Public health of ayurvedic system and medical therapy among Sabars of Rayagada district in Odisha

Gayatri Bhukta

Postgraduate, PhD Research Scholar, Dept. of History, Berhampur University, Bhanja, Bihar, India

*Corresponding Author: Bhagaban Sahu

Email: bhuktagayatri@gmail.com

Abstract

The physiographic of Rayagada gives a perfect platform for the tribal's in sustaining their ethno-cultural identity in the district. Forest area covers an extent of 4785.36 Sq. K.M. out of which 777.27Sq.K.M. is reserved forest. The district has been the homeland of various tribal communities with their sub-tribes, who are found in different level of development depending upon their assimilation with the so-called mainstream or modern communities.

Keywords: Highest concentration is found in the blocks of Rayagada, Kashipur, Kalyansinghpur, Bisamcuttack and Muniguda.

Introduction

The district Rayagada was carved out of the erstwhile Koraput district on 02.10.1992, as part of the extension plan of district has a population of 832019,out of which 473379 are tribal's. In other words, the district is predominantly a tribal populated district with 57.52% of tribal population keeping this in view, all the 11 blocks of the district have been covered under tribal sub-plan with 3 micro projects in operation for the pre-literate indigenous tribal communities.

The physiographic of Rayagada gives a perfect platform for the tribal's in sustaining their ethno-cultural identity in the district. Forest area covers an extent of 4785.36 Sq. K.M. out of which 777.27Sq.K.M. Is reserved forest. The district has been the homeland of various tribal communities with their sub-tribes, who are found in different level of development depending upon their assimilation with the so-called mainstream or modern communities. The kondhas and its subsection constitute the major percentage of tribal population in the district and the Souras stand second.

In the ethno-cultural map of Orissa, two tribes stand out quite prominently for their educational backwardness and continuing ethnic and cultural identity. Firstly, the kondhas are one of the primitive tribes, inhabiting almost all the blocks of the district. Their highest concentration is found in the blocks of Rayagada, Kashipur, Kalyansinghpur, Bisamcuttack and Muniguda.

The Rayagada district in Odisha is situated in the south west of central Odisha in between 19⁰58" N latitudes and 82⁰54" E and 84⁰2"E Longitude stretches over an area of approximately 7.073 sq.kms. on 2nd October, 1992 the district of Rayagada got its identity as a separate district as per notification no-49137/R dated 01.10.1992 of Odisha Government in Revenue and Excise Department, Odisha,

Bhubaneswar. It was carved out of the undivided Koraput district. Hence it is difficult to write the history of small region which constituted a part of a big kingdom traditionally, it is believed that Rayagada area was being ruled by Rai or Rayjani, a tribal chief (Kondha Chief). The ruler of Nandapur always wanted to add Rayagada to his Kingdom which he failed to do in spite of continuous fighting. Finally he had signed an agreement with Rayjani. As per this agreement the place was name as Rayagada taking after the name of Rayjani.

Since pre-history days Rayagada region was dominated by the kondha the Sabara or Saura. The Aitreya Brahmana, the Ramayana and Mahabharata refer to the Sabaras. Plainly mentions the Sabaras as Sauri and Ptolemy as Sabarai. Hence the history of the region during pre-historic period has found mention though in a very general way which however can easily apply to this region.

Aims and objectives

No work has so far been attempted to present the conditions of Public Health and sanitation in Rayagada district. So the main aim and objective of the work is to discuss the various aspects of the medical and public health services combating epidemic diseases in Rayagada district. The proposed Medical Colleges in Rayagada district may be completed at an early date to provide better health facility to the people of these areas.

The Sabara Tribe in Rayagada

The Sabar people are the second most famous tribal community in the Rayagada district of Odisha and specific pockets of Koraput and Gajapati districts. They are also sometimes called Lanjiasouras due to their dress pattern of wearing a side cloth hanging from behind and could be

mistakenly identified as a tail by a stranger. They are also present in Srikakulam, Vizianagaram and Visakhapatanam district.

Language of Sabara

Sabara speak Sabara language which belongs to the Koi-Munda group of Austro-Asiatic family of languages. The Sabara language has a complicated grammar, particular its verb system. A Sabara very can effectively compact a complete sentence into just a single word. In some areas, the younger generation no longer speak Sabara.

Dress Pattern of Sabara

There is hardly anytime distinctive about the dress of a Sabara man which consists of loin cloth about six ft. long and ten inches breadth. This may be plain or may be decorated with red tassels at the ends. Occasionally they were a single necklace of beads: a traditional dress of Sabara women is a waist cloth with grey border which hardly reaches knee. The skirt is about three ft. in length and about two ft. breadth and for the upper part they were another piece of cloth.

The sabara women use simple ornaments to decorate themselves. A few necklace of beades, round wooden plugs, spiral rings made of grass, bell metal or aluminum in the fingers and toes, little ranges in the nose, and metal anklets are work by them.

Religion and Culture of Sabara

The saoras are highly religious with each and every natural phenomenon attributed to the works of some gods, deities or spirits. Therefore, the customary low, values, norms are highly respected by all members of the society for the fear of inviting personal or communal harms. The Sabara people are a tribe from Southern Odisha, north coastal in Andhra Pradesh in India.

Sabara people believe that spirits guide their destiny, worshiping mainly the deities Jakaradeva the and Sandhidemudu. The village headmen are called Buy. They practice shifting cultivation and the men hunt. A weekly market, called shanties, is a significant role in the society, in the economy and in culture exchanges with other tribes and western culture.

The sora people are a dwindling jungle tribe with a unique shamanic culture. They are known by various names such as Sabara, sora and soura. The saouras speak a munda language. However, written language in soura is not followed by all. They practice shifting cultivation, with a few gradually taking up settled agriculture.

Occupation of Sabara

The saoras religion is very elaborate and deep rooted. They are polytheist and believe in large number of deities and ancestral spirits. They practice both podu and terraced cultivation with varieties of cereals. Dance and music constitute part and parcel of their rich aesthetic life. The saora family is polygamous. The total household economy revolves around the women member who is hard working and who helps her husband in pouching and harvesting crops in addition to attending household chores exclusively.

Village and House

The housing pattern of the Sabara is of linear type. The villages where Sabara live are generally at the hilltops of EasternGhats Vamshadhara Nagavali and rivers Vizianagaram and Srikakulam Districts respectively. The villages are quite small with ten and twenty families. The Sabara always live in exclusive settlement of their own. They never build their houses in the company of either the other tribal or non-tribal groups. Villages are homogenous, exclusively inhabited by Sabara people. A typical house is square or rectangular single room with mud plastered walls supported with bam boos. The room has no windows except one entrance door. They cooking food outside the house.

Social life of Sabara

The Saora have a traditional political organization at each region and village, having hereditary post of Gomango (secular head), Buyya (religious head), Mondal, Raito, and Barik (messenger). The Saoras have made history in pre-British and British period and post independence as a community known for their economic and political integrity.

Specialty of Sabara

Also the Sabara tribal are noted for their paintings. Among the various tribes of Eastern Ghats, the Sabara are known to have the best developed artistic sense. The tribal are known to decorate the walls of their home with paintings depicting birds and animals, men on hunting trails, their lifestyle, fauna etc. One of the essential elements of Sabara paintings are the geometrical shapes that are used to create bold borders for the center-piece that is invariably drawn in fine lines. They are also known for their handloom products and particularly T-Shirts made by the Sabara with a type of warily painting done on them are very highly appreciate.

Public Health and Sanitation

The public health section of this NAC has one Sanitary Inspector on deputation from Health Department during the year report. Sanitary Inspector and Health worker have been deputed to this municipality from health department for Supervision of Sanitation work. The municipality handles sanitation matters of 7 wards by its own sanitation staff. Out of the remaining 17 wards, 16 have been given to a private outsourced agency and one ward is maintained by railway authorities. Besides, 25 sweepers, 1 zamidara and one tractor driver are working in this NAC. The required number of wheel barrows and other sanitary equipments are provided by this NAC to the Health Section for smooth management of sanitation work. This NAC is maintaining two tractors with trolley and one JCB for removal of garbage within the NAC area. All the wells of this NAC are being chlorinated at the regular intervals. Sufficient phenyl, bleaching powder and malarial oil are also provided for batter sanitation in the town. All roads and drains are kept clean regularly.

Besides, one Homoeo dispensary is maintained by this NAC with its own fund. The council has paid its share of matching contribution towards salary, pension contributions as well as on municipal development works, remunerative grants etc. The street lighting energy charges, homoeo medicines, street light and sanitation materials and like are also paid from municipal funds. There are 104 tube-wells and 206 stands existing in the NAC area to provide drinking water facility. The public Health section of this NAC has been provided sanitation, anti-vectorcidal spray work, bush cutting, Garbage lifting and transporting and other public Health works. One cess poll is provided for cleaning of latrine tanks of the general public of this NAC area.

Medical Facilities

The health seeking behavior of a large fraction of the population of the district still hovers around traditional healers like "Jaan", "Disari", "Beju" and the like though due to change in awareness and availability of modern health facilities at hand the majority have turned towards modern medicine, with the intervention of different disease control programs. Though their incidence have come down the diseases like diarrhea, cholera, measles, malaria, TB still pose a threat in the district. As the mortality due to these diseases is high, specific plan and programs are allotted to the district from time to time.

The modern health care system which started in the district in a rudimentary form in 1870 under the then Vizianagaram region and subsequently handed over to the Kashipur health authority in 1937 has now emerged into a vibrant structure of modern way of health care.

The 69 bedded institution (SDH) was upgraded to 99 bedded in 2002. But the staff pattern was same till 2010. The posts of Specialist Doctors and other posts changed as per new District headquarters hospital pattern in 2010.

Health Infrastructure Profile

District Headquarters Hospital: 01 Sub-Divisional Hospital (Gunupur): 01 Community Health Centre: 11 Primary health Centre: 36 Other Private Hospitals (Accredited under JSY): 01 Clinical establishment (private): 11 Mobile Health Unit: 11 nos (Hard to reach, difficult areas) Mobile Health Team: 29 nos (For schools and AWC activities) Blood banks: 02 (Rayagada and Gunupur) Ambulances available at 13 institutions

Health Statists

- 1. 23 institutions are providing institutional delivery.
- 2. Two institutions are providing C-Section, Major/ minor operation facilities.
- 3. Two institutions having blood transfusion facility.
- 4. One institution is having dental services.
- All Sub-Centers, AWCs, Residential Schools, Day Scholars are being provided services through Mobile Health Teams.
- 6. 24x7 free referral services are being provided at Block level and District level institutions.

A hospital development committee namely "Rogi Kalyan Samiti" has been formed and functional at Sector level, Block level, Sub-Division level and District level institutions.

District Specific Innovation There are 183 villages without having approach roads due to which the referral of diarrhoea cases, pregnant women etc. are not possible. Hence a "Doli" is prepared and 183 Dolis will be handed over to the "Gaon Kalyana Samitis" and the necessary patients/ beneficiaries will be brought through that Doli and the same is named as "Amo Gaon Doli".

Traditional Health care facilities

Before the introduction of the western system of medicine or allopathy, as is the popularly called, Ayurvedic system of medicine had for centuries existed in this country. The vaidyas and Kabiraj as practiced medicine and provided medicine to the needy in their home and sometime at their door steps. They had sound knowledge on medicinal use of plants, mostly confined the elder people. Younger generation is ignorant about the vast medicinal resources available towards the conventional medicines. Tribal practitioners are hesitating to disclose their knowledge.

The Vaidyas and kabirajas prepared medicines by following different Ayurvedic book of talapatra like Brukhyalata Guna, Dravyaguna etc. They used following medicinal plants to cure different type of diseases.

Uses of Medicinal Plants

- Amla/Anla: Fruits are used to cure indigestion. It also relieves cough.
- **2. Apamaranga:** Root paste is used to relieve labour pain. The root is collected on Sunday and tied on the head for easy delivery. Chewing of fresh and cleaned root protects from toothache.
- **3. Bela:** To cure dysentery, power of dried young fruit is taken with honey. The fresh leaves are used against diabetes.
- **4. Sugandhi:** The root paste is useful against rheumatism; anemia and urinary disorders. Root are vomiting during pregnancy.
- **5. Krushnachuda:** Heartwood is used in wounds, ulcers, laprosy, skin diseases and diabetes.

Traditional Believe on Mantra and Puja

Tribal people residing in the undivided Koraput district ordinarily ascribe their diseases to evil influence of different diseases and to know the cause of disease they took the service of different traditional doctors of their community, who in their own traditional way counteract the evil effects. The following was one example of their traditional beliefs. They used different books. It is also peculiar that they used to worship these books once a year during *Mahastapami* in *Dusahara* by offering goat, hen pigeon and some time their own blood by cutting the finger tips to please the deity and to become successful in their profession.

Conclusion

The need for health care and related facilities in rayagada region is unique and typical of the area. The region is the home for different categories of people, when the tribal's mostly depend on their tradition and natural cure and are almost adverse to modern medicine the non tribal's need to be taken care of by the Governmental agencies. The primitive tribes of Odisha and their health scenario present a kaleidoscopic mosaic of various communicable and non-communicable disease profiles keeping in pace with their socio-economic development. Among these there are communities who still depend primarily on hunting and

food gathering as primary source of livelihood. The wide spread poverty, illiteracy, malnutrition, absence of safe drinking water and sanitary condition. Health related training module may include some of the health issues of local tribal communities and other people too. This will help the health personal to have an understanding of the tribal people and their problem. The proposed medical colleges in Rayagada district may be completed at an early date to provide better health facility to the people of these areas.

Source of Funding

None

Conflict of Interest

None.

References

- Behuria NC. Orissa District Gazetteers: Ganjam, Cuttack, 1995.
- 2. Bell RCS. Orissa District Gazetteers: Koraput, Cuttack, 1945.
- 3. Senapati N. Orissa District Gazetteers: Koraput, Cuttack, 1966.
- 4. Gazatte FG. Madras(from1832 to1872) 60 volumes.
- 5. Matby TJ. The Ganjam District Manual, Madras, 1892
- The manual of administration of madras presidency, 3 volumes, (Madras, 1886)
- 7. Patanayk AK. Cultural Heritage of Odisha, voi-ix 2007.
- Mohanty BB. "Saora", in Tribes of Odrissa, THRIT, BBSR, 1990
- Prabhakara M. Health, Disease and Medicine in south odisha Under the British New Delhi 2016.
- 10. Gopinath M. The Cultural Heritage of Ganjam, BBSR, 2004.
- 11. Sahu, Bhagaban. Cultural History of Odisha, New Delhi, 1997.
- Thomas, J Medical and Aromatic Plants-Research in India in UNDP, 1997.
- Pati RN, Das J. Tribal and indigenous people of India: problems and prospects.
- Panda, Kumar A. Development of Health Care Facilities in Undivided Koraput District: A Study, P.G. Department of History Berhampur University, 2015 boos.

How to cite: Bhukta G, Sahu B. Public health of ayurvedic system and medical therapy among Sabars of Rayagada district in Odisha. *J Manag Res Anal.* 2020;7(1):21-4.