



Kolam Tribe : Traditional Healing Practices (With special reference to Yavatmal district of Maharashtra)

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Abstract - The Kolam tribe, originating mainly from the Indian states of Maharashtra and Telangana, is primarily found in districts like Yavatmal, Chandrapur, and Nanded in Maharashtra, with Yavatmal boasting the largest population of Kolams. Their language, Kolami, lacks a script, and they are predominantly of Dravidian descent. Originally inhabiting the Kolammal hills of South India, they later migrated to Vidarbha and Marathwada regions of Maharashtra and adjacent states like Telangana. In Maharashtra, they are classified under Particularly Vulnerable Tribal Groups (PVTG) based on various factors such as culture, language, indigenous knowledge, and population.

The research paper presented here focuses on the traditional medical knowledge of the Kolam tribe in the Yavatmal district of Maharashtra. It delves into an in-depth examination of the medicines utilized by the Kolam tribe for treating various ailments, including the preparation methods and application techniques. Over decades, the Kolam tribe has developed a rich medical system, honing their treatment practices.

This research paper specifically explores the firsthand observations of four doctors/Vaidyas within Kolam villages in the Maregaon tehsil of Yavatmal district. The study draws from detailed accounts of 12 patients who sought treatment from these Vaidyas. Through personal observations and interviews, the article sheds light on the medicinal remedies prescribed by Vaidyas for 16 specific diseases.

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Keywords - Kolam Tribe, Traditional Medicine System, Traditional Healer, Medicinal Plant.

Introduction- In anthropology, the scope of medicine transcends mere treatment methods or cures; it delves into how specific ethnic groups perceive health, illness, and treatment within the context of their traditional knowledge, environment, socio-cultural diversity, and circumstances. Traditional healers employ a blend of organic and inorganic means, integrating both physical and metaphysical elements in treating illnesses. Whereas the medical anthropology offers a holistic perspective on the dynamic interplay of health and

treatment within the broader realm of human sciences. Over the past two decades, medical anthropology has witnessed rapid growth within the broader field of human sciences, marked by the publication of numerous research papers and books. These works predominantly focus on public policy.

The medicinal knowledge within indigenous communities is not merely a collection of remedies; it's a repository of wisdom cultivated over centuries. This experiential knowledge, passed down through generations, serves as the cornerstone of ethno medicine or traditional medicine, predominantly utilized within indigenous communities. The process of formulating medicines, the techniques of their application, and the comprehension of diseases within the social context are intricately intertwined with the study and understanding of indigenous medicinal practices, healthcare, distribution systems, and related topics.

In our society, nearly every community upholds a tradition of knowledge passed down orally from generation to generation. This oral tradition forms the core of a community's identity, setting them apart from others and lending them uniqueness. Indigenous knowledge traditions are deeply rooted in centuries of collective experiences. This ongoing learning process is susceptible to change, evolving gradually over time under the influence of external factors. However, it remains a vital aspect of community identity and confidence, shaping the collective memory and future trajectory of indigenous societies.

But in mainstream communities, there is a common belief that the knowledge, beliefs, customs, etc., of indigenous communities are superstitious, influenced by the supernatural, and barbaric. This misconception casts a shadow over the rich tapestry of indigenous knowledge and traditions, perpetuating negative stereotypes that undermine their contributions to society. As a result, the respect that indigenous knowledge deserves in society is often denied.

Indigenous communities worldwide view nature as the bedrock of their existence, adhering to a fundamental principle: what is taken from nature must be returned. Their knowledge systems are intricately linked to local environments, making them susceptible to harm from environmental changes. Development projects and displacement have severed many communities from their traditional knowledge, impacting not just individuals but also their culture and social fabric. Displacement disrupts social circles, erases memories, and severs connections with local legends and the environment, undermining the foundation upon which families and societies rely. Forcing relocation induces a profound loss of cultural identity, jeopardizing one's sense of security and self-confidence. In essence, a community's knowledge is its source of confidence and resilience.

For centuries, these societies have secured resources for their future generations while also utilizing them. The indigenous way of life has always placed paramount importance on 'socially essential labor.' Such societies have thrived on fostering harmonious relationships with the environment. Unlike displacing inhabitants for their convenience, indigenous communities coexist with nature; trees, plants, and animals continue to inhabit the same space for the benefit of all.

Understanding the fragility of mainstream society's reliance on modern discoveries, technology, and resources is crucial, as even minor disruptions can cause significant upheaval. In contrast, indigenous communities exhibit minimal dependence on these systems, with their existence having little impact on the intricate fabric of indigenous life and activities. It's essential to grasp the art and philosophy of life embedded within indigenous cultures.

For instance, amidst the COVID-19 pandemic, the Kolam community demonstrated resilience. With most Kolam villages situated in remote areas of Maregaon taluka, the virus struggled to penetrate their isolated locations, resulting in no COVID-related deaths. The Naik and Vaidya of the Kolam community played pivotal roles during this time, crafting herbal medicines and distributing them throughout the village twice daily. Emphasizing cleanliness, social distancing, and exercise, they showcased the importance of traditional medicine in safeguarding their community's well-being. This exemplifies how indigenous societies draw upon their traditional knowledge to navigate challenges, underscoring the enduring significance of their practices in modern times.

Despite the wave of globalization sweeping through society, indigenous communities steadfastly endeavour to preserve their traditional knowledge. Practices such as folk songs, customs, medical traditions, beliefs, and environmental conservation efforts serve as pillars in safeguarding their cultural heritage. However, indigenous societies have undergone significant transformations in their way of life and attire, driven primarily by mainstream education, communication mediums, and the widespread adoption of mobile phones.

Due to changes in cultural elements related to indigenous knowledge traditions, there is an impact on knowledge particularly in this era of globalization where no community remains untouched. The pervasive reach of television and mobile phones exemplifies this influence. Take, for example, the Kolam festival 'Ganv Bandhani,' a significant celebration in indigenous communities, typically observed during the summer harvest season. Each village customarily organizes the festival according to its convenience, inviting neighbouring villages to participate. This cultural gathering entails collective living and dining, with dancing, singing, and traditional rituals continuing throughout the night. While rituals and folk songs appear unaffected, modern cultural elements, such as contemporary dance and attire, have been incorporated into the festivities. Given that knowledge and memories evolve across generations, the integration of external elements suggests a continual evolution of cultural activities.

Additionally, there is a need to give importance to indigenous culture because when the new generation goes to mainstream schools or encounters modern technology and society, they realize that their culture, language, and way of life are nowhere reflected in the mainstream social fabric. They are taught the importance of mainstream culture, its history, language, and festivals, while the significance of indigenous culture is often overlooked. Indigenous children do not even get holidays for their community festivals. As a result, there is a risk of indigenous knowledge traditions being undervalued and lost over time as younger generations prioritize mainstream culture and distance themselves from their own cultural heritage.

Methodology : This study was conducted in Yavatmal district in Maharashtra. It mainly focuses on the indigenous medical system in Kolam tribe. The Kolam tribe has been using plants, leave, roots etc. mantras and rituals for healing for many hundreds of years. Traditional healers are individuals who have acquired therapeutic knowledge either through family traditions or by undergoing training under another healer. The objective of this study is to gain an understanding of the medical knowledge system of the Kolam tribe. The study was conducted among traditional healers from the Kolam community residing in the Mareganv taluka of the Yavatmal district in Maharashtra.

During the data collection process, we conducted interviews with both traditional healers and beneficiaries. Traditional healers possess knowledge of medicinal plants. We employed a qualitative research methodology for data collection. All of the traditional healers were members of the Kolam community and had been born and raised in their respective villages. Traditional healers had years of practice and acquired their knowledge either through ancestral heritage or by learning from family members. The role of traditional healers in the treatment of various diseases among tribal communities is of paramount importance. They utilize a wide array of forest plants, weeds, flowers, seeds, and bark in their traditional treatments. The majority of these preparations are administered orally or applied directly to the affected areas. In the studied area, a significant number of people continue to place their faith in traditional knowledge and remedies, which continue to hold a vital place in the lives of these communities.

We also gathered information on the vaidyas (traditional healers), including their age, years of experience, other occupations aside from traditional healing practice, literacy level, and the extent of social acceptance of their healing abilities. The majority of the healers were identified as illiterate. Informed consent was obtained before collecting the information. This research paper is on primary data.

Kolam Tribe- Kolam is a Scheduled Tribe mainly originated from the Indian states of Maharashtra and Telangana. This tribe is commonly found in the Yavatmal, Chandrapur, and Nanded districts of Maharashtra. Yavatmal has the largest number of Kolams. Their dialect is Kolami which does not have a script. The Kolams are predominantly Dravidians. They belong to Proto Australian lineage. Initially, they were inhabited in the Kolammal hills of South India but later migrated to Vidarbha and Marathwada regions of Maharashtra and other adjacent states of present Telangana. [Hajra (1983)] In Maharashtra, based on parameters like culture, language, indigenous knowledge, population, etc., they are listed in Particularly Vulnerable Tribal Groups (PVTG). As per the 2001 census, the Kolam population in Maharashtra was 1, 73,646, which increased to 1, 94,671 in 2011.

Traditional healing system – Traditional knowledge in indigenous communities plays a crucial role in the healthcare system. Traditional medicinal practices function as a lifeline in indigenous areas. Healthcare practitioners within indigenous communities provide services with a sense of commitment while earning their livelihood. The Kolam tribe possesses a rich medical system, and their healers have been practicing medicine for decades.

According to the customs of the Kolam tribe, the role of a healer is considered a service to God, and they are not allowed to accept any form of remuneration. Healers do not turn their medical skills into a means of earning a livelihood. Instead, all the healers within the Kolam tribe engage in agricultural work, labour, or other occupations for their sustenance. For them, it is not a means to earn profits.

The healers of the Kolam tribe acquire medicinal knowledge formally from Guru Purnima to Nag Panchami. In this one-month training period, they learn to identify medicinal plants in the forest, the process of making medicine from them, methods of preserving medicines, mantras, and more. The majority of healers continue the tradition within their families, learning medicinal knowledge from their elders.

While many healers learn the medicinal knowledge within their families, some venture outside to gain additional knowledge from other healers after learning within their families. The period from Guru Purnima to Nag Panchami is chosen for knowledge acquisition because, by this time, the monsoon has arrived, causing

medicinal plants to grow in the forest. In the Yavatmal district, where the temperature is excessively high during summers, the jungles dry up. Recognition of newly grown plants becomes easier after the rains, and during this time, the healers learn how to identify the parts of the plant to be used, the methods of usage, and the diseases they can treat. Learning this process continues for several years, starting with plant identification, followed by medicine preparation according to the disease. Most healers become part of the tradition of learning medicinal knowledge from childhood.

In the Kolam tribe, it is believed that some medicinal plants lose their potency if their names are mentioned or if the process of making medicine from them is disclosed. Healers keep the knowledge of the medicine and the method of preparing it highly confidential.

The Kolam tribe believes that diseases occur only when the deities are displeased. Therefore, collective religious practices are conducted throughout the year, involving the worship of goddesses. This is done to prevent the entry of diseases into the Kolam settlement.

It is believed that cold, cough, and fever are more prevalent during the Pola month. Therefore, Mauli's worship is performed in this month to prevent diseases in the village. Mauli's idol is installed outside the village. Mainly, all the Panch (council members) of the Kolam tribe and all the villagers who can come visit Mauli. There, they bathe Mauli, adorn her, and offer coconuts and flowers. To bathe Mauli, water is mixed with holy basil, turmeric, and neem leaves. Then, the same water is distributed in front of the village square for everyone in the village to drink. This ritual is believed to ward off diseases. During the worship of Mauli, food is prepared for everyone, and all the people gather to eat together.

Many treatments are based on following religious rituals and traditions. One of the interviewed Vaidya explained that cold, cough, and the resulting fever are natural occurrences, often influenced by changes in weather. If the environment is clean, such diseases are less likely. Ailments like epilepsy, kidney stones, haemorrhoids, urinary problems, etc., are physical in nature. Each person's body is unique, and they fight against diseases in different ways. Therefore, keeping someone in the same environment and having them consume the same food and drink does not necessarily lead to the same health outcomes, as people react differently to illnesses.

The entire area of Maregaon tehsil in Yavatmal district, Maharashtra, faces drought conditions where the water level drops significantly during summers. Since there is no irrigation facility available, the local middle-class and lower-middle-class farmers here depend on rainfall for cultivation. Usually, there is only one seasonal crop produced in most of the years. Due to variations in the amount of rainfall, crops often suffer significant losses.

The Kolam tribal community in the Maregaon tehsil of Yavatmal primarily engages in agriculture-related activities. Due to dependence on seasonal rainfall, there is often insufficient provision of food supply for the entire year. Consequently, people resort to agricultural labor and construction-related work. As a result, poverty prevails throughout the region. Poverty becomes a barrier to accessing hospitals, and one major reason for not going to hospitals is the lack of transportation facilities. The absence of adequate transportation infrastructure makes it difficult for people to travel to hospitals unless it is a matter of life or death, and medical treatment is unavailable locally. For a poor individual, going to the hospital implies falling into debt. Since hospitals are located far from the villages, the journey involves significant expenses in terms

of resources and energy. Therefore, people heavily rely on local practitioners, and there is a high level of trust in local healthcare providers.

In the three villages of Khadani, Rohapat, and Vagdhara in the Maregaon tehsil, there is no government hospital anywhere. People either go to Pandharkawada or to the Maregaon tehsil for medical treatment. The distance between these two places is 25 to 30 kilometers, and there is no direct means of transportation available for commuting.

The study concluded that the role of traditional healers for the treatment of various diseases among the tribes is crucial. They use many different forest plants, weeds, flowers, seeds and bark in their traditional treatment. Majority of the preparations are taken orally and applied to the diseases. In the studied area, many people still have faith in traditional knowledge and remedies which play an important role in the life of these communities. There is a need for broad-level work in this area and also there is a need to document the oral knowledge of traditional healers as the traditional knowledge is becoming less or extinct from generation to generation.

Result: The results of the study are shown in Table 1 and comprise 16 species of ethno medicinal plants were documented. For each species botanical/scientific name, local name, parts used, methods of preparation, and ailments treated are provided. All these plants found in Yavatmal districts. Kolam tribal traditional healers are using these plants to cure diseases related to Jaundice, malaria, gastric, loose motion, snake bite, Bone displacement and impotency, weakness, snake bites, etc.

Details of disease, preparation method and doses and scientific/ botanical name.

Sr. no.	Disease	Illness Name / Local (Marathi) in kolami	material used to make medicine	Preparation for medicine
1	Jaundice	kavid / kaur	Bark of the kout tree (Feronialimonia), Mango tree (Mangifera indica), Arduli tree (Adathoavasica), Tamarind tree and Refined oil	The bark of the kout tree, the mango tree, Arduli tree and the tamarind tree are mixed with refined oil and grind it well, then filter it with a clean cloth and extract its juice. Adult (big spoon) and children (small spoon) are given its juice thrice a day.

2	Headache	Dok Dukhna/ Tallo Yaka	Iron knife	Traditional Healer does not make any medicine for headache. He moves the knife over the forehead in crossway and move it around whole head and treat some particular veins by his expertise method of pressing. The whole process takes place in holy room where he makes beneficiary to sit there.
3	Chest pain	Chhatimadhy edukhane/ chhativayya	Bark of Pattin (unknown)	Bark of Pattin is soaked in water for half hour. Then the strained water is consumed before meal in morning and evening.
4	leg pain/swelling	Pay dukhne/ getta vayya	Bark of Salai (andak) (Boswelliaserrata) and padsa tree (Butea monosperma)	Bark of salai and padsa is grinded into fine paste. It Applied on swelling of pain area in morning, afternoon and evening)
5	Milk the mother	Waikug paad Oda	Dahundi's bark (unknown), sesame (Notul) (Sesamum indicum), jaggari (Belli), Coconut (Khobra) (Cocos nucifera)	Dahundi's bark, sesame (Notul), jaggari (Belli) and Coconut (Khobra) are mixed together in the form of small bolls like of laddus. Any time three to four times a day.
6	impotency		padsa phool (Butea monosperma), crystal sugar and milk	The flowers of Palash are collected and dried. After that powder is prepared. Crystal sugar is added to this powder. This powder is consumed in the morning and evening by mixing about one teaspoon in a glass of milk.
7	Bone displacement	Gotte Ghasril Cine	Khandu Chakka (Ehretia laevis Roxb) Powder and Ghorpod Oil (monitor lizard's oil).	Traditional Healer place the bone back in original position with his expertise technique and then khandu chakka powder is applied on it. Followed by massaging with ghorpod (monitor lizard) oil.

8	Fracture	Haddi Tuttle	Wheat bread coated with ghee, Khandu Chakka (Ehretialaevis Roxb) powder, Bamboo wood and Ghorpod oil (monitor lizard).	Firstly khanduchakka's powder (bark of Khandu Chakka is rubbed on a stone to make a powder) is applied on fractured part then wheat bread coated with ghee is placed over it. Then it is bandaged. After that bamboo stick is kept over it and again it is finally tied. Wound is cured by Khandu Chakka and roti reduces swelling.
9	Spraining	Payal Lachne/	Ghorpod oil(monitor lizard)	Ghorpod (monitor lizard) an amphibian animal its flesh on cooking release oil, that oil is used for massage.
10	Cough	khokla / Dag, Dabba	dhahunda	dhahunda's bark is powdered on the grinding stone. Take a spoonful of the powder with water. three times a day
11	cold/cold	Seer Kumbha	Basil leaves,(ocimum sanctum) Adulsa leaves, (Justiciaadhatoda) and Honey	Tulsi leaves and Adoorsa leaves are crushed and extract their juice. This mixture is licked with honey in intervals. Lick the medicine 5 to 6 times a day.
12	fever	Taap / Vesa	Bark of Bel tree(Bengal quince, wood apple)(Aeglemarmelos, Bark of Bhosa (Aare) tree, Water	The bark of the bel tree, the bark of the Bhosa (Aarey) tree both are crushed and made into powder. Boil the powder in one liter of water until the water reduces to one cup. The decoction has to be consumed thrice a day. Half cup is consumed in more and the remaining half cup of decoction inn taken in two intervals separately.
13	Dysuria, burning in urination.	ubba gola	Crystal sugar (mishri), half a liter cow's milk , leaves of the Nikhada tree and half a liter of curd	Crystal sugar (mishri) finely powdered which is mixed with one litre cow's milk and nikhadatrees's leaves. Grind altogether and squeeze it through cloth. This strained liquid is mixed with curd and consumed. Consume it thrice a day. Follow this process for three day. it gives relief.
14	snake bite	SaapChawane / Palm Nekam	Khandu Chakka(Ehretialaevi	On snake bite, water is first given to drink after reciting the mantra. The decoction is

		(Paw Pardala) Palm Korakti	sRoxb), Ishwar fruit, water and bark of Nikhda	formed from bark of Khandu Chakka, Ishwar fruit and clean running water (Water is to be taken from the same direction in which the water is flowing, do not take water from the opposite direction.) The nikharda leave is immersed in water, and then the same bark is placed over snak bite infected area later on the same leave is moved from upper direction to lover direction continuously. It helps in envenoming. The decoction is given to the patient to drink.
15	stomach/k idney stone	Mudkhada / Khedi Fasilatin	root of Nikhda, crystal sugar (Mishri), One liter curd, Sulfur of Ragi money.	Fine powder of roots of Nikhda, crystal sugar is mixed with sulphur dust. Then mix it well in one liter of curd. (on rubbing ragi coins one stone gives sulphur dust). This medicine has to be finished within a day.
16	Piles	Mudvyaadh/ Mur dukkam, Pisare	Salai leaves, Cumin and Curd (Salla)	One fist of the leaves of Salai, one pinch cumin seeds and curd all are mixed and pest is formed. thrice a day with water (empty stomach or after meals)

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