



## **Study on COVID 19 and its Impact on Tribes of India Jharkhand**

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**To start with, Viruses, Bacteria does not discriminate, they attack on the health of humans and only immunity is health hygiene and social life style of the community, which if it is shaped beyond the prevalent laid down oppressive forms of casteism, classism, elitism, patriarchy , will make a sustainable thriving society in the times of Corona suffering. It has been seen that the vulnerable section of the community has been largely protected from the pandemic not only because of state and central government efforts but it also owed a lot to the thriving societal cultural ethos, values as prevalent.**

**We have tried to disseminate the reasons for same in the Tribal world of Jharkhand , which has been largely not affected by the Pandemic.**

India with a present population of around 1.35 billion has a proportionate higher risk of spread of the infection through the community transmission of COVID-19, not only because of the high population density in metropolitan but also due to large economically downtrodden citizens along with poor infrastructure of health and risk mitigation measures . In addition to it the social intermingling and high inter family and inter social dependence of the Indian culture has made our nation vulnerable to the pandemic.

As we know that the first case of COVID-19 in India was detected on 30<sup>th</sup> January, 2020 in the state of Kerala. Thereafter, the disease was spotted in other major highly densified city of India. It is important to note that the population density of the Kerala state is about 859 people per square kilometers, three times the national average. Kerala is one of the densest States in the country and it recorded a decadal population growth of + 4.86% ([http://www.kerenvis.nic.in/Database/DEMOGRAPHY\\_814.aspx](http://www.kerenvis.nic.in/Database/DEMOGRAPHY_814.aspx)). Even though, the state has highly densified population, yet it has been able to beat the exponential trend of disease, mainly due to human development and related indices, which it occupies prime position among the Indian States.

On the other hand, an important trend that has been also observed that the states being not ranked high in the human development and related indices have also been able to overcome the Corona Impact. In this context, a case study on impact of the Corona on the states dominated by high proportion of the Tribal Population has been tried to capture in our study.

### **I. Focus States:**

1. Jharkhand
2. Bihar
3. Odisha
4. Madhya Pradesh

## II. Research Method used in this Study:

The anthropological research method and traditional techniques of data collection has been undertaken. Data has been collected at the grassroots level and also the indigenous social and cultural practices followed has been imbibed in the research module alike as under:

- a. Life Style of Tribes
- b. Herbs & Medicinal Plant
- c. Social & Economic Status of the Individual
- d. Community Involvement and diatribes

## III. Jharkhand: A Brief Profile

Jharkhand ("The land of forest"), created on 15 November 2000, from what was previously the southern half of Bihar. The state shares its border with the states of Bihar to the north, Uttar Pradesh to the northwest, Chhattisgarh to the west, Odisha to the south and West Bengal to the east. It has an area of 79,710 km<sup>2</sup> (30,778 sq mi). It is the 15th largest state by area, and the 14th largest by population. Hindi is the official language of the state. The city of Ranchi is its capital and Dumka its sub capital. The state is known for its waterfalls, hills and holy places; Baidyanath Dham, Parasnath and Rajrappa are major religious sites.



**A. State wise Scheduled Tribe population and decadal change by residence**

State wise Scheduled Tribe population and decadal change by residence : Census 2011				
State	Scheduled Tribe population 2011			
	Total	Rural	Urban	Decadal Change 2001-2011- Total
<b>Bihar</b>	1,336,573	1,270,851	65,722	76.2
<b>Jharkhand</b>	8,645,042	7,868,150	776,892	22
<b>Madhya Pradesh</b>	15,316,784	14,276,874	1,039,910	25.2
<b>Odisha</b>	9,590,756	8,994,967	595,789	17.7

Source Census 2011

**B. List of Tribe with more than 5 lakh of population and their usual place of Habitation**

Sr. No	Usual Place of Habitation (State Name)	Tribe Name (as per Census 2001)
1	Jharkhand	Gond , Santal , Oraon, Munda , Khond, Ho, Bhumij.

Source Census 2001

**C. List of Tribe with more than 5 lakh of population and their usual place of habitation as per Census 2011:**

Sr. No	Tribe Name	Population			Usual Place of Habitation (State Name)
		Total	Male	Female	
1	Gond, Arakh, Arrakh, Agaria, Asur, Badi Maria, Bada Maria, Bhatola, Bhimma, Bhuta, Koilabhuta, Koliabhuti, Bhar, Bisonhorn Maria, Chota Maria, Dandami Maria, Dhuru, Dhurwa, Dhoba, Dhulia, Dorla, Gaiki, Gatta, Gatti, Gaita, Gond Gowari, Hill Maria, Kandra, Kalanga, Khatola, Koitar, Koya, Khirwar, Khirwara,	13,256,928	6,614,476	6,642,452	Bihar, West Bengal, <b>Jharkhand</b> , Maharashtra, Chhattisgarh, Madhya Pradesh, Uttar Pradesh, Odisha, Karnataka, Andhra Pradesh, Gujarat

	Kucha Maria, Kuchaki Maria, Madia, Maria, Mana, Mannewar, Moghya, Mogia, Monghya, Mudia, Muria, Nagarchi, Nagwanshi, Ojha, Raj, Sonjhari, Jhareka, Thatia, Thotya, Wade Maria, Vade Maria, Daroi, Rajgond, Koitur				
2	Santhal	6,570,807	3,273,258	3,297,549	Bihar, Tripura, West Bengal, <b>Jharkhand</b> , Odisha
3	Oraon, Oraon, Dhangad, Dhangar, Uran, Dhanka	3,682,992	1,839,800	1,843,192	West Bengal, Bihar, Maharashtra, Odisha, <b>Jharkhand</b> , Chhattisgarh, Madhya Pradesh
4	Munda, Munda Lohara, Munda Mahalis, Nagabanshi Munda, Oriya Munda, Patar, Kaur	2,203,006	1,102,471	1,100,535	West Bengal, Chhattisgarh, Madhya Pradesh, Tripura, Odisha, Bihar, <b>Jharkhand</b>
5	Khond, Kond, Kandha, Nanguli Kandha, Sitha Kandha, Kondh, Kui, Buda Kondh, Bura Kandha, Desia Kandha, Dungaria Kondh, Kutia Kandha, Kandha Gauda, Muli Kondh, Malua Kondh, Pengo Kandha, Raja Kondh, Raj Khond	1,628,501	791,092	837,409	Bihar, West Bengal, <b>Jharkhand</b> , Odisha
6	Ho	1,033,095	511,347	521,748	Bihar, West Bengal, <b>Jharkhand</b> , Odisha
7	Kawar, Kanwar, Kaur, Cherwa, Rathia, Tanwar, Chattri	946,672	471,484	475,188	Bihar, <b>Jharkhand</b> , Chhattisgarh, Odisha, Madhya Pradesh, Maharashtra
8	Bhumij, Teli Bhumij, Haladipokhria Bhumij, Haladi Pokharia Bhumija, Desi Bhumij, Desia Bhumij, Tamararia Bhumij	869,653	436,267	433,386	West Bengal, <b>Jharkhand</b> , Odisha
9	Kharwar, Khairwar (in the districts of Deoria, Balia, Ghazipur, Varanasi and Sonbhadra)	557,996	287,057	270,939	Bihar, West Bengal, <b>Jharkhand</b> , Odisha, Uttar Pradesh
10	Baiga	552,495	277,245	275,250	Bihar, West Bengal, <b>Jharkhand</b> , Odisha, Chhattisgarh, Madhya Pradesh, Maharashtra, Uttar Pradesh

Source : Census 2011

**D. Jharkhand : List of STs with details in terms of Households, Population sex ratio, child sex ratio, Literacy (M+F)), Worker Participation Rate(Wpr), Main worker and Marginal Worker**

Jharkhand	Total Population	Sex Ratio	Child Sex Ratio	Literacy-Total(M+F)	Wpr	Main Worker	Marginal Worker
All Schedule Tribes	86,45,042	1003	976	57.1	46.9	46.2	53.8

Source Census 2011:

**E. Percentage Distribution of Total Workers by Sex:**

Jharkhand	All Population		SC		ST	
	Male	Female	Male	Female	Male	Female
	64.32	35.68	51.27	48.73	55.64	44.36

Source: Census 2011

**F. Health Care:**

The National Family Health Survey 2015-16 (NFHS-4), the fourth in the NFHS series, provides information on population, health and nutrition for Jharkhand State is as under:

Population and Household Profile	NFHS-4 (2015-16)			NFHS-3 (2005-06)
	Urban	Rural	Total	Total
Sex ratio of the total population (females per 1,000 males)	967	1,014	1,002	1,022
Households with electricity (%)	96.7	74.4	80.1	40.2
Households with an improved drinking-water source <sup>1</sup> (%)	88.6	74.0	77.8	57.0
Households using improved sanitation facility <sup>2</sup> (%)	59.0	12.4	24.4	15.1
Households using clean fuel for cooking <sup>3</sup> (%)	55.4	6.3	18.9	10.5
Households with any usual member covered by a health scheme or health insurance (%)	13.7	13.2	13.3	4.6

Source: National Family Health Survey 2015-16 (NFHS-4)

**IV. Phases of Lockdown ( Corona):**

**A. Ist Phase : 25<sup>th</sup> March 2020 to 14<sup>th</sup> April 2020 -21 days.**

**B. IInd Phase: 15<sup>th</sup> April 2020 to 03<sup>rd</sup> May 2020-19 days**

**C. IIIrd Phase: 04 May 2020 to 17 May 2020- 12 days**

**D. IVth Phase: 18 May 2020 to 31<sup>st</sup> May 2020- 13 days.**



## V. Tribal Life: A Glimpse:





## VI. Tribal Society : Impact of Corona

Tribes are demographically and economically are globally classified in following two categories:

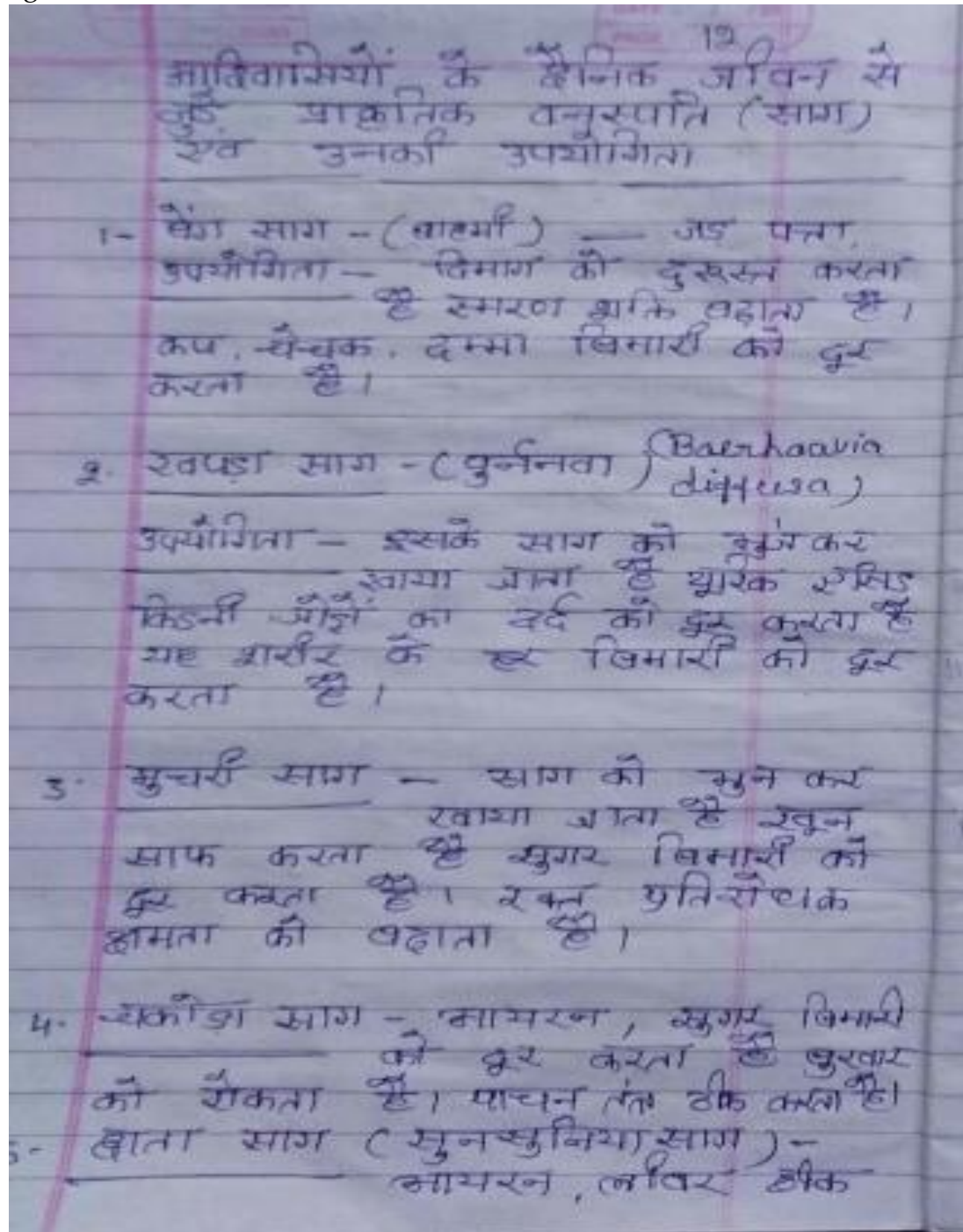
1. Settled tribes : Tribes belonging to this category are land owning tribes and are economically well off in comparison to other tribes , Santhal, Oraon, Munda etc are in this category.
2. Primitive, Dwindling, Vulnerable and Nomadic tribes: Considering economy and demography the other category of tribes are primitive, dwindling, vulnerable and nomadic tribes. The tribes in this group are Sauria Paharia, Birhor, Mal Paharia.

Till date none of the tribes of either group, has been reported infected. Whosoever have been reported from these tribal groups are the nontribal living in the tribal dominated districts of these states and are nontribal and urban centric. Now the question arises why so? The answer to is this is; they are living close to nature and they eat what they grow. They generally cook food themselves and eat simple food. Their dress is also very simple, male wears a dhoti made by the members of tribal groups .Women generally wear a saree covering their body. The clothes are washed each day by ashes of the hearth. Most of the traditional dances, songs and songs are played in such a way that social distance is maintained without any extra effort, it is followed traditionally in a routine matter. There is a traditional tribal institution known as *dhumkuria* and *pelarpa* where children after the age of five to the age of attaining adolescent, learn about their tradition and culture. **The thrust of Tribal tradition and culture is on self-reliant.**

1. **Traditional Deity:** CORANA is being considered as anger of “**Bonga**”, **traditional deity**. So they are performing appeasing rituals individually and is waiting for lifting of lock down to perform appeasing rituals at village and tribe level. It is widely felt in the tribal society that after performing tribe level appeasing rituals, the corana will vanish from their society.
2. **Health:** Tribal health facility in Jharkhand are limited in rural areas. In the absence of this, tribal society mainly depends mostly on *Pahan (Pandit,)* who is considered to be a knowledgeable person of herbs, roots and fruits, to cure the ailment.

### 3. Plants(Medicinal/Herbs) in Tribal Life:

The plants used by the tribes in the Jharkhand state in day to day life and their usefulness in keeping the healthy diet and also raising the immunity system to fight against the disease are as under :



करता है। पुरवार जाने नहीं देता है। बान्हडा को दूर करता है।

6- चिमटी साग - भायरन, बोंख की गंठानी को चढ़ता है।

7- कटई साग (सखी साग) - भायरन, गोंस बनने नहीं देता है। लीवर ठीक करता है।

8- कांदा साग - भायरन लीवर को ठीक करता है।

9- मट्ठा साग - भायरन, खट्टे के लिए, पेट साफ करता है।

10- साख साग - लीवर को ठीक करता है।

11- सिलवर साग - भायरन, लीवर को ठीक करता है।

12- मधुवा साग - भायरन, पेट को गरमा दूर करता है।

13- कैना साग - लीवर को ठीक करता है। भायरन।

14- चड़ा गोमा - पुरुष शक्तिवर्धक दवा।

- 15- कौवा साग - शक्ति बढ़ाकर को है  
महिलाओं की पुनर्जनन शक्ति  
को बढ़ाता है महिलाओं को दुबली  
कमी को बढ़ाता है।
- 16- केला साग - आयरन, स्वेत पदर  
को दूर करता है। स्तन  
बढ़ाता है।
- 17- लाल साग - आयरन, स्तन बढ़ाता  
है शक्तिवर्धक
- 18- हरा साग - आयरन, स्तन बढ़ाता  
है शक्तिवर्धक
- 19- कौनार साग - आयरन, लीवर ठीक करता  
है।
- 20- पुच्छल साग - लीवर, गैस, पतला पसता  
ठीक करता है।
- 21- चना साग - पेट साफ करता है।  
आयरन, लीवर ठीक करता है।
- 22- तीन पतिया साग - आयरन, लीवर ठीक  
करता है।
- 23- नदी साग - आयरन, पेट साफ करता है।
- 24- कौवा साग - आयरन
- 25- दाल साग - आयरन

Source : Shobha Kujur

One of the Social Scientist at Chatra Mrs. Dr. Shobha Kujur has enlisted the list of SAAG ( leaf vegetables) which has played role in developing the immunity. Further, it



was informed that, the *Chakora Saag* taken by the tribes are important in preventing the fever and also can protect them from viral fever like corona.

**Our study found that the indigenous medicinal practices** have played an important role in sustaining the Tribal population from protecting them from Corona Virus. One of the Common prevalent tribal medicinal drink is **KADHA**. It is prepared in similar to what generally is prepared in the heartlands but the composition of the Tribal Khadha are more enriched and also provides superior immunity. The list of the herbs/plant in preparing **KADHA** is as follows:

- i. *Arjun Treebark (chchal)*
- ii. *Leaf of Bakas*
- iii. *Laung*
- iv. *Leaf of Amrud*
- v. *Adrakh*
- vi. *Giloay*
- vii. *Dalchini*
- viii. *Choti ilaychi*
- ix. *Tulsi patta*
- x. *Seej patta*
- xi. *Rengani.leaf of bhent*
- xii. *Gur*
- xiii. *Lemon grass*

#### **Method to Prepare the Drink**

Take 100 gram of each and boil it in 7 liter fresh drinking water on low flame till it become half liter then in the morning sip it like tea for 2 or 3 days and it will work in the body as preventive and curative medicine.



**Mangru Bhagat Kantatola , Bero Block , District Ranchi drinking Khada**

4. **Change in Play and Games:** It has been reported and observed that due to lockdown there is little to play any game or sing song or dance in Akhra. Children and youth are also unable to play in *Dhhomkuriya*.
5. **Economic life:** Economic activities are completely stopped due to lock down at district and block level. The indigenous items such as fruit, vegetable, fish , Chickens could not be sold in the local haats/markets. *Economically tribals in general are in distress and requires special attention of the Government.*



**Haat in Chakradharpur (Jharkhand)- Change in Nature of Market { Impact on the behavior of the people (seller/buyer)}**

6. **World View :** Tribals are very rich in terms of their world view but since the lockdown they are unable to meet and discuss with their relatives and kinsmen which has greatly affected their world view and ethos.



7. **Role of civil society :** Civil society has to play a great role in making them aware of the disease, sanitation cleanliness habits, foods, drinking water etc ,it is expected that after lockdown is lifted civil society will come to play their role.
8. **Social Impact:** Tribals are unable to visit their traditional institutions which has brought change in their life style; say for example a Tanabhagat just after getting ready use to host their flad ; used to have morning prayer in group but in lockdown period they are confined to their huts/home. Generally, they used to have a common group programme for the day but now they have individual programme.
  - Birth of a child is most welcome in the family. Since last 3 decades or so birth use to take place in primary health care centres/hospital but now in corona pandemic, birth has been taking place in home. Group functions are restricted and rituals are performed among close family members. Relatives are not being called or they could not be able to attend the rituals due to restricted movements.
  - Chatti (child naming ceremony) Marriage Ceremony, Death Ritual are changed to a great extent.

#### **VII. Positive Social Impact of Corona:**

- Art and Craft of the Family got boost.
- Strengthening of family traditions as all member of the family are living together.
- Austerity in Family functions such as marriage, chatti, etc
- Dependence on family for livelihood due to limited impact of outside world.

#### **VIII. Governance in Corona Times:**

It has been observed that the in the federal structure of governance, both the state and centre has worked proactively and in synergy to large extent in mitigating the vagaries of corona in the state of Jharkhand. The state government has been running the *Dal Bhat Yojana* since August, 2011 which was extended to the block head quarters of the state, wherein in Rs.5 Daal Bhaat and soyabean and chickpea curry are being served to people below the poverty line. The USP of the scheme is that *Dal Bhat* meals are much cheaper, easier to digest and

comparatively healthy. It may sound something funny to people living in the urban centers but it is fact that, at Hotels/ *dhaaba*, the minimum price for a full meal would be around Rs 30 to 50 Rs. whereas at the canteen, one may avail full meal for Rs 5 or for higher hunger for Rs.10.

The state government has taken number of initiatives like **Jharkhand bazar application** wherein shop to register them in system that will use by public to find the shop, **Jharkhand Sahayata App** for creating data base and providing relief to the migrant labourers , **Covid Management Complaint Management System**, Sanitisation of public places, Conversion of public places ( school/colleges/guest houseI in quartine centre), **Establishing Trauma Centres/Psycho-social teams**, **Driver Safety Guide** for the Prevention of Corona Virus (COVID-19)" etc. The state government in the month of April 2020 has started **Mukhyamantri Didhi Khicdi Yojana** in all the **4562 Panchayats** to overcome the impact of Corona Pandemic and has given the responsibility to **Sakhi Manadals** at the Panachayat to run the Didi Kitchen. This programme is in addition to the existing Dal Bhat Yojana.

A lot is being done through ICT about the importance of maintaining social distance, washing hands regularly, using masks and sanitizing the workplace, homes, vehicle, avoiding consumption of gutkha, paan, cigarettes/bidis etc. Albeit, all these initiatives have impact and are majorly technological driven, yet it has been observed that the emotional inputs are missing to large extent. These emotional input may be in the form of promotion of indigenous plants/ herbs/ values/ethos/traditions among the mass.

Use of local (political, religious and opinion) leaders in prevention of Corona is widely accepted, yet a model should be developed wherein the Panchayats leaders to provide the local prevalent healthy cleanliness/sanitary practices. The views at the grassroot can be easily implemented among the local areas as it is already in the existing lifestyle of the people. What is needed is a little more focus on it. This may also help in overcoming the social stigma and will also develop the inter community trust and will ease the social tensions which is being widely prevalent in the clan/caste driven, Tribal and Indian society.

It is a time to change. Switzerland-based International Union for Conservation of Nature (IUCN) in 2019 National Biodiversity Conference in Dublin had emphasized that *“As we lose species, we also lose the very foundation of our existence... And yes, if we get biodiversity right, we will have a much greater chance of ensuring world peace.”*

**THE CULTURAL MORES, LIFE STYLE, WORLD VIEW AND ETHOS DID NOT ALLOW THEM TO HAVE A FEAR PSYCHOSIS FROM CORONA OR COVID 19, HOWEVER COUNSELLING IS REQUIRED TO SUSTAIN MENTAL HEALTH OF THE TRIBALS.**

Promoting Indigenous will make us more self sufficient and self reliant. A focus approach in promoting traditional medicines like KHADHA as elaborated above is the need of hour to fight against deadly pandemics.

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