



# INTEGRATING TRADITIONAL INDIGENOUS PRACTICES AND MODERN MEDICINE FOR ENHANCED TRIBAL WELL-BEING

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## ABSTRACT

*The Particularly Vulnerable Tribal Groups (PVTGs) of Tamil Nadu inhabit the remote hilly regions of the Nilgiris District, fostering a deep reliance on Traditional Medicine over the past decades. Advancements in healthcare systems like road accessibility and the Tribal Mobile Outreach Services (TMORS) have brought modern medicine to the doorstep. It is still a matter of fact to be analysed whether or not these services cater to the unique needs of the tribal communities. The realm of study surrounds the tribal hamlets of Kotagiri where a blend of traditional and modern medicine exists within the healthcare system. However, the absence of a formal integrated structure poses various challenges. The study utilises a qualitative method through interviews and observations. The study aims to assess the prevalence and utilisation of traditional medicine while examining the availability and feasibility of Modern medicine in the tribal communities. Furthermore, it seeks to explore the distinctive barriers and challenges in integrating traditional and modern medicine. The study proposes a strategy to enhance public health and address emergencies within the tribal community as the primary focus is on enhancing the tribal healthcare system to meet the distinctive needs with a tailored framework which contributes to a more effective and cohesive healthcare system.*

**KEYWORDS:** PVTGs, Traditional Medicine, Modern Medicine, Integrated Healthcare System, Public Health

## INTRODUCTION

The Particularly Vulnerable Tribal Groups (PVTGs) of Tamil Nadu live in the remote hilly regions of the Nilgiris district. Over the past decades, their geographical remoteness has made them highly dependent on traditional medicine. Cultural factors, augmented by the challenges of long-distance travel due to geographical remoteness and residence in reserve forest areas, contribute to the non-utilization of healthcare services and have made them depend heavily on traditional medicine. However, contemporary advancements in healthcare and improved accessibility have changed the reliance of indigenous groups on conventional medicine. The effectiveness of the available modern healthcare and the service delivery in catering to the unique needs of the tribal communities is to be verified. Employing a qualitative methodology, the paper aims to understand the unique needs of each tribal community, fostering holistic development as per the tailored needs and the challenges faced in accessing healthcare. It is important to address the structural determinants of health inequalities with a special focus on cultural differences by fostering cultural tolerance among health workers.

## BACKGROUND

Kotagiri, a town nestled in the Western Ghats of the Nilgiris district, Tamil Nadu, holds centuries-old tribal populations. Nilgiris is the only district that houses all six Particularly Vulnerable Tribal Groups (PVTGs) of Tamil Nadu. Among the six PVTGs, Todas, Kotas, Kurumbas, and Irulas are distributed in Kotagiri. A special focus is given to Kotagiri as it has high IMR, MMR, Still Birth Rate, higher percentage of Malnourished Children and values of GII and MPI (State Planning Commission, 2017).

## METHODOLOGY

A qualitative methodology was used to explore the healthcare dynamics utilising a purposive sampling technique. In-depth interviews with 37 respondents consisting of community members and healthcare professionals were carried out along with direct observations in the tribal hamlets.

## TRADITIONAL MEDICINE VS. MODERN MEDICINE

Tribals have been practising Traditional Medicine using herbs in and around their locality. The geographical remoteness of tribes has led them to discover and utilise the best herbs, resulting in the practice of ethnomedicine. However, the commercialisation of tea has led to the destruction of natural forests and the loss of traditional herbs. While modern medicine offers an instant cure



compared to traditional medicine, it also comes with side effects. Recent developments and advancements have prompted tribes to embrace modern medicine. Most often they are conditioned in such a way that makes them dependent on modern medicines.

The geographical location of the tribes influences their preferences towards traditional medicine and modern medicine. For example, the Vellarikombai Alu Kurumba tribal hamlet, reachable only through a trek from Mamaram Junction via Sundaipatty Village, lacks road access. As a result, modern healthcare accessibility is limited to the tribal hamlet, leading to instances of home deliveries due to inaccessible healthcare facilities. During childbirth, women have to be carried by four men using a cloth cradle while trekking from Vellarikombai to Kollikarai Hospital. In contrast, most members of the Kollikarai and Kunjappanai tribal hamlets prefer modern medicine to traditional medicine. This preference is driven by road accessibility and the presence of in-house staff at Kollikarai Hospital, ensuring timely treatment in times of need. This highlights the critical role of road accessibility in the preference of tribes when accessing modern healthcare services.

### **PREVALENCE AND UTILISATION OF TRADITIONAL MEDICINE**

Most tribal hamlets still practice traditional medicine, with Todas having little to no engagement in traditional medicine. Kotas of Pudhu Kotagiri and Kil Kotagiri have utilised their traditional medicine, which was powerful enough to treat and cure cancer. The tribal healers of the Kotas are called *Madh Gisittu Kottone (Madh Koochitu Kottone)*. Currently, they utilise traditional medicine to address various health issues such as fever, cough, allergies, wounds, blood clots, body pain, and insect and snake bites. Historically, Kotas consumed millet, and mainstreaming has led to a transition in food practices. Presently, the elders of the community possess rich knowledge of various traditional medicine practices that need to be documented or transferred to the next generation, highlighting the importance of documenting practices and preserving traditional plants.

Mostly the Irula and Kurumba tribes belonging to the Konavakarai Panchayat utilise traditional medicine as there is more abundance of medicinal plants in this geography and also the conservation of these plants by the tribes. Nilgiris Irulas of Sundaipatty integrate greens into their food habits and have extensive knowledge about different greens, fruits, and vegetables that contribute to one's health. The tribal healers of Irulas are called as *Ketusugavaru* and traditional medicinal practices were passed on only through their generation. Currently, due to alcoholism, many who knew traditional medicinal practices are no longer available. This also highlights the importance of documenting the practices.

Kurumbas of Kil Kattabettu employ a blend of traditional and modern medicine, favouring the latter for its availability and prompt efficacy. The members still practice traditional medicine for cold, fever, burn wounds, and open wounds. In contrast, Kurumbas of Vellarikombai, Kollithorai, and Kovilmattam prefer traditional medicine and even opt for home deliveries over institutional deliveries. Most Kurumba settlements hold a medicine man called *Maddhukara*.

As per the notes from interviewed villagers, there were zero COVID cases during the pandemic in the villages that were not entirely mainstreamed and those that were closest to the forest. They believe that traditional practices and lifestyles followed in these villages have contributed to their healthcare. The absence of COVID cases in these communities underscores the potential effectiveness of their traditional healthcare and lifestyle practices.

### **AVAILABILITY AND FEASIBILITY OF MODERN MEDICINE**

Most of the tribal hamlets of Todas in Kotagiri have access to roads. For example, Bettumund and Kodanad Mund have road access, and they also benefit from the Tribal Mobile Outreach Services (TMORS) with doctors visiting and treating them once every month. The same is for Kotas as their current hamlets have road access and TMORS. They utilise allopathic medicines for diabetes and hypertension. Unlike the Todas and Kotas, not all Irulas and Kurumbas tribal hamlets have access to roads. For instance, the Irula hamlets of Bangalapadigai, Garkaiyur, Kokkudu, Semmanarai, Koppaiyur, Mettukal, Vagapanai, Kodagur and Kil Kattabettu either have newly laid roads or no access to roads. Through the TMORS, the tribes have been conditioned to use modern medicine, and each tribal hamlet is visited once a month with the medicine being delivered for the entire month. Pregnant and nursing mothers benefit from the Integrated Child Development Scheme, offering them nutritious food.

In Kurumbas settlements like Vellarikombai, Semmanarai, Baviyoor, Kovilmattam, and Kollithorai, the tribes prefer traditional medicine over modern medicine. When not arriving at a cure, they adapt to modern medicine. In Kurumba settlements like Banagudi, Anilkadu, and Kil Kattabettu, which have access to roads and frequent visits through TMORS, they prefer modern medicine to tribal medicine.

### **Integration Of Traditional And Modern Medicine In Tribal Hamlets**

The integration of traditional medicine and modern medicine is a multifaceted and complex approach. However, addressing it carefully will aid in a successful and cohesive healthcare system. Given the geographical remoteness and the importance of quality



healthcare, there is a need for a tailored approach to cater to unique needs and address cultural sensitivity, considering that every tribe has unique practices.

The available Primary Health Centres (PHCs) are located miles away from the tribal hamlets. The existing TMORS operate from morning to afternoon, a period when villagers are unavailable due to their engagement in daily wage labour. While monthly health checkups prove helpful, they do not provide immediate solutions during emergencies, which is essential, emphasizing the pressing need to integrate traditional and modern medicine.

Training villagers in basic healthcare services and improving existing facilities involve imparting knowledge of traditional herbal medicine for allergies, fever, cough, body pain, and other potential ailments. This initiative can foster the cultivation and preservation of traditional medicinal crops. The rich biodiversity of Nilgiris offers centuries-old plants with high medicinal values for treating diseases. The usage of herbal plants and medicines has been a longstanding practice in traditional medicine systems. The available 21 types of tubers, greens, tree barks can be promoted and integrated for the overall health benefits of the tribes. This approach aids in promoting the health of villagers, aligning with the phrase 'food is medicine.' Documenting the current and past medicinal practices aids in effectively helping the conservation of tribal traditions and practices.

Promoting village doctors can extend employment opportunities and provide quality healthcare at the doorstep during emergencies, bridging the existing gap in service delivery. For successful integration training and capacity building of healthcare professionals and traditional healers are essential. In the long run, integrating the AYUSH System of India can accommodate tribal medicine, offering opportunities for further research while respecting and preserving tribal traditions. This approach not only benefits the tribal communities but also contributes to providing quality healthcare services to a broader population. To promote sustainability and empowerment, all the suggested ideas need to be implemented majorly by the tribes themselves.

### CHALLENGES IN INTEGRATING TRADITIONAL AND MODERN MEDICINE

The integration of traditional and modern medicine imposes challenges like addressing cultural sensitivity, and resource constraints both financial and infrastructural. The development of frameworks for recognition and regulation is required to address legal and regulatory hurdles which may arise when incorporating traditional medicine. Documenting and standardizing traditional medicine practices may face challenges and is time consuming. It requires dedicated enumerators and professionals to carry out the task. Conservational efforts are crucial, it gives a possible scope for exploitation and vulnerability of tribes and their lands by outsiders during the development process.

### CONCLUSION

The integration of traditional medicine and modern medicine is a complex yet promising approach to enhance tribal well-being. It is crucial to examine carefully if the Government programmes truly address the special requirements of tribal communities. The absence of a formal integrated structure poses challenges. Tailoring strategies to cater to unique tribal needs and cultural sensitivities is important. The need for prompt healthcare during emergencies underscores the significance of integration, especially in places without road access. Implementing these suggestions especially carried out by tribal communities themselves can lead to a more efficient and unified healthcare system which empowers them and promotes sustainability in the approach.

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