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## ETHNOBOTANICAL MEDICINAL PRACTICES AMONG THE LODHA TRIBE OF WEST BENGAL: AN EXPLORATIVE STUDY

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### ABSTRACT:

According to World Health Organization about 80% of the world's population depends on traditional medicine for their primary health care. Conventional knowledge is based on the realistic understanding of everyday people, deep-rooted in the life of the indigenous people. At present in West Bengal there are 3 PVTGs (Particularly Vulnerable Tribal Groups); those are Toto, Birhor, and Lodha among the listed 40 scheduled tribes. Among these 3 PVTGs of West Bengal, the Lodhas are mainly found in the western part of the state. In this paper, an attempt has been made to find out the present scenario of the ethnobotanical medicinal practices among the Lodha tribes in West Bengal in this era of modernization and globalization. The study was conducted from January to September 2022 in two villages under the Paschim Medinipur district of West Bengal and four villages under the Jhargram district of the Indian state of West Bengal. The data have been collected through intensive fieldwork by applying the participatory rural appraisal (PRA) technique including semi-structured, open-ended interview schedule, and focus group discussion. It is evident from the study that 21 medicinal plants are mainly used by the Lodha tribe in the study area as primary health care means in their day-to-day life. The ethnobotanical medicinal plant used by the Lodha tribes in curing diseases of orthopaedic, respiratory, fever, cough and cold, skin diseases, diarrhoea, liver diseases like jaundice, eye diseases, and as well as mental disorders. It is found that the younger generation among the Lodha tribe of West Bengal does not have enough knowledge and interest in their ancestral ethnomedicinal practices. At present time, deforestation, soil erosion, the fusion of sociocultural networks, and expanding worldview of natives break the rhythm of integrated golden nexus these ethnomedicinal practices among the Lodha tribal societies are at risk. In the very future, the next generation of the West Bengal Lodha tribe may lose their traditional indigenous medicinal practices and knowledge.

**Keywords:** Lodha tribe, Ethnomedicinal practices, West Bengal.

### INTRODUCTION:

According to World Health Organization about 80% of the world's population depends on traditional medicine for their primary health care. Conventional knowledge is based on the realistic understanding of everyday people, deep-rooted in the life of the indigenous people. This has been transmitted vocally from generation to generation. Folk medicine or ethnobotanical medicine plays a significant role in rural as well as among the tribal people. In tribal society, they now depend upon various traditional valuable plants and herbal remedies. Traditional medicine or ethnobotanical medicine as identified by the World Health Organization (WHO) "Sum total of knowledge, skills and practices based on the theories, beliefs and experiences indigenous to different cultures, whether explicable or not, used in the maintenance of health as well as in the prevention, diagnosis, improvement of treatment of physical and mental illness" (Srinivas, 2010). In West Bengal, the Tribal population is 52,96,963 as per the Census 2011, which is about 5.80% of the total population of the State. The tribal population of West Bengal constitutes about 5.08% of the total Tribal population of the Country. Based on the number of listed scheduled tribes communities as decided by the Government of West Bengal, at present, there are 40 scheduled tribes distributed mainly in the southwest and the northern parts of the state. Among these tribes, Toto, Birhor, and Lodha have been notified as PVTGs (Particularly Vulnerable Tribal Groups) in terms of backwardness in different development indicators. Among these 3 PVTGs (Particularly Vulnerable Tribal Groups) of West Bengal, the Lodhas are mainly found in the western part of the state in the districts of Purulia, Bankura, South 24 Parganas, Paschim Medinipur, and Jhargram along with tribes like Santal, Munda, Bhumij and Oraon etc., who are numerically and economically in a much better condition than the Lodhas. In the pre-independence period, the British administration included the Lodhas as one of the criminal tribes (Singh 1994: 694). In 1952, the Criminal Tribes Act was repealed by the Government of India and then The Lodhas were included under the denotified and nomadic tribes along with 19 communities of West Bengal. Still later, since 1971 the Lodhas were designated as one of the 'Primitive Tribal Groups' (PTGs) of India (Verma 1990: 277) and then after 2006, they were redefined as Particularly Vulnerable Tribal Groups (PVTGs). In this paper, an attempt has been made to find out the present scenario of the ethnobotanical medicinal practices among the Lodha tribal community in West Bengal in this era of modernization and globalization.

### OBJECTIVE OF THE STUDY:

The study is an attempt to present, highlight and analyze based on the following objective:

- To explore the present scenario of ethnobotanical medicinal practices among the Lodha tribe of West Bengal.

#### STUDY AREA:

The study was conducted from January to September 2022 in two villages under the Paschim Medinipur district of West Bengal and four villages under the Jhargram district of the Indian state of West Bengal. An overview of the study area is given below in the following table:

**Table 01: An Overview of the Study Area**

State	District	Block	Village	Total number of Lodha households
West Bengal	Paschim Medinipur	Narayangarh	Daharpur	80
		Keshpur	Mirpur	35
	Jhargram	Binpur-II	Ashakanthi	60
		Gopiballavpur-I	Singdhui	50
		Jamboni	Sangram	80
			Jarkasole	50

#### METHODOLOGY OF THE STUDY:

The data have been collected through intensive fieldwork by applying the participatory rural appraisal (PRA) technique including semi-structured, open-ended interview schedule, and focus group discussion from the above-stated (Table 01) villages based on the said objective of the study. The key informants were the senior villagers, practitioners of ethnobotanical medicinal plants, and younger generations belonging to the Lodha tribal community of West Bengal. Then the collected data have been analyzed qualitatively.

#### FINDINGS AND DISCUSSION:

Traditional healers are the main source of familiarity with medicinal plants. From them, knowledge has been transmitted vocally from generation to generation. Traditional beliefs, knowledge concepts, and practises among them for preventing and curing diseases are accessible now among the Lodha tribes of West Bengal. Among the Lodha tribal community in West Bengal now, we found many plants and trees that are ritually preserved and these are utilized as a good source of medicine in their day-to-day life, especially as primary healthcare measures. People follow rules and regulations to collect their medicinal plants and which are essential for preserving these species. They are refrained from collecting some herbs during their reproductive periods, consume leaves at night to allow respiration of the herbs and are not picked from their alter places. In West Bengal Lodha tribal people follow rituals without any clarification and curiosity. They also make some modifications to existing rituals. Thus stiffness of rituals provides us with mammoth medicinal knowledge and information from our ancestral era. Traditional healers among the Lodha tribe especially the elderly generation of this community follow a ritualistic mode of treatment, sometimes even without any physical medicine as in the case of mental disorders. The ethnobotanical medicinal plant used by the Lodha tribes in curing diseases of orthopaedic, dermatology, respiratory, fever, cough and cold, skin diseases, allergies, headache, diarrhoea, liver diseases like jaundice eye diseases, blood and other health problems and as well as mental disorders. Some common medicinal plants used by the Lodha people in West Bengal are given below:

**Table 02: Medicinal Plants used by the Lodha tribe in West Bengal**

Sl. No.	Local Name	Scientific Name	Used to treat
1	Shal	<i>Shorea robusta</i>	Ring Worm
2	Neem	<i>Azadirachta indica</i>	Liver and Skin diseases
3	Tulsi	<i>Occimum sanctum</i>	Cold and Cough
4	Vasaka	<i>Justicia adhatoda</i>	Cold and Cough
5	Hatrukna*	<i>Not found</i>	Cold and Cough (For Children only)
6	Haritaki	<i>Terminalia chebule</i>	Digestive disorder
7	Akando	<i>Calatropic gigantea</i>	Ear problems and Burning sensation
8	Manasa	<i>Euphorbia nerifolia</i>	Eye problems, Severe Cough and Cold
9	Bel	<i>Aegle marmelos</i>	Acidity and Digestive problems
10	Jaba	<i>Hebiscus rosa-sinensis</i>	Infertility problems of woman
11	Guloncho	<i>Tnospora candifolia</i>	Bone injury
12	Mohul	<i>Bassis latifolia</i>	Abscess
13	Khulekhara	<i>Hygrophila auriculata</i>	Anaemia, Diarrhoea
14	Ankula	<i>Alangium salvifolium</i>	Conjunctivitis
15	Atundi	<i>Combretum decandrum</i>	Acne

16	Saloporni	<i>Desmodium gangeticum</i>	Typhoid and other fever
17	Kumbhi	<i>Careya arborea</i>	Joint pain
18	Dhatuki	<i>Woodfordia fruticosa</i>	Irregular Menstrual problem
19	Bichhuati	<i>Tragia involucrata</i>	Asthma
20	Anantamul	<i>Hemidesmus indicus</i>	Eczema
21	Arjuna	<i>Terminalia arjuna</i>	Heart Diseases and Hypertension

Source: Primary data

(\*at present very rarely found)

It is evident from table 02, that 21 medicinal plants are mainly used by the Lodha tribe in the study area as primary health care means in their day-to-day life. It is found that elderly people among the Lodha tribe in West Bengal are involved in traditional religious and other activities like village priest, village judge, medicine man etc. Some of them who are involved in the traditional healing system get respect from their community people with supernatural power. At present in West Bengal, the influence of supernatural entities is gradually disappearing from every society due to modern education, modernization etc. The younger generation among the Lodha tribe of West Bengal does not have enough knowledge and interest in their ancestral ethnomedicinal practices. In general, about 78% of respondents in the studied areas (Table 01) shared that in recent years, dependency on allopathic treatments has increased considerably over traditional healthcare systems. Loosening interest among the young generation, scarcity of different medicinal plants in the locality, tough and time-consuming process of plant collection, and gradually lacking skill of specific identification, appeared as major reasons for the declining trend in using ethnobotanical medicinal plants as a traditional health care system among the Lodha tribal community in West Bengal. Easy travelling to the district hospitals in recent times and for different health care facilities provided by the government of West Bengal as well as the availability of primary health centres and sub-centres in their very nearby location in recent years have further diverted the younger generation from using ethnobotanical medicinal practices. Surprisingly, for some particular ailments like different kinds of mental disorders, bone fracture and dislocation, liver diseases like jaundice, skin diseases etc. most of the inhabitants still prefer their traditional health care systems like ethnobotanical medicinal treatment rather than the allopathic treatment, as they like to avoid undergoing painful experiences of the later. But among the older people aged over 60 and above who belong to Lodha tribal community under the present study, almost all still prefer and trust using their traditional health care system like ethnobotanical medicinal treatment as the excellent and effective means to cure their ailments over modern medical system. It is also found that tribal women of the Lodha community play a crucial role to preserve and practice traditional knowledge in the indigenous form of health ideology and information. They have less chance to communicate with the outer world and grasp a strong intra-community assemblage. Due to their shy behaviour fail to avail modern treatment access in the centres due to long distances. They use plants in the kitchen garden or medicinal herbs when is to be needed. In West Bengal elderly women among the Lodha tribe with profound indigenous medicinal knowledge, practice these treatments as their profession and cater services in neighbouring villages for exchange of cost of rice, food and to some extent of money. But at present time, deforestation, soil erosion, the fusion of sociocultural networks, and expanding worldview of natives break the rhythm of the integrated golden nexus this ethnomedicinal practice among the Lodha tribal societies is at risk. In the very future, the next generation of the West Bengal Lodha tribe may lose their traditional indigenous medical practices and knowledge.

## CONCLUSION:

Traditional ethnobotanical medicinal practices and as well as ecological knowledge is of significance from a conservation perspective and a trait of societies with the community in resource use exercise. Tribal communities in particular have been playing a vital role in the preservation and management of natural resources within the frame of their indigenous knowledge. According to a report from The World Bank in 2008, having just 5% of the world's population, Indigenous Peoples protect 80% of the planet's biodiversity. They have cultivated indigenous knowledge systems that are nature-based and honour the complex interdependence of all life forms which is the root of success for the sustainable management of their resources and ecosystems in which they live. It can be seen from the observations of the above study made that there are a wide variety of medicinal plants for everyday common ailments and diseases. The medicinal plants play a very vital role in the Lodha tribal society of West Bengal even in this era of modernization and globalization. The traditional use of plants has declined due to the scarcity of species, which is caused by human activities and overgrazing by animals therefore, it has become essential and need of the hour to focus on the conservation of these plants this tribal population has good knowledge about the use of many plants. Traditional ethnobotanical medicinal practices developed from the inception with the origin of socio-cultural life and processes, which is capable to influence on their creator. The system orients as per their specific needs. This age-old tradition is well suited to regional weather and climatic transformation, system provides people with curative services within their financial capacity with their natural resources. Especially for developing and under-developing countries, traditional ethnobotanical medicinal practices as primary healthcare measures are essential in complementary to public health, even in this era of modernization and rapid globalization. Rapid effects of globalization create a gap between different age groups of the same society, natural percolating the inheritance of skills and knowledge. In West Bengal, it is more vulnerable due to the invasion of modern medical practices, deforestation, soil erosion, urbanization etc. Government should take immediate efforts to preserve this traditional knowledge and ethnomedicinal practices. Some civil societies are making efforts towards preserving tribal traditions and the health care system. However, these are insufficient to revive traditions but collective and strong efforts with proper planning are needed as the conservation of medicinal plants and wild relatives of crop plants are vital for the future breeding programme and for maintaining ecological balance as well as sustaining the rich biodiversity of our planet earth.

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