Traditional Healing Practices in Dhurwa Tribe of Bastar: Challenges and Possibilities

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Abstract

Traditional health care systems and treatments are now attracting the attention of various institutions. However, tribal people are the real custodians of the medicinal plants. Out of 45,000 species of wild plants, 7,500 species are used for medicinal purposes. Anthropology also plays a vital role in the conservation of herbal plants. Documenting the traditional practices and providing proper training to the tribal medicine men can preserve this knowledge for future generations. A correct, collaborative, and effective implementation of traditional medicinal practices, along with proper coordination with modern medicine, can be more beneficial in this regard. This paper focuses on the traditional medicine practices prevalent among the "Dhurwa" tribe, especially in the Tirathagarh area of Bastar. The Dhurwa use traditional medicines that are locally available. However, nowadays, only the older Dhurwa people believe in traditional medicine, while the younger generation prefers modern medicine. The growing disinterest in ethno-medicinal plants is gradually increasing among the younger generation of tribes. The government should encourage the significance of these plants among the younger generation and the impact of modernisation and urbanisation.

Keywords: Dhurwa Tribe, Traditional Medicine, Health Beliefs, Healing Practices, Practitioners, Medicinal Plants

1.0 Introduction

Traditional medicine encompasses cultural interpretations of health, diseases, and healing practices, utilising plants, spirituality, and natural environments (see Sinjela and Ramacharan 2005; Vuori 1982; and Doyel 1982). Tribal communities, with deep knowledge of medicinal plants, play a crucial role in preserving this heritage, utilising approximately 7,500 species out of 45,000 for healing purposes (Schultes 1962). After recognising the significance of these

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medicinal plants, especially in areas with limited modern healthcare access the World Health Organisation advocates for their conservation. In India, traditional systems like Ayurveda heavily rely on herbal products, with over 800 plant species utilised by the herbal industry. This traditional medicine system reflects cultural wisdom and serves as a valuable heritage (see Vuori 1982).

Humans' intimate relationship with plants gave birth to ethno-botany, evolving into ethno botany, highlighting the indigenous people's utilisation of plants. Tribal societies' varied concepts of health, diseases, and treatment are deeply rooted in their cultures (Mahant 2015).

Anthropology, through historical perspectives and cross-cultural comparisons, unveils the complexities of traditional healing practices. It illuminates the interplay between traditional and biomedical systems, addressing healthcare access and disparities. Advocating for culturally sensitive public health interventions, anthropology strives to preserve traditional healing knowledge amidst contemporary healthcare challenges. In summary, anthropology offers a holistic understanding of traditional healing, encompassing its cultural, social, historical, and comparative dimensions, vital for addressing diverse healthcare needs (Hughes 1968).

Traditional healing practices are still pursued in various communities around the world, including the Dhurwa community in Bastar, Chhattisgarh, India. The Dhurwa community often maintains a strong connection to their traditional healing practices due to cultural, spiritual, and practical reasons.

It has been observed and learned from the members of the community that the Dhurwa community of Bastar has several reasons to preserve their traditional healing practices over the years.

- 1. Traditional healing practices are often deeply rooted in the cultural belief of the Dhurwa people. These practices have been passed down through generations and are considered integral parts of their identity and way of life.
- 2. For the Dhurwa tribe of Bastar, traditional healing methods are often more available and economical than modern healthcare facilities are. This makes traditional healing a viable and appealing option for Dhurwa community members who often face barriers to accessing modern medical services due to their isolated location.
- 3. Traditional healing embraces a holistic approach to health and wellness, considering not only physical ailments but also mental, emotional, and spiritual well-being. This holistic approach appeals to many members of the Dhurwa tribe who may favor a more inclusive approach to healthcare.
- 4. The Dhurwa tribe has relied on the efficacy of traditional treatment methods for generations, owing to their connection with their village deity and priest. These practices inspire a sense of familiarity and trust among community members, who are eager to learn about and participate in traditional medicine.
- 5. Spirituality and religious beliefs are often inseparable from traditional healing practices among the Dhurwa tribe. Healing rituals, herbal remedies, and other traditional methods are often accompanied by prayers, ceremonies, and other spiritual practices, enhancing their importance within the community (Sahu 2019).

Precisely, traditional healing practices continue to be pursued in the Dhurwa community in Bastar due to their cultural significance, accessibility, holistic approach, trustworthiness, and integration with spirituality. These practices play a vital role in the health and well-being of community members, and their continuity contributes to the preservation of traditional knowledge and cultural heritage.

The challenges facing traditional healing practices within the Dhurwa community of Bastar, India, are multifaceted. Modernisation and Westernisation threaten the preservation of traditional knowledge, while the lack of official recognition and support hampers accessibility and integration into healthcare systems. Additionally, the erosion of intergenerational transmission, stigmatisation, and environmental degradation further compound these challenges. With full consideration of these challenges, this study endeavours to explore and amalgamate the expansive facets of traditional medicine while delving into the rich tapestry of cultural rituals and heritage.

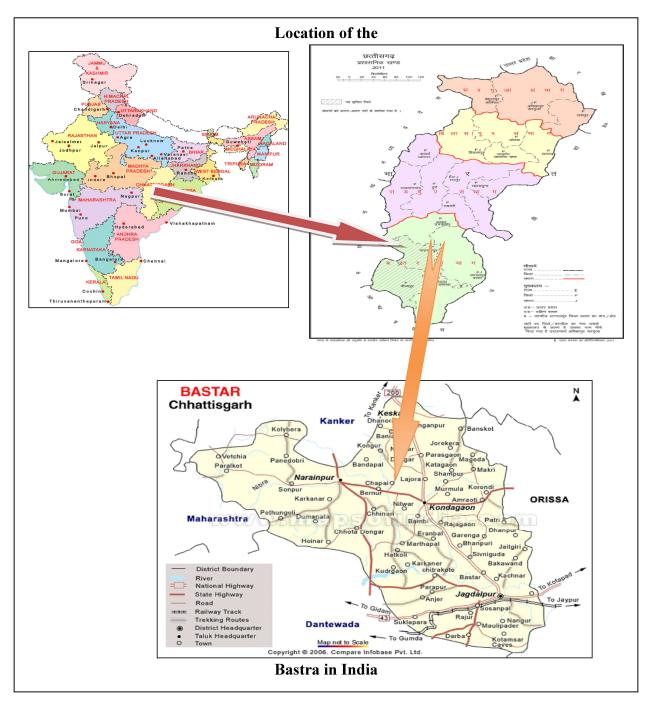
1.1 Geographical Structure of Bastar, Chhattisgarh

Bastar, situated in the state of Chhattisgarh, holds a captivating history. Founded in the early 14th century, it was once part of the princely state of Bastar. Over time, it was divided into the present-day districts of Bastar, Dantewada, and Kanker. Despite neighbouring influences, Bastar retains its unique cultural identity, hosting traditional festivals, traditional belief practices and showcasing a rich diversity of flora, fauna, and tribal communities (Agarwal 1979).

1.2 Methodology

This study explores the traditional medicinal knowledge and religious beliefs of the Dhurwa tribe in Bastar. The fieldwork focused on the Dhurwa population of Kamanar village in the Darbha Block, where a sample of 150 older and 150 younger individuals was chosen for the research purpose. With the help of traditional healers from the tribe, the study collected first-hand information on the medicinal herbs used in traditional medicine through folklore. The study also verified the medicinal uses and local or tribal names of the plants with multiple informants across the district, and recorded detailed information on the plant parts, herbs, and methods of usage. The data from the field were then contrasted with the existing published literature, comparing the medicinal plants of Bastar, a tribal region in Chhattisgarh, with those of India in general.

Bastar district, nestled in Chhattisgarh, India, is a testament to the intimate bond between humanity and nature. Here, diverse tribal communities like the Gond, Muria, and Maria harmonise with the land, relying on agriculture and forest resources for survival. Bastar's essence lies in its profound connection to nature, where tribal life flourishes amidst the beauty and bounty of the natural world.



Source:https://www.researchgate.net/figure/Map-of-Bastar-area-showing-its-position-in-Chhattisgarh-India_fig8_330508856.

The region faces challenges related to development, conservation, and security, necessitating government and civil society intervention. Preserving and promoting tribal knowledge and culture remains crucial as valuable national heritage.

1.3 Area of Study

As mentioned, the study was conducted among the Dhurwa tribes who live in Kamanar village. The village Kamanar is situated in the Darbha Block and located on NH 212. The distance from the district headquarters, Jagdalpur, is 32 km. There are 200 families living in the village, with a total population of 1,005. Out of 200 families, 167 are Dhurwa, 6 are Kalar, 8 are Raut, 13 are Madia, 4 are Panara, and 2 are Mahar. Among them, 223 are males, and 205 are females. The houses constructed here are of two types: one made of stones and mud, and the other made of cement, bricks, and RCC. The animals are kept outside the dwelling houses.

1.3.1 Amenities available in the study village

The village has one primary school, one middle school, and one high school that provide education for the children. There are also two Anganwadi Kendras in the village that take care of the small children and teach them basic activities of life. These are government-sponsored childcare and mother-care centres aimed at improving the health and nutrition of the rural population. In this village, most families belong to the Dhurwa tribe, which is one of the major scheduled tribes in Bastar.

Sl. No.	Amenities	Distance (km.)	
1.	Pucca Road	100mter	
2.	Sub- Health centre	5km.	
3.	PHC	8km.	
4.	District Hospital	32km.	
5.	Aganwadi Kendra	0km.	
6.	Unqualified (Doctor)	2km.	
7.	Primary School	0km.	
8.	Middle School	1km	
9.	High School	3km	
10.	Higher Secondary	32km.	
11.	National Bank	5km.	
12.	Post Office	5km.	
13.	District Headquarter	32km.	

Table 1: Various amenities in Kamanar Village

Source: Field-Survey (2006-2010)

The data reveals that Kamanar village's proximity to healthcare facilities varies, with the Sub-Health Centre 5 km away and the Primary Health Centre (PHC) 8 km distant. The district hospital and higher educational institutions are both 32 km from the village. Notably, the Sub-Health Centre lacks qualified doctors, and is staffed only by a compounder and a nurse, with two

positions unfilled. During the survey, it was observed that when the Sub-Health Centre was closed, villagers were compelled to seek care from traditional healers or unqualified private practitioners. This situation underscores the villagers' reliance on traditional healing practices, which remain integral to their healthcare due to the limited access to formal medical services.

1.4 Health Beliefs of the Dhurwa Community

The Dhurwa tribe, primarily found in the Darbha and Tirathgarh areas of Bastar, is renowned for its courage and bravery. Historically, they held special appointments to care for the Kings' Palaces. The Dhurwa tribe, renowned within the Bastar region, occupies a unique niche in the mosaic of tribal cultures. Known as a sub-caste of the Gond tribe and also referred to as Parja terms etymologically signifying 'one who bears the burden' - the Dhurwa have historically shouldered significant responsibilities. In bygone eras, they traversed the lands, laden with the weighty task of transporting essential goods such as ghee, milk, curd, and honey, suspended on a split-bamboo lever in opposite directions on their shoulders for royalty. Moreover, they were entrusted with the duty of carrying princes in palanquins from one place to another. This enduring tradition reflects their self-perception as Parja, a community deeply intertwined with the service of monarchs, an aspect deeply embedded in their cultural identity (Sahu 2019).

Notably, the Dhurwa community celebrates the month-long festival called "Gurgal", known for its musical significance. They share reverence for deities like Danteswari Mai, Mavli Matha, Bhima Dev, Bhairam, Pattdev, and Angadev. Singing and dancing are integral to their lives, while "superstitions", as is attributed by "others", persist among them. Residing in cohesive joint family structures, tribal communities exhibit a keen interest in both formal education and the preservation of traditional knowledge. Consequently, this dual focus fosters a deeper connection to their religious beliefs and a steadfast reliance on traditional medical treatments. The Dhurwa tribe, residing in the heart of India's Bastar region, holds a profound belief system deeply rooted in nature and spirituality. Their world is divided into three realms: the earth as the middle world, the sky as the upper world, and an unspecified lower world. 'The earth is shared by humans and supernatural beings, while the sky is the domain of the supreme spirit, the high god, who is the creator and above all other deities' (PrayWay n.d.; *also see* Sahu 2019).

During the survey, it is observed that the Dhurwa community harbors a profound belief in the supernatural powers of their deities. As a community deeply intertwined with nature, they have venerated natural gods for generations. Among these, they hold "Bharva Dokra" and "Bhandarin Dokra" in the highest esteem as their chief deities. Bharva Dokra is revered as the god of the earth, while Bhandarin Dokri is honored as the goddess of crops, reflecting their spiritual connection to the land and its bounty. The Dhurwa tribe, residing in the Kanger Valley region of Bastar, Chhattisgarh, has a unique perspective on health and illness. Within the Dhurwa community of Bastar, a deeply held belief prevails: calamities and diseases befall us only when our beloved deities, village guardians, or ancestral spirits are angry. They believe that their divine wrath, caused by calamities and sufferings, permeates this intricate tapestry of faith. In this complex cosmic weave, gods, deities, ghosts, and both malevolent and benevolent spirits manifest their presence, inflicting pain upon us when their wrath is aroused. (Roshan at al. 2014).

It is observed that during the survey, the Dhurwa community, steeped in unwavering faith in their ancestral traditions and beliefs, diligently engage in religious rituals to appease their deities and forebears. In their pursuit of well-being, they turn to age-old, sacred practices for addressing any form of ailment. Thus, their initial reliance rests upon indigenous healing methods and the bountiful resources of the forest to safeguard their health. As per the Dhurwa community's belief, their ancestral deities and the revered Istdev dwell within the lush forests of the Darbha Valley. These divine entities wield the power to heal ailments and soothe mental disturbances through the abundant medicinal plants that thrive in those very woods. The traditional healers of the Dhurwa community, versed in ancient wisdom, employ these sacred herbs, rituals, and spiritual practices to address physical, mental, and spiritual afflictions, ensuring holistic well-being.

1.5 Healing Practices among the Dhurwa Community

The healing traditions of the Dhurwa community, nestled within the rich tapestry of Bastar, unfold like an ancient saga of spiritual resonance and natural wisdom. Rooted deeply in their cultural ethos, the Dhurwa people perceive illness, as was revealed during the field study, as more than mere physical afflictions; they are manifestations of disharmony between the body, mind, and spirit. Within this worldview, the healing journey becomes a sacred quest for restoring balance and reconnecting with the rhythms of nature (Mahant 2014).

Central to their healing paradigm is the belief in the interplay of spiritual and supernatural forces in shaping health and disease. Disease, in the Dhurwa cosmology, often emanates from displeased deities, malevolent spirits, or the unseen forces of witchcraft. Yet, amid this mystical backdrop, a profound reverence for the healing powers of the natural world emerges.

As they gather medicinal plants and herbs, the Dhurwa community undertakes a ritualistic pilgrimage, honoring the spirits and deities that inhabit the lush forest. Each leaf plucked and every root unearthed carries profound significance, as the traditional healers strive to harmonise human necessities with the sanctity of nature, guided by their religious convictions. The Gond community is known for their use of medicinal plants and their spiritual beliefs. They use over 150 species of plants to treat various diseases and ailments. Their healing tradition includes, along with plan medicine, strong faith in their deities and ancestors who cause and cure the diseases. Performance of rituals to appease their deities and ancestors is a part of healing tradition of the Dhurwas. Abujhmariya, Muria, and Madiya communities of Bastar are known for the use of medicinal plants and their various uses. They use more than 50 species of plants to treat various diseases and ailments. "The communities living in the isolated and inaccessible areas of Bastar have maintained a unique cultural identity of their own. At the same time, their faith and belief in various gods and goddesses has been maintained since traditional times, due to which their traditional medical system is associated with them. Their strong belief in traditional medicine is a testament to their enduring cultural heritage. Analyzing this in the context of tribal traditional medicinal practices, it's clear that the traditional medical system is not merely a set of Traditional Healing Practices...

remedies but an integral part of their cultural fabric. It reflects a holistic approach to health that encompasses spiritual beliefs, a connection to nature, and a deep respect for ancestral wisdom. The reliance on this system underscores the community's commitment to preserving their heritage while addressing health needs with time-honored methods.

At the heart of Dhurwa healing lies the institution of the practitioner, a custodian of ancient wisdom and a conduit between the *seen* and *unseen* realms. These herbal healers, steeped in the lore of their ancestors, pass down their sacred knowledge through generations, often through an apprenticeship system that spans years. For them, healing is not merely a profession but a spiritual calling, a vocation bestowed upon them by forces beyond the mortal realm.

In the Dhurwa healing tradition, the boundaries between the physical, spiritual, and natural worlds blur, giving rise to a holistic approach to well-being that transcends the confines of modern medicine. The Dhurwa belief system is deeply connected to their healing traditions, reflecting a worldview where the physical, spiritual, and natural realms are seamlessly intertwined reflecting their holistic perspective towards disease and cure (Panigrahi 2016). It is a testament to the enduring resilience of indigenous knowledge and a reminder of the profound interconnectedness between humanity and the cosmos.

1.6 Traditional Medicinal Practitioners and Treatment Practices

The study area, the Bastar region in Chhattisgarh, is rich in medicinal plants and traditional healing practices. During the fieldwork in Kamanar village of Bastar district, more than a dozen types of mushrooms were found to be used as medicines. Some species were reported to have properties for birth control. It was reported that the powder of some species was effective in making women sterile. The tribals of Bastar also use pteridophytes (ferns and allied genera) for preparing medicines.

No doubt, the tribal people of this region have deep knowledge and respect for the natural resources that they use for their health and well-being. There are different types of traditional medicinal practitioners (TMPs) in the study area who use various methods and techniques to treat various ailments and diseases. Some of the main types of TMPs are:

1. Vedde (Guniya/Baid/Vaid): In the heart of Bastar, where ancestral gods and goddess, local deities, and spirits reside within dense forests, the significance of *Vedde* (Guniyas) stands paramount among traditional healers. *Vedde* is a term used in the *Dhurwi* dialect by the *Dhurwa* community to specialise in diseases caused by the evil eye, Devi Prapoka, (wrath of the deity) and other external factors. This type of medicinal practitioners receives training from generation to generation. Some of them also claim that they have received this specialty as a gift from God. The deity came into their dream and blessed them with this art of curing diseases. To check the type of diseases or the effect of the evil eye/evil spirit, they depend on the deity worshiped by them, as the deity comes into the dream and tells the medicinal practitioners about the causes and cures of the disease of a particular patient. Some of them also use rice grains for this purpose. This type of practitioners perform prayer, *jhar phook* (a type of conjuration combining incantation)

and blowing of air, but the method used in the study village is discussed below), along with using the medicines. These specialists are also considered sacred, as their way of treatment is considered blessed by God.

- 2. Dokari dai/ Kursen Dai: The Dhurwa community, which is located in the dense forest in the center of the Bastar region, holds a special place among the traditional healers and the local women who have expertise in pregnancy and childbirth. These skilled physicians handle the delicate journey from conception to postpartum with unwavering expertise. During pregnancy, they provide invaluable prenatal care, carefully checking the condition of the fetus, monitoring blood pressure, and providing necessary nutritional guidance. As delivery approaches, they stand by the expectant mother, offering encouragement, soothing massages and unwavering support. When the moment of birth arrives, they step into the delivery room, deftly assisting in delivering the baby, and ensuring a safe transition into the world. With reverence, they cut the umbilical cord and care for the placenta – a sacred duty that links life and legacy. Their work extends beyond delivery; Postnatal care becomes their responsibility. Diligently examining both mother and child, providing herbal remedies, and counseling on breastfeeding and family planning, these guardians of life provide a blend of ancient wisdom along with modern knowledge. Recently, under a government program, some of them have been honored with the title and role of Mitanin, receiving a modest monthly payment
- 3. Sirha: The group of practitioners is believed to have a direct connection with Deo/Devi (the god/goddess). Their healing practices extend beyond diagnosing physical illnesses; they also address tensions between different groups. At that time, the traditional medicine practitioner, the Sirha, first goes to the temple of his deity. He takes some grains of rice in his hand and utters the name of any Deo and throws rice on the earth, observing the position of the rice grains. He repeats this activity twice or thrice, and if the position of the rice grains is the same in all the activities, then he concludes that this deity affects that person. He repeats this activity takes a lot of time. So, the traditional practitioner relies more on his dream. He propitiates the Deo by sacrificing two cocks, one red hen, and one egg, besides other items of 0 the feast. He arranges the feast in the forest.

1.7 Treatment Practices

Some of the unique practices observed among the Dhurwa tribes of the Bastar region by traditional healers are:

• The use of red ants (Oecophylla smaragdina) is for the treatment of malaria. The ants are crushed and applied on the forehead of the patient, or the extraction is mixed with water and given to the patient to drink. The ants are believed to have antipyretic and anti-inflammatory properties.

- Rice grains are used for the diagnosis of the deity affecting the person. It is discussed while describing Sirha's method of finding out the disease causing deity.
- They use of jhar phook, a technique of blowing smoke from a burning piece of cloth or rope on the affected part of the body. This is done to remove the poison or the evil influence from the body.
- Medicine men (Guniya) use of Plumbago zeylanica Chitrak (Chitrak), Vitex negundo (Nirgundi) and other ferns and allied genera to prepare medicines. These are plants/shrubs that have vascular tissues but do not produce seeds or flowers. Medicine prepared form these ferns are used to cure various purposes, such as, skin diseases, stomach disorders, etc.

1.8 Availability and use of Medicinal Plants in Darbha Region

Medicine men use different parts of plants to prepare medicine for curing diseases. The process and use, along with the types of diseases, are briefly discussed in table 2.

Sl	Vernacula	Local	Botanical	Parts which	Medicinal uses
no	r name	Name	name	is used	
1.	Lajvanti	Lajni Lata	Mimosa pudica (Linn)	Root, leaves, stem	Decoction of root useful in gravellish complaints, leaves and roots used in piles
					and fistula, leaves rubbed into a paste
					applied to hydroceel, leaves and stem in scorpion sting.
2.	Harsingar	Kayari	Cochlosperm um religioum	Bark	Broken limbs
3.	Safed musli	Mutri Lata	Chlorophytu mat tenoutum	Root	tonic
			bakfr		
4.	Kali Musli	Musri Lata	cucurligo orchiodes	Root	Used safed musli and kali musli as pest in dengue fever.
5.	Chirayata	Bhuilim b	andrograpis paniculata	Leaf	Used in malaria fever, 60 gm. Leaf, with 60 gm. Dub grass, and chhana boiled with 2 lit. of water and used this water.
6.	Bhui Amla	Bhui aonla	phyllanthus nirurii	Leaf	Leaves for skin disease, and leaves with goat milk is used for pilia (jaundice) fever.
7.	Indrayan	Peeta kachari	Citrullus colocinthis Schard	Leaf	for fistula patients
8.	Lajwanti	Lajni Lata	Mimosa pudica	Root	used for family planning

Table 2: Availability and use of medicinal plants in the Darbha, Bastar region

9.	Sal	Sal	Shorea robusta	Bark	used for sugar control
10.	Semal	Semal Kand	bombax malabaricum	Root	use root as tonic
11.	Kali Haldi	Kaliyak and	curcuma caesia	Root	for leprosy and longevity
12.	Jhar Haldi		cosanicum tenestratum	Leaf	leaves for fever and ear ache
13.	Amaltas	Amaltas	cassia fistula	Bark	Use for anti-inflammatory and pain releaf
14.	Kala dhatura	Dhatoor	Datura innoxa	Seed and Leaf	alterative tonic
15.	Pathra chatta	Patharc hatti	Bryophyllum pinnatum	leaf	Use for the stone in gallbladder
16.	Tendu	Mahka	Aegle marmelos	Bark	Use for Body Pain
17.	Satyanshi	Pilikater i	Argemone exicana	Flower	Cough and Cold
18.	Rashanjadi	Rasna	Blepharisper mum subsessile	Roots	Delivery Problem

Source: Banik et al. (2014)

1.9 Perception for the Traditional Medicine Practices

In the Dhurwa community, traditional healers remain a crucial *first point of contact* for health concerns. However, both older and younger generations also seek assistance from government health centres and private doctors. Table 3 presents data on whom individuals in the Dhurwa community approach first when they fall ill, categorised by age groups (younger generation and older generation). The data is further broken down by the types of healthcare providers they consult: Traditional Healers, Primary Health Centres (PHC)/Government Doctors, and Private Doctors (unqualified/quacks). Table 3 also includes the total number of respondents for each age group.

Table 3: First Approach for Treatment
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Sl.No.	Whom you approach first	Dhurwa (Younger	Dhurwa (Old	Total
	when you ill	generation)	generation)	

1	Traditional Healer	17 (34%)	27 (54%)	44(44%)
2	PHC/ Govt. Doctor	29(58%)	20(40%)	49(49%)
4	Private Doctors (Unqualified)	4(8.0%)	3(6%)	7(7%)
	Total	50 (100%)	50 (100%)	100(100%)

Source: Field-Survey (2006-2010)

Table 3 shows *the first approach for treatment*. It points out that, out of the total Dhurwa people, 49 per cent first approach the PHC/ Government Doctors for treatment, and 44 per cent first approach traditional healers. However, when the analysis is done regarding the tendency of the younger and older generation, it is observed that the younger generation first approaches the PHC/Govt. Doctors (58 %) for treatment, while the older generation first approaches the traditional medicine man (54%) for the treatment.

Among the younger generation, 17 individuals (34%) approach traditional healers first when they fall ill, whereas among the older generation, 27 individuals (54%) do the same. The total number of individuals from both age groups who approach traditional healers first is 44 (44%). In the younger generation, 29 individuals (58%) seek help from Primary Health Centres (PHC) or Government Doctors initially, while among the older generation, 20 individuals (40%) do so. The total number of individuals from both age groups who opt for PHC/Govt. Doctors first is 49 (49%). Only a small percentage of individuals from both the younger and older generations choose to consult quacks. Among the younger generation, 4 individuals (8.0%) approach such doctors, while among the older generation, 3 individuals (6%) do so. The total number of individuals from both age groups who prefer quacks is 7 (7%).

In the Dhurwa community of Bastar, both younger and older generations predominantly seek assistance from traditional healers when falling ill, although there is a growing reliance on modern healthcare providers across age groups. Rooted in nature, Dhurwa healthcare practices are gradually intersecting with modern education and awareness, fostering an increasing interest in modern medicine. Analyzing healthcare-seeking behaviour among the Dhurwa tribe and comparing it with other tribes in the region, and broader Indian trends reveals diverse cultural practices and historical influences. While some tribes exhibit a pronounced reliance on traditional healers due to cultural beliefs and limited access to modern medical facilities, others adopt a more balanced approach, integrating traditional and modern healthcare options. In rural and tribal areas like Bastar, where access to modern healthcare infrastructure may be limited, traditional healing practices fill a critical gap, offering accessible and culturally relevant healthcare solutions. Despite their importance, challenges such as the lack of standardised training for healers and potential risks of incorrect diagnoses persist. To optimise the potential of traditional healing, integration with modern healthcare systems is necessary. Efforts to bridge this gap can enhance healthcare outcomes, ensuring quality control and promoting collaboration between traditional healers and modern healthcare providers, ultimately leading to a more

holistic approach to healthcare delivery benefiting communities across India, including those in the Bastar region.

1.10 Conclusion

Medicinal herbs are going to play an important role in future material-medical research. These herbal drugs provide strength to the body organs and stimulate normal functioning. The herbal drugs act selectively and gently without disturbing other systems. Correspondingly, modern medicine affects several metabolic activities in the human system and has side-effects that make the body more susceptible to other diseases. The traditional knowledge of the tribal medicine man is diminishing day by day due to modernisation. The younger generations are not so interested in acquiring traditional knowledge. The growing disinterest in the use of the ethnomedicinal plants and their significance among the younger generation of the tribes will lead to the disappearance of this practice. The educated younger generation of the tribes should be encouraged by the government to protect and cultivate these valuable herbal plants before they get lost due to the impact of modernisation, urbanisation, and deforestation. The traditional knowledge documented so far in the present communication will help in preparing an action plan for the development of the herbal industry and boosting the tribal and rural economy of this region.

The traditional healers are the real custodians and play a vital role in the field of saving herbal plants, traditional beliefs, and rituals. By educating the tribal people, we can preserve all these things for future generations. The traditional healer practices of Bastar in Chhattisgarh are similar to those of other parts of India in some aspects but also have some unique features.

References

Agarwal, P.C. 1979. Human Geography of Bastar District. Allahabad: Garga Brothers.

Banik, Ajay, Sharad Nema and Deo Shankar. 2014. 'Wild edible tuber and root plants

- available in Bastar region of Chhattisgarh'. International Journal of Forestry and Crop Improvement, 5 (2): 85-89.
- Doyel, David E.1982. 'Medicine Men, Ethnic Significance, and Cultural Resource Management'. *American Antiquity*, 47(3): 634-642). <u>https://www.jstor.org/stable/280239</u>.
- PrayWay. n.d. The Dhurwa of India. https://www.prayway.com /unreached /peoplegroups5/638.html
- Hughes, Charles Campbell. 1968. 'Ethnomedicine'. In David L. Sills (ed.), *International Encyclopaedia* of the Social Sciences, Vol. X: 87-93. New York: The Macmillan Company.
- Mahant, Sushila D. 2014. 'Indigenous Traditional Healing Care: Belief & Practices among Tribals of South Bastar in Chhattisgarh'. *International Journal in Physical & Applied Sciences*, 1(3) December 2014: 36-49. <u>https://www.academia.edu/38533632</u>
 /Indigenous_Traditional_Healing_Care_Belief_and_Practices_among_Tribals_of_South_Bast ar in Chhattisgarh
- -----. 'Indigenous Traditional Healing Care: Belief & Practices among Tribals of South Bastar in Chhattisgarh'. *IOSR Journal of Humanities and Social Science*, 20 (1, Ver. 1):49-54.
- Panigrahi, Suman. 2019. 'Traditional Treatment System of Bastar District'. International

Journal of Research in Social Sciences, 6(10). Online published on 19 Nov.2016. https://www.indianjournals.com/ijor.aspx?target=ijor:ijrss&volume=6&issue=10&article=055

- Roshan, R., J. Oraon, and V. Kumar. 2014. 'Infant Health Status of Bastar A case study of Dhurwa Tribe. *Asian Mirror- International Journal of Research*, 1(1), February-2014:1-2.
- Sahu, Bindu. 2019. 'Dhurwa's Nature Spirit Complex in Bastar'. International Journal of Development Research, 9(10): 30491-30497.
- Schultes, R. E.1962. 'The role of Ethnobotanist in the search for the new medicinal plants'. *Lioydia* 25(4): 257-266.
- Sinjela, Mpazi and Robin Ramcharan. 2005. 'Protecting Traditional Knowledge and Traditional Medicines of Indigenous Peoples through Intellectual Property Rights: Issues, Challenges and Strategies'. International Journal on Minority and Group Rights 12(1): 1-24. https://www.jstor.org/stable/24675285
- Vuori, Hannu. 1982. 'The World Health Organisation and traditional medicine'. *Community Medicine*, 4(2): 129-137. <u>https://www.jstor.org/stable/45157055</u>