the earlobes and nostrils. Sometimes cleaning of internal portion of ear is made after having bath.

Traditional medicine is the synthesis of therapeutic experience of indigenous people practising indigenous systems of medicine. If we study the history of mankind, many infectious diseases have been said to be treated with herbals. The traditional medicine have been solicited through the traditional practitioners and herbalists in the treatment of infectious diseases. Among the remedies used, plant and animal drugs constitute an important role. A number of scientific studies have highlighted the importance and the contribution of many plant families i.e. Asteraceae, Apocynaceae, Caesalpinaceae, Liliaceae, Piperaceae, Rutaceae, Solanaceae, Sapotaceae used as medicinal plants and similarly species of house sparrow, pigeon, crow, bat, etc. are used as animal family. The tribals of Kalahandi are seen using these for their health care in spite of several efforts by the govt. medical department.

Tribal healers in most of the places, where ethnomedical treatment is frequently used to treat asthma, cancer, eczema, aging, cut wounds, diabetes, jaundice, mental illness, skin infection, swelling, scabies, venereal diseases, gastric ulcer, snakebite and provide instructions to local people as to how to prepare medicine

from herbs. They keep no records and the information is mainly passed on verbally from generation to generation. World Health Organization (WHO) has shown great interest in documenting the use of medicinal plants used by tribals from different parts of the world (Kaido *et al.*, 1987). Many developing countries have intensified their efforts in documenting the ethnomedical data on herbals. Effort to find out scientific evidence for claims by tribal healers on Indian herbs has been intensified. Once these local ethnomedical preparations are scientifically evaluated and disseminated properly, people will be well informed with regard to efficacious drug treatment and improved health status.

Tribal people still use various animal products and by-products for cure of various ailments. For example, honey is used as expectorant; cattle urine has been used as a medicine. All this knowledge has once again come to the mind, as there has been a sort of disillusionment with the current allopathic treatment, as it has got its own side effect and in fact has no cure for various diseases. Therefore people are looking for traditional remedies for the treatment of ailments. But this traditional knowledge is fast eroding due to modern techniques. Thus urgent need is necessary to inventories and record all ethno biological information among the different ethnic communities before the traditional cultures are completely lost. In India, nearly 15–20 percent of the Ayurvedic medicine is based on animal-derived substances. The Hindu religion has used five products (milk, dung, curd, urine and ghee) of the cow for purification since ancient times. Different ethnic groups use animal-derived substances for healing human ailments in present times in different parts of Kalahandi.