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Traditional Health Care Practice in a Mishing Society: A Study on Ethnomedicine Monimugdha Bhuyan

Lecturer, Dept. of Anthropology, North Lakhimpur College (Autonomous), North Lakhimpur, Assam, India

Abstract

Traditional health care practices constitute a major element in every culture. World Health Organisation (WHO) estimated that now a days as many as 80% of the world's population depends on traditional medicine for their primary health care needs. Ethnomedicine is used to refer to the beliefs and practices relating to disease which are product of indigenous cultural development and are not explicitly derived from the conceptual framework of modern medicine. Data for this paper have been collected from Bonkowal Village of Golaghat District, Assam. The inhabitants of the village are of Mishing community, an indigenous inhabitant of Assam with distinct identity and culture. In the present paper an attempt has been made to give an account of ethnomedicinal practices among the Mishings of Bonkowal village of Assam. Though the concept of health and disease are basically biological, it is very much related to socio-cultural system of a society. The people of the village believe that both supernatural and natural causes are responsible for diseases and illness. Traditional health care practices of the villagers can be divided in to herbal treatment and supernatural treatment. The medicine man of the village has adequate knowledge of medicinal plants which he uses to cure various diseases. The importance of medicinal plants and their uses in healing different disease is discussed in the paper.

Keywords: Ethnomedicine, Traditional Health Care, Medicinal Plant, Disease, Mishings.

Introduction: World Health Organization (WHO) defines health as a state of complete physical, mental and social wellbeing and not merely the absence of disease and infirmity. Traditional health care practices constitute a major element in every culture. The medical system prevalent in a society is a combination of traditions, beliefs, techniques, ecological adaptation, etc. This system is an integral part of the society and provides the means to the member of the society for maintaining health and preventing and curing diseases (Medhi, 1995). Ethnomedicine has been recognized as an important field of Anthropological research today. It has been defined as 'those beliefs and practices relating to disease which are the products of indigenous cultural development and are not explicitly derived from the conceptual framework of modern medicine' (Pool and Geissler, 2005). Western world is accustomed to think of illness in terms of germs, viruses and assumes it to be a biological constant, a pathological condition to be verified by laboratory tests or clinical examinations. From the cultural point of view illness is quite different; it is a social recognition that a person is unable to fulfil his normal role properly and he should be brought back to normalcy (Gogoi, 2014). Rivers (1924) argued that indigenous medical practices, which might seem irrational to Westerners, were rational when placed in the wider context of local beliefs and culture. World Health Organisation (WHO) estimated that now a days as many as 80% of the world's population depends on traditional medicine for their primary health care needs (Azaizeh et al. 2003). Allopathic doctors and clinics are not easily available among many rural communities of the world, and in such situations they still had to rely on traditional medicinal systems as their primary healthcare. Again in many cases people are practicing traditional heath care system where modern medical facilities have been established and doctors are easily available. This is because the modern doctors do not offer any psychological or spiritual consolation. Religious beliefs, practices and institutions have been important parts of the health care sector throughout the centuries. Faith-based curing and healing of some serious health problems such as

mental illness and various other visible bodily and psychosomatic diseases are witnessed among many organized religious denominations (Howard and Janet, 1992). Religious specialists as healers and curers are in the forefront of dealing with the problem of health and disease in almost all societies, and particularly in traditional societies (Scupin and DeCorse, 1995). Health professionals need knowledge of culture and cross-cultural relationship skills because health services are more effective when responsive to cultural needs. The most important fact about traditional medicine is the way it is integrated into a whole culture.

The area of present study is Bonkowal Village of Golaghat District, Assam. The village is located about 29 km away from Golaghat town. It falls under Mahura Mouza and Uttar Mahura Panchayat. The village is solely inhabited by Mishing people, a notable tribal population of Assam. The Mishings are the second largest scheduled tribe (plain) group of Assam. They are mainly concentrated in the riverine areas of Lakhimpur, Dibrugarh, Sibsagar, Jorhat, Golaghat and Sonitpur districts of Assam. They belong to the Tibeto - Burman family of Mongoloid group (Bordoloi et.al., 1987). The abode of the Mishings are surrounded by the caste communities of Assam, due to which some traits of the Assamese culture have percolated into their norms and pattern of life (Medhi, 1995). They are patrilineal and descent, inheritance, succession, authority and residence after marriage are traced in male line among them. Animism is the pristine religion of the Mishings. They are pile dwellers who construct their houses in raised platforms about five feet above the ground. Rice is the staple food of the Mishings and their primary occupation is agriculture. Apong (locally brewed rice beer) is considered as most prestigious item for entertaining the guests. The Mishings are divided into two broad sections namely Barogam and Dahgam. Kebang is their village level social organization which can be aptly compared with a Village Panchayat (Bordoloi et.al., 1987). Ali Ai Ligang is the most important festival of the Mishings celebrated on the first Wednesday of Assamese Fagun (February -March) month. The Mishings have migrated from the hills of Arunachal Pradesh to the plains of Assam in the remote past and socio-culturally they are akin to the Adis of Arunachal Pradesh (Medhi, 1995). A review of past literature on ethnomedicine indicates that sufficient research work has been done in various parts of India among different communities. In Assam also lots of ethnomedicinal research has been carried out.

Methodology: The primary data for the present study is collected from Bonkowal Village of Golaghat District, Assam. Intensive fieldwork has been conducted for collecting first hand data. Various anthropological methods are applied for this purpose. Besides this secondary data were collected through library work. Relevant secondary literary sources in the form of books, journals and articles have been intensively read and studied in preparation of this paper.

Result and Discussion: The concept of health and disease are basically biological but it has a close relation with the socio-cultural system of a society. Every culture has their own concept of disease and illness and some specific ways of coping with it. People of traditional societies believe that illness might cause due to evil spirits, breach of taboo, black magic, sorcery, etc. Explanation of illness and its preventive and curative measures reflect the knowledge, cultural-value and tradition of a society (Medhi, 1995). According to the villagers of Bonkowal Village, good health does not mean the possession of beautiful body. They belief that carrying out of the normal day's routine is the sign of being healthy and if a person is unable to carry out the normal routine then the person may be considered to be ill and unhealthy. However these concepts are gradually changing at present and in general a person without having serious disease which may be an obstacle to his day to day work is taken as a healthy person. The villagers believe that both supernatural and natural causes are responsible for diseases and illness. It is also firmly believed that some patients who are suffering from a long period of either cancer or leprosy are regarded as the result of misdeeds in their present life. Belief in supernatural powers is clearly visible among the villagers. They have a large faith in malevolent spirits, which possess people and render them sick. They believe that the forests, rivers, ponds and other physical surroundings of their habitats are full of malevolent spirits (Uii) who are responsible for different kinds of diseases, death, destruction and misfortunes. Some other diseases are believed to be cause due to improper food or unhygienic drinking water or sometimes due to bad weather.

The villagers of Bonkowal village have reported different kinds of diseases and sickness among which dysentery, malaria, chicken pox, jaundice are highly noticeable. The other types of diseases in

the area are cold and cough, diarrhoea, ring worms, round worms, measles, piles, gastric trouble, headache, and tonsillitis. The traditional health care practices among the Mishings of Bonkowal can be divided into two types, traditional herbal treatment and supernatural treatment. The villagers have deep faith in supernatural treatment regarding to cure different kinds of diseases. Supernatural treatments are done by a special medicinal practitioner of the village known as *Miboo*. The *Miboo* occupies a position of honour in the village and he is the only person who can contact the sprits and appease them. On the other hand, herbal medicine is commonly used to cure common ailments. The villagers have an elaborate knowledge of medicinal plants which has been continuing from the remote past. The medicine man of the village, who has adequate knowledge of herbal medicine, is known as *Bez*. He prepares medicines from different types of medicinal herbs which are collected from nearby jungles and kitchen gardens and along with these some other ingredients. Apart from oral consumption of these medicines he also prescribes certain other forms of treatment such as bathing, fumigation etc.

Common Ailments and its Ethnomedicinal Treatment in the Village Context: For the treatment of common ailments the villagers of Bonkowal village mainly rely on the medicine man (*Bez*) of the village. Beside him, some older persons of the village are also expert in healing diseases with their knowledge of herbal medicine. If the traditional treatment fails to cure the disease, then the villagers seek the help of qualified physician. Some of the common ailments and their ethnomedicinal treatments in the study village are discussed below.

- (i) Cold and Cough: Cough and cold is one of the most common ailments found in both sexes irrespective of age. During the winter season this type of disease is found in a high rate among the aged people and the children in the village. Juice extracted from the leaf of tarua kadam (Acacia farnesian) mixed with little sugar is taken for a week to get relief from cold and cough. Juice of ginger (Zinziber officinale) and leaf sweet basil (Ocymum santum) mixed with a little amount of honey is a good medicine for cough. Alkali (kalakhar), extracted from banana plant (Musa paradisiaca) is given to the patients suffering from cold and cough for a long time.
- (ii) **Headache:** Headache is a common problem among the villagers. In case of extreme headache, a salt mixed paste made from the leaves of *kanibish* (*Croton tiglium* Linn.) is applied on the forehead for an hour to get quick relief. Another herbal medicine used in headache is the paste of *ban tulasi* (*Ocimum canum*), which is also applied on forehead.
- (iii) Gastric: Gastric is an acute health problem among the villagers of Bonkowal Village. The symptoms of gastric are constipation, lose appetite, vomiting and pain in abdomen. Juice of turmeric (*Curcuma longa*) mixed with sugar is taken in empty stomach for two weeks to cure acidity. A teaspoon paste made from the stem of *kehraj* (*Eclipta alba*), a little amount of cow milk and small piece of palm candy is taken before meal for three times a day. This dosage is continued for three days to get rid of gastric.
- (iv) Fever: To cure fever a mixture of fluid extracted from the *durun* (*Leucas aspera*) flower and black pepper (*Piper nigram*) powder is taken orally. In some situation, juice of lime (*Citrus aurantifolia*) mixed with sugar is applied on the forehead of the patient to get relief from fever. In the case of babies, a mixture of rice beer (*apong*), mustard oil and cow milk is applied on the forehead
- (v) **Dysentery:** The common symptoms of dysentery are loose motion and abdominal pain. The quick remedy for dysentery is pickle made of lime (*Citrus aurantifolia*). The villagers use to preserve lime in salt for a long time. Old lime pickle is considered to be a good medicine for dysentery which is taken orally once or twice a day. Another traditional medicine for dysentery used by the villagers of Bonkowal Village is the juice of *saru manimuni* (*Hydrocotyle sibthrorpioides*) mixed with honey. It is taken orally for fifteen days to get rid of dysentery. Paste made from the leaves of *bhedailata* (*Echiles fructescene*) is also a good medicine for dysentery.
- (vi) Malaria: Malaria is a serious health problem found in the village. Juice of *agaru* (*Xanthium strumarium*) root is given to malaria patients to get relief from it. Leaves of *dhopat tita* (*Clerodedron infortunatum*) are also a good medicine for malaria fever.

- (vii) Diarrhoea: Berk of *jaluk* (*Piper nigram*) mixed with palm candy and water is a good medicine for diarrhoea. Sometimes the villagers also use juice prepared with dry goose berry (*Emblica officinalis*) powder and black salt mixed with cold water for curing this disease.
- (viii) **Tonsillitis:** Tonsillitis is one major health problem among the villagers of Bonkowal Village. Juice extracted from the barks of *tarua kadam* (*Acacia farnesiana*) is a good remedy for tonsillitis. Another medicine for tonsillitis is the juice prepared from one *amara* seed (*Sponolias mangifera*), one *silikha* seed (*Mysoballum*) and a piece of turmeric (*Curcuma domestica*).
- (ix) Urinary trouble: Urinary trouble is common health problem prevailing in the village. This ailment is cured by drinking a juice extracted from leaves of *dupar tenga* (*Bryophyllum pinnatum*). Juice of *pani kolmou* (*Oldenlandia corymbosa* L.) is also used for curing this health problem.
- (x) **Jaundice:** Jaundice is another acute health problem which the villagers counter frequently. The basic symptom of jaundice is yellowish pigmentation of the skin. Seeds of *sialkathali* (*Argemone maxicana*) are regarded as a good medicine for jaundice. Jaundice patients are given to consume juice of sugarcane (*Saccharum officiarum*) to recover quickly. Paste made from the roots of *bariala* (*Sida cordifolia*) plant, mixed with cow milk and palm candy is another medicine of jaundice. It should be taken once daily for three days before meal.

Table 1. Medicinal Plants used by the Mishings of Bonkowal Village

	Table 1. Medicinal Plants used by the Misnings of Bonkowal Village				
Sl.	Local/Vernacular	Common/	Scientific Name	Ailment	
No	Name	EnglishName			
1.	Tarua kadam	Sweet acacia,	Acacia farnesiana	Cold and Cough,	
		Cassie flower		Tonsillitis	
2.	Ada	Ginger	Zinziber officinale	Cold and Cough	
3.	Tulasi	Sweet basil	Ocymum santum	Cold and Cough	
4.	Kol gos	Banana plant	Musa paradisiaca	Cold and Cough	
5.	Kanibish	Croton	Croton tiglium L.	Headache	
6.	Ban tulasi	Basil	Ocimum canum	Headache	
7.	Haladhi	Turmeric	Curcuma longa	Gastric,	
				Tonsillitis	
8.	Kehra	Bhringaraj,	Eclipta alba	Gastric	
		False Daisy			
9.	Durum	Leucas, Thumba	Leucas aspera (willd.)	Fever	
10.	Jaluk	Black pepper	Piper nigram	Fever, Diarrhoea	
11.	Gol nemu	Lime	Citrus aurantifolia	Fever, Dysentery	
12.	Saru manimuni	Lawn	Hydrocotyle rotundifolia Roxb.	Dysentery	
		pennywort			
13.	Bhedailata	Skunk vine	Paederia foedita L.	Dysentery	
14.	Agaru	Agarwood	Aquilaria malaccensis	Malaria	
15.	Dhopat tita	Hill glory bower	Clerodedron infortunatum L.	Malaria	
16.	Amlakhi	Goose berry	Emblica officinalis	Diarrhoea	
17.	Amara	Hog plum	Sponolias mangifera	Tonsillitis	
18.	Dupar tenga	Air plant	Bryophyllum pinnatum	Urinary trouble	
19.	Pani kolmou	Flat-top mille	Oldenlandia corymbosa L.	Urinary trouble	
		grains		-	
20.	Sialkathali	Mexican prickly	Argemone maxicana	Jaundice	
		poppy			
21.	Kuhiyar	Sugarcane	Saccharum officiarum	Jaundice	
22.	Bariala	Country	Sida cordifolia L.	Jaundice	
		mallow,			
		heart-leaf sida			

Conclusion: Medical system is an integral part of a culture. Every culture develops its own medical culture. The efficacy of a medical system is not easy to evaluate. In the 21st century modern medical system has developed to its peak but the potential and use of ethnomedicine still remain very effective. Ethnomedical practices involve some kind of religious activities which have great social. psychological, and even physiological effects. In the present study, it is found that the Mishings of Bonkowal village had developed a well medical system in the village itself. They had a deep believe in supernatural powers which are cause to be the reason of many serious health problems. To cope with various diseases they apply both supernatural treatment and traditional herbal treatment. The present paper tries to highlight the indigenous knowledge pertaining to different medicinal plant species among the villagers. The medicine man of the village has perfect knowledge of the medicinal plants which are used to cure common ailments. Few common ailments prevailing in the village are taken for the present study. These are fever, could and cough malaria, diarrhoea, tonsillitis, urinary trouble, jaundice, dysentery, gastric, and headache. The medicinal plants used to heal these common ailments and the procedure of the treatment is dealt in the paper. Ethnomedical practices can make important contributions to future health care and documentation of traditional health care practices would be very useful for the benefit of mankind.

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