



International Journal of Research Publication and Reviews

Journal homepage: www.ijrpr.com ISSN 2582-7421

Traditional Home Remedy of the Ranglong Tribe: A Study

Dr. Antiarbum Ranglong¹, Dr. Merry Halam²

¹Assistant Professor, Department of Political Science, Maharaja Bir Bikram University, Agartala, Tripura Email: a.ranglong@gmail.com

²Assistant Professor, Department of Philosophy, Handique Girls' College, Guwahati, Assam Email: merryhalam@gmail.com

ABSTRACT

The Ranglong is a microscopic minority tribe found in the Barak Valley of Assam, North Tripura, and the Mamit district of Mizoram. According to G.H. Damant, the Ranglong is categorized with the 'Old Kukis' of the greater Tibeto-Burman Family (G.H. Damant, 1880). The Ranglong language has also been declared by the United Nations Educational, Scientific, and Cultural Organization (UNESCO) as a critically endangered language among the 42 (forty-two) languages in India (Press Information Bureau, Government of India, MHRD, 6th Aug. 2014).

It is generally a known fact that localities of the tribes in northeast India, some five to six decades ago, were inaccessible by vehicles and other modes of modern road communication. On account of the remoteness of habitation of the tribes, access to modern medical facilities was literally out of their reach. In the process of finding alternatives, the tribes living in the rural areas accumulated certain traditional knowledge of home remedies. The paper would attempt to discuss the traditional knowledge system of the Ranglong in regards to traditional medicines and herbal treatments.

Keywords: Indigenous, Knowledge, Tribes, Herbal, Medicines, Remedy, etc.

Introduction:

The advancement in road communication and infrastructure in India in general, and northeast India in particular, especially over the last decade, has significantly changed the demography among the tribes in northeast India. Thousands of families are now direct beneficiaries of modern technology including health and education. However, a few decades ago, the tribes and their areas of settlement in northeast India were generally found in isolated and remote locations. The nature and characteristics of their demographic settlements show the same trend in the entire northeast India, with a negligible variation among them. Hence, most of the remote villages are inaccessible by a modern road communications system. Having access to medical facilities from health centers and hospitals is also a challenge for them on account of the remoteness of their localities. Most of the basic daily household requirements used to be locally arranged, and they are exceptionally self-reliant in that sense. Even in matters of health and medicines, they have been largely dependent on various herbal medicines to remedy various ailments in their day-to-day life.

In the process of trial and error to find a remedy for various ailments in society, the tribes had accumulated significant knowledge in connection with herbal remedies and medicines. They have been using those methods and the process of localized treatment with the use of locally available herbs and plants. The Ranglong tribes had also been using herbal treatments for ailments since time immemorial. Till today, considerable numbers of Ranglong families are still dependent on those home remedies made from locally available herbs for any emergency treatment in the society. The paper would make an attempt to explore the nature of herbal medicines used by the Ranglong tribes and try to highlight how the indigenous knowledge can be institutionalized for the welfare of society.

Who are the Ranglongs?

As per historical records, the term '*Ranglong*' is also concurrently used as '*Langrong*' by various scholars. For example, GH Damant (1880) and GA Grierson (1904) used the term Ranglong, while C.A. Soppitt (1887), TC Hodson (1911), and Colonel J. Shakespear (1912) used the term *Langrong*. At present, they identify themselves with the term '*Ranglong*,' although some of their correlated ethnic tribes, like Mizo, Kuki, etc., are still called '*Langrong*.' GH Damant grouped the Ranglong with 'Old Kukis' of the greater Tibeto-Burman Family (Damant 1880: 237). Some of the ethnic tribes of Old Kukis are Bete, Khelma, Rangkhoh, Aimol, Chiru, Ranglong, etc. In trying to distinguish the two Kukis (old and new), GA Grierson further said, 'Not only do their customs and institutions differ considerably, but their languages are separated by a large group of dialects in the Lushai and Chin Hills. The so-called New Kukis are, so far as we can see, a Chin tribe, most closely related to the inhabitants of the Northern Chin Hills, while the Old Kukis are related to the tribes more to the south' (GA Grierson 1904: 2).

Present settlements of the Ranglong in Assam:

The present settlement of Ranglong in Assam is located in the Barak Valley, comprising the Cachar, Hailakandi, and *Sribhumi* districts. It is ambiguous to establish the fact whether the Ranglongs are still found in the Karbi Anglong district of Assam. However, Calcutta Christian Observer (1836) noted the existence of a Ranglong village in Karbi Anglong. Their settlements in the Barak valley of Assam may be approximately for the last 200 (two hundred) years. It is evident from the names of places in their locality that are being officially recognized to date by the governments of Assam, Tripura, and Mizoram. For instance, there is a river called 'Longai' used as an interstate boundary among the three mentioned Indian federated states. This river connects the Patherkandi revenue circle of the Sribhumi district of Assam, the Panisagar revenue sub-division in north Tripura, and the Mamit revenue district of Mizoram. The term 'Longai' is a diluted version of Ranglong terminology called '*Langkei*' or '*Langkaih*' in the Mizo language. The word 'Langkei' is one of the names of the largest Ranglong clan. Till now, Langkei is the major clan among the Ranglong Community in Assam. Among the native dwellers, the river is still recognized and called 'Langkei' rather than 'Longai'. They have settled down on the bank of this river for hundreds of years, and ultimately, the river got the name cognate with the native dwellers. A few villages are also under the Katlicherra revenue circle of Hailakandi district and the Sonai revenue circle of Cachar district of Assam.

Origin of the use of herbal medicines among the Ranglong tribes:

The history of the belief and worship system among the Ranglongs suggests that they are nature worshipers, commonly known as 'animism.' Hence, the remedy for any illness was initially connected with the religious practices and the bad spirits and supernatural beings. For the remedy of any ailments, the '*Puithiam*' (local religious priest) had played a significant role in the Ranglong society. The '*Puithiam*' would chant some unfamiliar lines to appease the spirit of God in favour of the sick person. In the process of appeasement, direction would be given to the sick family through the '*Puithiam*' to sacrifice birds and animals.

But with time, the role of '*Puithiam*' had been considerably reduced as the chanting and rituals had insignificant results in the process of healing the ailments. Due to the direct connection between the worship and the belief system with nature, the natural vegetations, including flora and fauna of the neighbourhood, have a significant bearing on their daily life. The health benefit of the vegetation around them are well in their knowledge. So, the traditional Ranglong remedy for any problems may be divided into two phases: the rituals where different animals and birds are sacrificed, and the use of herbal medicine found in the localities.

However, with increased awareness and education among the Ranglong, it has been established that traditional religious rituals have no connection with herbal medicines and the healing of ailments. The Ranglong, in general, has shifted its orientation of using herbal medicines without the involvement of '*Puithiam*' or any other religious elements.

Herbal medicines of the Ranglong:

The following are the major herbal medicines being used by the Ranglong from time immemorial.

(i) *Burkhu* (Cold and Cough):

For a home remedy in connection with cold and cough, the Ranglong families had been using herbs like *Tulsi buo* (Basil / *Ocimum sanctum* leaves), *Morto buo* (Pineapple / *Ananas comosus* leaves), and *Sairapal buo* (river euphorbia / *Euphorbia triangularis* leaves). Fresh basil leaves are collected and ground or pounded. The pounded leave is mixed with drinking water and consumed in the form of a raw item. Secondly, seven numbers of fresh leaves of river euphorbia are collected (according to some interpretations, the normal breathing should be temporarily on hold while collecting the leaves). The collected leaves are steamed, and the water content is collected through a hard squeeze of the leaves. The water product is consumed as an herbal medicine for a viral disease, like a cold and a cough.



Figure – 01 Herbal Medicines for Cold and Cough

Source: Collected from the Neighborhood

(ii) *Vonna* (Cholera / common loose motion):

For an emergency response relating to ailments like cholera or common loose motion, the Ranglong families depended on herbs like *Malephak kor* (bark of Coastal Golden Leaf / [Bridelia micrantha](#)), *Damkol rang* (Hiptage / Hiptage benghalensis), and *Luikhate rang* (a plant with vines bitter in taste). The bark of a coastal golden leaf is collected and boiled with drinking water, and the water is taken as medicine. Secondly, the root of the Hiptage plant is collected and boiled with drinking water, and the water is taken as medicine. Thirdly, *Luikhate* vines are collected and boiled with drinking water and consumed as a home remedy for cholera / common loose motion.



Figure – 02 Herbal Medicines for Cholera / common loose motion

(iii) *Anthimte* (Pox):

Pox is a common transmissible disease in rural areas. The Ranglong tribes have also been using different herbs for the treatment of pox. The fresh and green *Uihamani* buo (white Sandalwood / Santalum album leaves) are boiled with drinking water. The boiled water is used both for internal consumption and external purposes, for bathing with the water. Secondly, the fresh and green bark and leaves of *Arsakem kung* ([White-Berry Bush / Flueggea virosa](#) tree) are boiled with drinking water, and the water is used both for consumption and bathing. Thirdly, *Luikhate* vines are also used for the treatment of pox. The collected vines are boiled with drinking water and consumed for a home remedy of pox.



Figure – 03 Herbal Medicines Pox

Source: Collected from the Neighborhood

(iv) *Rukiak* (fracture of Bones):

As the Ranglong tribes are mainly farmers and daily laborers, their main livelihood is on shifting cultivation and the collection of forest-based produce. Hence, the nature of work has placed them in a situation to have maximum accidents, which would involve broken and fractured bones. To remedy any accidents involving bone-related issues, the Ranglong tribe had been using some locally available herbs. Fresh and green *Lepol buo* (*Calotropis gigantea* leaves) are collected and ground/pounded. The pounded leaves are put in the fire or near the burning fire so as to make the components hot and warm. The warm, pounded leaves are then externally applied/bandaged in the areas of fractured bone. Secondly, the fresh or dried bark and leaves from the *Chol kung* (*Bakhar / Markhamia stipulata*) are collected, soaked in water and ground, and pounded. The pounded bark and leaves are applied and bandaged externally in the areas of the fractured bone.



Figure – 04 Herbal Medicines for Fracture of Bones

Source: Collected from the Neighborhood

(v) Apop (Cut / Wounds):

The main tools and equipment that are used in the process of the day-to-day work are centred around some sharp iron products, instruments like knives, a hoe, a chopper knife, etc. Hence, cuts or wounds in any part of the body are a common phenomenon among the Ranglong tribe. For any emergency treatment in connection with cuts and wounds in the physical body, herbal medicines are prepared from the locally available herbs. The fresh and green leaves of *Chiakatharpa rang* (Climbing hempweed / *Mikania scandens*) are collected from the neighbourhood at the earliest. The leaves are ground/pounded, and the pounded leaves are externally applied/bandaged to the cut and wounds of the part of the body. Secondly, the fresh banana tree is cut instantly, and the stem is squeezed with hard pressure. The extract of water from the squeezed banana stem is collected and externally applied to the cuts and wounds. Thirdly, the fresh yam of *Lenglop kung* (Taro plant / Single Plant Eddo *Colocasia Esculenta*) is collected from the neighbourhood at the earliest. The collected yam is ground/pounded and applied/bandaged in the areas of the cut or wounds of the body. The yam is used to remedy cuts or wounds after the emergency treatment is given with the use of climbing hempweed / *Mikania scandens* and water extracted from the squeezed banana stem.



Figure – 05 Herbal Medicines for Cuts / WoundSource: Collected from the Neighborhood

(v) Hana (Toothache):

The Ranglong tribe had been using certain herbs to remedy a toothache-related problem. The root of *Ansa kung* (Toothache plant / *Acmella paniculata*) is ground and pounded. The pounded root is applied to the areas of a toothache. In some cases, the fresh and green root of the toothache plant

It is directly bitten without pounding. Secondly, the fresh and green bark of *Borei pang* (bark of Berry / *Ziziphus mauritiana* tree) is collected and ground/pounded. The pounded bark is then applied to the areas of the toothache. Thirdly, the smoked charcoal of locally manufactured tobacco is also pounded and applied to the areas of the toothache. This remedy is common among adults.



Figure – 06 Herbal Medicines for Toothache

Source: Collected from the Neighborhood

(vi) *Mathin lian* (Jaundice):

Jaundice is also a common disease in the hilly rural areas on account of a lack of awareness of health and hygiene. So, for a home remedy for an ailment like jaundice, locally prepared medicines are consumed. Fresh *Mot vui* (Banana Flowers / *Musa ornata*) are collected either from the forest or the neighborhood, and the flowers are eaten in different styles of cooking. Secondly, fresh *Ai* (Crab), which are locally available, are collected from nearby streams. The collected crabs are boiled with drinking water, and the soup is consumed either with a normal meal or solely. The two home remedies for jaundice are common not only among the Ranglong tribe but also among other communities.



Figure – 07 Herbal Medicines for Jaundice

Source: Collected from the Forest and Rivers

(vii) *Eksen* (Dysentery):

Dysentery is one of the most common diseases in the hilly rural areas. Due to a lack of water facilities during the dry season and unhygienic toilets, viral diseases are rampant, which eventually result in stomach-related issues like dysentery. To remedy the problems of dysentery, the Ranglong tribe had been using various herbal medicines. The green and fresh *Schoolpar buo* (Cape periwinkle / *Catharanthus roseus* leaves) are collected from the neighborhood, and the leaves are boiled with drinking water. The boiled water is then consumed as herbal medicine for the treatment of dysentery. Secondly, the green and fresh *Perup buo* (Indian pennywort / *Centella asiatica* leaves) are collected from the surrounding. The collected leaves are boiled with drinking water, and the water is consumed as herbal medicine. The green leaves are also directly eaten in a raw form by some localities. Thirdly, the fresh *Sobiri buo* (Guava / *Psidium guajava* leaves) are pounded and mixed with drinking water. The water is then consumed as herbal medicine for the treatment of dysentery among the Ranglong tribe.



Figure – 08 Herbal Medicines for Dysentery

Source: Collected from the Neighborhood

(viii) **Akang (Burns):**

The daily life of the tribes in general, and the Ranglong tribe in particular, involves direct contact with fire in the forms of cooking, control of the insects in the evening with smoked fire, or even burning the grasses of the surrounding. So, there are frequent cases of burns in the localities. The Ranglong tribe uses *Rulpui thai* (the preserved fats of Python / Pythonidae) as part of a treatment for cases of burns. The fats are generally applied to the areas of the burns. Secondly, *Utilian Thai* (Tadpole / Anuran larva fats) are also used in the treatment of burns. The fats of a tadpole are applied to the areas of the wounds on account of burns.



Figure – 09 Herbal Medicines for Burns

Source: <https://www.britannica.com/science/tadpole>(ix) **Mitna (common Eye infections):**

Eye infections like conjunctivitis are also common transmissible diseases among the Ranglong tribes, especially during the dry season. The main vine of fresh *Zongmakhe rang* (blue Trumpet vine / *Thunbergia laurifolia*) is collected from the neighborhood, and the collected vines are squeezed. The juice or water extracted from the squeezed vines is externally applied to the eyes. For a child, having eye infection, mother's milk is also used as a home remedy. Alternatively, table salt dissolved in water is also externally applied to the eyes as a home remedy for eye infection.

Figure – 10 Herbal Medicines for Common Eye Infections



Source: Collected from the Neighborhood

Source: <https://www.youtube.com/watch?v=Tk3e-F2EgXg>(x) **Takana (Common Fever):**

Common fevers are being treated at home with various herbal medicines. The most common herbal medicine used is the *Karkung kor* (bark of Noni / *Morinda citrifolia*). The fresh bark of the Noni tree is collected and boiled with drinking water and consumed.

Figure - 11 Herbal Medicines for Common Fever



Source: Collected from the Neighborhood

In addition, there are certain other herbal medicines being used in the daily life of the Ranglong tribe. For instance, herbal medicines in connection with skin infection, boil / Skin Abscess, etc., are also commonly used. They have accumulated this diverse indigenous knowledge through practical experiences over generations.

Conclusion:

Due to the fast development of science and technology, including formal education and research, the indigenous knowledge of the Ranglong tribe has been tremendously affected. The practices and traditions that were handed down by the old generations were basically transferred through an oral mode of transmission. There is a lack of proper documentation, and the indigenous knowledge accumulated over the years has been gradually diluted.

The question that needs to be answered is whether the profound indigenous knowledge of the tribes should be promoted or isolated in its setting. If the argument regarding the tribes' way of life and its direct correlation with nature is accepted, the promotion and sustainability of their age-old practices and traditions need to be taken care of. In that sense, the indigenous herbal medicines and home remedies being used and practiced by the tribes over the years also need to be promoted and protected.

So, institutionalizing the entire process of practicing home remedies and the use of herbal medicines among the Ranglong tribe is vital for sustaining their culture and traditions. If cultures and traditions are accepted as the nation's treasure, the onus of documenting and record keeping needs to be shared among different sections of society. Integrating and formalizing traditional knowledge with formal educational and research institutions may be one of the mechanisms through which it can be sustained and preserved.

References:

1. Damant, G.H. (1880) 'Notes on the locality and Population of the Tribes Dwelling between the Brahmaputra and Ningthi Rivers' in '*Journal of Royal Asiatic Society of Great Britain and Ireland*,' USA: Stanford University.
2. Grierson, G.A. (1904). *Linguistic Survey of India*. New Delhi: Kalpaz Publication.
3. Hodson, T.C. (1911). *The Naga Tribes of Manipur*. UK: Macmillan and Co.
4. Press Information Bureau, Ministry of Human Resource Development (MHRD), Government of India, August 06, 2014. Retrieved on July 09, 2025, <https://www.pib.Gov.in/newsite/PrintRelease.aspx?relid=108207>
5. Soppit, C.A. (1887). *A Short Account of the Kuki-Lushai Tribe on the North-East Frontier*, USA: Harvard University.
6. *The Calcutta Christian Observer* (1836). Vol. – V, Calcutta: Baptist Mission Press, India