



# Use of herbal plants as medicines by Rajbanshi people of Coochbehar and Jalpaiguri districts of West Bengal: A cultural and socio- economic analysis.

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## Abstract:

The Rajbanshis have always been an important part of the history of North Bengal and the adjoining regions. Their rich cultural history and customs are still very much rooted in the practices of the researched region. One such important practice of this community is their knowledge of using medicinal herbs since ages. These herbs are said to have cured hundreds of ailments and is still very much in practice among the group of Rajbanshis as well as outsiders. The region of North Bengal, with its suitable climate, is a blessing to such herbs and plants. "Rajbanshi medicine men", called "Ojha" or "Kabiraj" or "Mahan" or "Baidda" or "Adhikari", are still very much popular among the researched community. The objective of the paper is to highlight those specific plants and herbs and their role in the cureness of diseases. The paper uses both theoretical and analytical knowledge and all relevant documents, paper and articles have been referred. Extensive field survey has also been conducted. Ultimately, the study draws attention on the extinction of this practice and how with responsible measures, the generational practice could be kept alive and the knowledge passed on to the future generation.

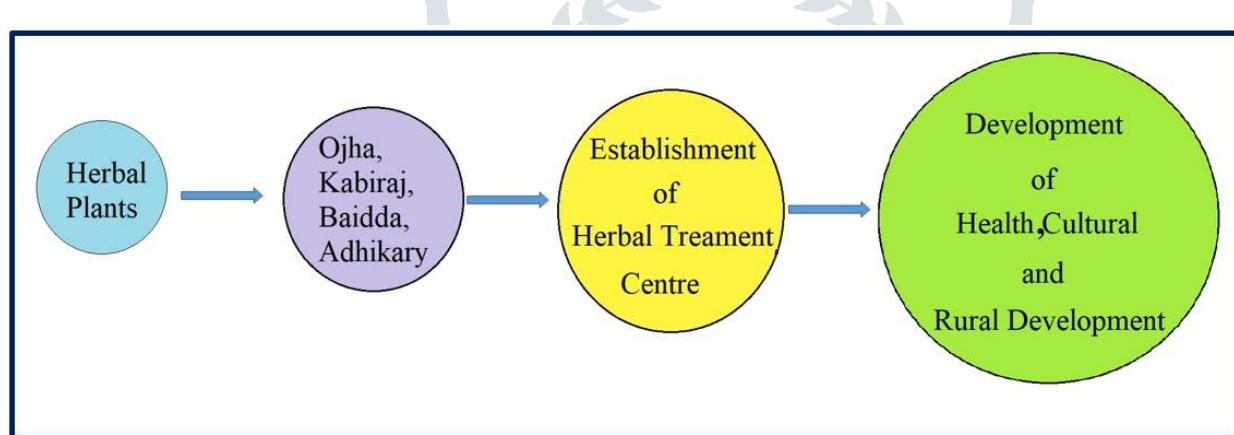
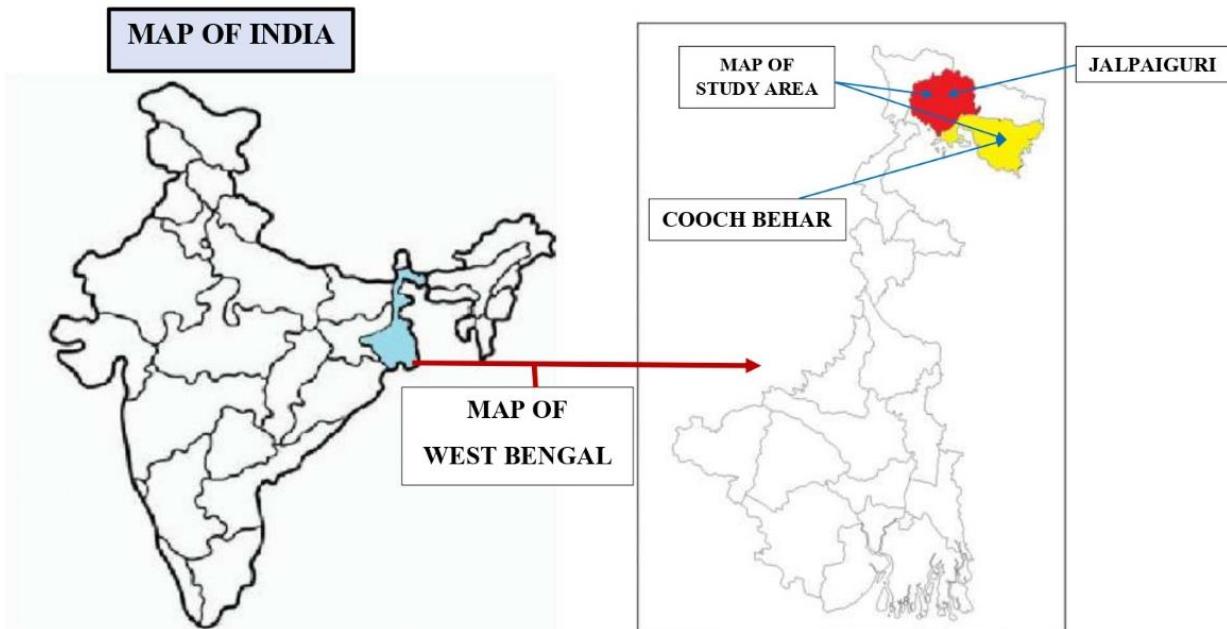
## Introduction:

The Rajbanshis or the Koch Rajbanshis are people from Lower Assam, North Bengal, eastern Bihar, Terai region of eastern Nepal and Bhutan who have in last sought association with the akoch dynasty. Rajbanshi community, one of the major ethnic groups of North Bengal, came up to the surface with the Kamtapur Movement to fight for their identity and a formal recognition in the society. Currently they

are the victims of identity crisis, domination by mainstream people and division of their homelands. Today they form the majority population in rural areas as they have been displaced from urban areas. Their mother tongue yet not officially verified, but is recognised by the government. They use Bengali language for education and other official purposes of the state. But one area, in which the Rajbanshis have maintained their glorious history and culture, is their practice of using medicinal herbs.

Every region is blessed with many natural resources that humans can exploit for their benefit. Similarly the distinctive climatic and ecological conditions make the study area a unique existence for a large biodiversity. For thousands of years, Rajbanshis are living in this area and they are mostly dependent on agriculture. But socio-cultural activities of the Rajbanshi community are directly and indirectly related to the plants resources. They are using various plant parts to make medicinal formulations for alleviating their diseases & disorders since time immemorial. By semi-structured questionnaires through scheduled interviews with the local medicine men (commonly known as Mahan, Ojha, Baiddha or Kabiraj). The study revealed that a total number of forty types of plants species from ninety families were used for preparing different polyherbal formulations to cure various ailments like arthritis, sore, wound and injury, dysentery, fever, irritation during urination, liver problem, jaundice, nose bleeding along with frequent urination or glycosuria, bone fracture etc.

The plains of North Bengal is the northern part of West Bengal lying South of the hills of Darjeeling district and of Western Bhutan and stretches as far South as the river Ganga. This flat montains tract consists of the terai-region of Darjeeling district and other districts like Jalpaiguri, Kochbihar, Uttar Dinajpur, Dakshin Danajpur and Malda. The average annual rainfall is 3,900 mm. The summer is rather hot and the mean maximum temperature varies between 33-35°C and the mean minimum temperature in winter varies between 7.5-10°C. This damp warm climatic condition of the study area helps to form a diverse growth of luxuriant vegetation in the tract, which is predominantly covered by the dense forests of sal, mixed with other deciduous flora and the green trees are covered the major part of the districts of Jalpaiguri and Coochbehar.



**Figure shows role of herbal plants in the study area**

#### Research Questions:

1. Who belong to Rajbanshi Community in the study area?
2. What are their culture and socio-economic condition?
3. What type of herbal plants thy use as medicines?
4. What are the impact of such treatment?
5. What are the impact of modern civilization on such practice?
6. Which type of Rajbanshi group prefer or believe in such herbal treatment?

7. What is the role of “Kabiraj” or “Mahan” or “Ojha” or “Baidda” or “Adhikary”?
8. What type of problems are faced by “Kabiraj” or “Mahan” or “Ojha” or “Baidda” or “Adhikary”?
9. What are the perception of educated Rajbanshi on such traditional treatment?
10. What is the role of herbal treatments centres in the study area?

## **Objective of the study:**

The objective of this paper is to highlight those useful plants and herbs that benefitted the people of rajbanshi community to cure diseases and lead a healthy long life. This paper also focuses a link between herbal plants, culture and socio-economic condition of the rajbanshi community. It also draws attention to the fact that a majority of rajbanshi people still now believe in such treatments to cure their health conditions. Several other aspects of herbal plants as medicines are also studied.

## **Methodology:**

This study is both theoretical and analytical in nature. All relevant reports, documents, books, journals and articles were consulted to develop a better hypothesis although the basic sources are primary data collected from the villagers of Rajbanshi community through sample survey by using questionnaire, interviews, personal visits in the herbal treatment centres. Responses from ninety Rajbanshi families have been collected consisting fifty from Coochbehar district and the rest forty from Jalpaiguri district. Local medicine men called “Kabiraj” or “Mahan” or “Ojha” or “Baidda” or “Adhikary” were interviewed to share their vast expertise experience in herbal treatments. Interviews were also taken from the villagers based on their age. Forest department of Coochbehar and Jalpaiguri districts were also visited. Data also collected from West Bengal State Medicinal Board.

## Review of Literature:

Dr. Charu Chandra Sanyal (1965) in his book “ The Rajbanshis of North Bengal” focuses on several customs of the rajbansi community such as their culture, birth customs, marriage customs, religious believes, songs, music and musical instrument, death and attendant ceremonies etc.

Dr. S.K. Rakshit (2007) clearly elaborated the role of NTFP (Non Timber Forest Produce) or MFP (Minor Forest Produce) in the sub Himalayan north Bengal in his book “Forest Resource Management”.

Susmita Roy (2015) in her article published in the “Journal of medicinal plants studies” emphasise on an ethno botanical study on the medicinal plants used by the rajbansi community of Coochbehar district, West Bengal, India.

Poulami Basu (2015) has assessed historical evolution of Rajbansi society.

Shrabano Ghosh in her paper highlights on the health practice of one of this important indigenous population of northern part of Bengal.

Soumir Barman (2002) studies on the Rajbansi society and culture of Coochbehar district

Tanmay Dutta, Amal Kumar Patro, Shantanu Ghosh Dostidar (2014) analyse medicinal plant used by the tribal population of Coochbehar district.

S. Mitra and Sobhan Mukherjee (2010) specify the wild plants of North Bengal plains for gastro-intestinal problems.

Anindita Saha (2022) in her paper raises the issue of identities of Rajbansi community and folk culture.

Mithu Das (2015) in his research paper concludes that herbal plants was not popular medicine. Most of the people of this region are not familiar with these plants. There is a decline practice of this herbal treatment of the people of Rajbansi Kshatriya community.

Swaraj Basu (2003) highlights the caste movement of rajbanshi community of North Bengal.

J.K. Sikdar and D.M. Samanta (1983) have identified some herbaceous flora of Jalpaiguri district.

Upendra Barman (1981) wrote about the Rajbanshi Kshatriya JatirItihas.

### **Research Gap:**

The researcher has found that there is a major research gap. Few works have been done on the herbal plants but they did not specify its role on the health,culture and socio economic development of Rajbanshi community. Various book, articles, papers, and websites are not relevant to this work.

### **Limitations:**

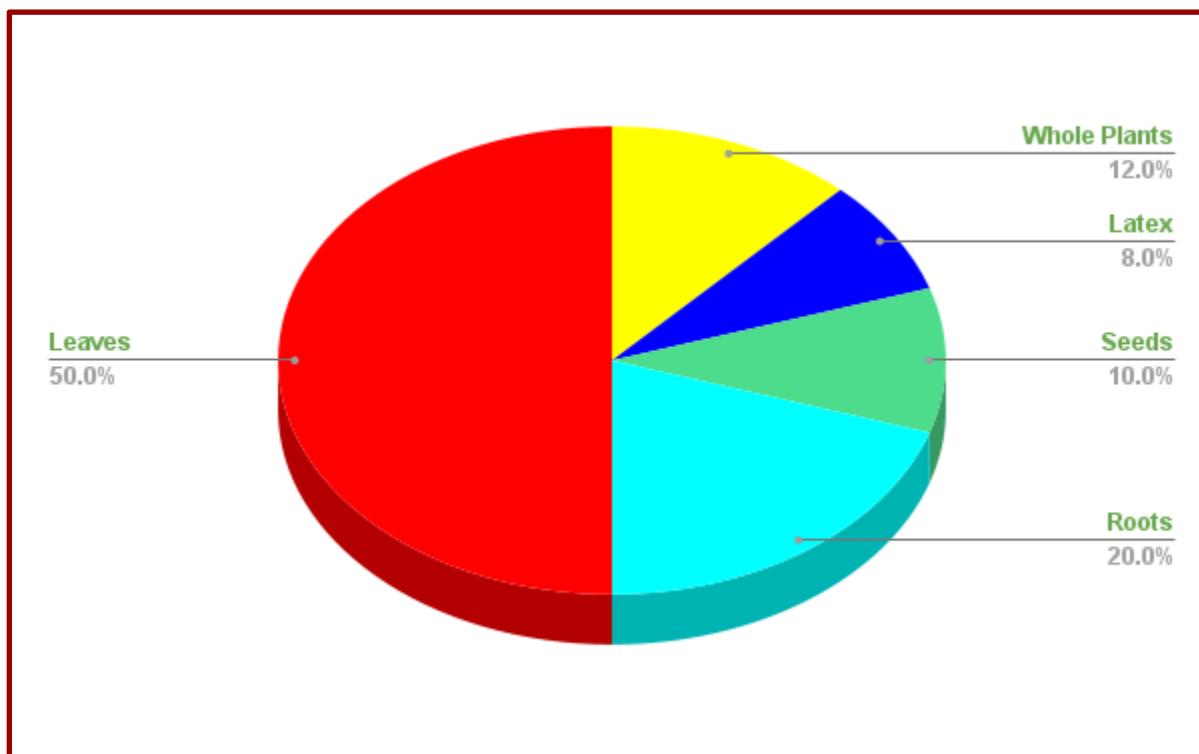
1. Reliability of primary data are suffered from suppression of the facts by the villagers.
2. Biased opinions have also been observed while doing primary field survey.
3. Secondary data base was not available in adequate number
4. “Kabiraj” or “Mahan” or “Ojha” or “Baidda” or “Adhikary” did not give enough time during field survey.
5. Due to political and social pressure, many respondesnts denied to give proper response.

A list of forty numbers of medicinal plants were identified in the study area along with their applications for the diseases.

Sl. No.	Herbal Plants	Application for the disease
1	Tulsi leaves	For Cold
2	Moot or mut or Gulai	For cold of old persons
3	Bhogrice, the roots of durba grass	To check lose motion of the children
4	Cheptikalai and the leaves of Niltos plants	Small pox
5	Juice of red Amrool	Dysentery
6	The leaves of Bat Barun	For the disease of bat
7	Jambura	Jaundice
8	The juice of neem leaves	Small pox
9	The leaves of Noh Singh	To relive pain
10	The leaves if Thankuni	Dysentery,Cold,Gastris, Diabetes,etc.
11	Aarahar	Jaundice
12	AamHolud	Cold Cough
13	Dhulpi	pain
14	Vauti	Wound Cure
15	Erenda,Kola, Noon,Chini	Dysentery
16	Manimuni, Golmorchi	Diarrhea
17	Athia Kola, Golmorchi	Diarrhea
18	Tetul,Golmorchi	Diarrhea
19	Paan,Aada	Gastric
20	Anarosh	Wound Cure
21	Holud	Ophthalmia, Conjunctivitis
22	Nishinda,Nim,Malvog kola	Chicken pox
23	Gom,Khorimati and Hukkah	Scabies
24	Tulshi,Joba,AamHolud, Noon	Rong worm
25	Nebu	Vomiting
26	Alok Lota	Profuse bleeding during delivery
27	MaklaBanshans Chun	Deep Wound
28	KaloKechari	Burn Spot
29	GhaChatarpata	Boils
30	Clitoriaternatea	Anti Diuretic
31	Aristolochiaindica	Cold,Fever,Abrotifacient
32	Aloe vera	Burns,Skin Diseases
33	Hibiscus	Check Vomiting, Urinary Troubles
34	ManihotCrantz	Diarrhea
35	Sidacordifolia	Fever,Colic, Nervous Disorders
36	Mimosa pudica	Leprosy
37	PlumeriaRubra	Cough, Constipation etc
38	Piper Logum	Cold,Cough,Asthama, Dysentery
39	DaturaMetel	Pain,dog bites, nerval tonic
40	Lantana Camara	Insecticidal,fungicidal,antimicrobial

Source: West Bengal State Medicinal Plant Board and North Bengal Wild Animal Park.

It is seen from the above table that the leaves (50%) were found to be most useful plants part followed by roots (20%), seeds (10%), latex (8%) and whole plants (12%)



A sample survey was also conducted to study the various responses received from villagers of Rajbansi Community.

**Table 1**

#### Usefulness of Herbal Plants as Medicines

Respondents	Responses (%)
Very high	45%
High	33%
Low	10%
Very Low	12%
Total	100%

Source – Sample Survey during 2022

**Table – 2****Responses about cureness of disease**

<b>Respondents</b>	<b>Responses (%)</b>
Very high	55%
High	30%
Low	10%
Very Low	5%
Total	100%

Source – Sample Survey during 2022

**Table – 3****Responses of Educated people of Rajbanshi Community about herbal treatment**

<b>Education</b>	<b>Perception</b>
Postgraduate & above	42%
Graduate	33%
Higher Secondary & Secondary	25%
Total	100%

Source – Sample Survey during 2022

Development of medicinal plant men centre i.e. Ojha, Mahan, Kabiraj and Adhikary.

About 300 such centres were found during field investigation. Various aspects of medicinal plant treatment centre are mentioned below in tabular form.

**Table – 4**  
**Classification on the basis of Income of the patient**

<b>Type of Patient</b>	<b>Responses in %</b>
Antordoi Card Holder	62%
B.P.L Card Holder	25%
A.P.L Card Holder	13%
Total	100%

Source – Sample Survey during 2022

**Table – 5**  
**Classification of patient (Region wise)**

<b>Nature of Patient</b>	<b>Responses in %</b>
Out Side the Country	18%
Out Side the State	22%
Within the State	60%
Total	100%

Source – Sample Survey during 2022

**Table – 6**  
**Engagement of local people through such centre**

Type of Local People	% of engagement
Rickshawala, Thelawala, Toto Van, Taxi Driver	62%
As broker or middlemen	11%
House let out for patient family	17%
As Aya or Mashi to look after the patient	10%
Total	100%

Source – Sample Survey during 2022

### Acknowledgement:

Researcher is grateful to the people of Rajbanshi community for showing their experience and knowledge. Researcher is thankful to medicinal plant men and women, who provided the information. Researcher is also grateful to the forest department of the study area. Without the help of several stake holder of Rajbanshi people, the present work would not be possible to have arrived to a conclusion.

### Suggestions and Conclusions:

During the field survey, it has come to the notice of the researcher that the Kabiraj or Ojha, who are known as medicinal plant men are facing a problem regarding their recognition. They suggested that a trade license or professional license should be given to them, so that they can practice even in the urban area. Use of medicinal plant in the context of modernization of treatment, is still popular in the Rajbanshi community. Even the people from urban areas take admission in the Kabiraji centre especially for the treatment of bone fracture, arthritis, jaundice, rheumatism etc. As allopathy medicines are very much in circulation today, we fail to realise the fact that it is more suitable for the cold countries but not like a tropical country like India. Also the traditional medicines have no side effects whereas some allopathy medicines are being banned by World Health Organization because of their dangerous effects. There are two universities in the study area where some certificate course on such herbal plants and their usage as medicine maybe offered. As it is evident from the Table 3. that the present generation with the good education are least interested for such traditional treatment. It may be one of the

reason that the state government has established many primary health centres even in the remote villages. The growing demand for allopathic medicine is also responsible for the decline of the herbal treatment of the Rajbanshi community. But it our responsibility, the present generation, to keep the indigenous knowledge of our people and country alive and bring them more in the lime light, making the general public aware.

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### **Interview with Kabiraj:**

Kabiraj Bhupen Roy, (30<sup>th</sup> September, 2021) Personal Interview, Jalpaiguri district.

Kabiraj Suman Roy (1<sup>st</sup> October, 2022) Personal Interview, Jalpaiguri district.

Kabiraj GobindaIshor (3<sup>rd</sup> September, 2022) Personal Interview, Nishiganj, Coochbehar.

Kabiraj Baby Ishore (5<sup>th</sup> September, 2022) Personal Interview, Maghpala, Coochbehar.

Kalimohan Ishore (5<sup>th</sup> September, 2022) Personal Interview, Nalangibari, Coochbehar.

### **Keywords:**

Rajbansi, herbal plants, indigenous people, NTFP, MFP, Kabiraj, Ojha, Baidda, Adhikari, Forest Resource, Mahan, North Bengal, Rural Development, Flora, Terai-Region, Educated Rajbansi, Medicinal Plant Man, Diseases, PHC, World Health Organization, B.P.L., A.P.L., Antordoi.