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Assamese Cultural Narratives of Health, Illness and Healing

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Abstract

This present study was undertaken to understand the existing Assamese society beliefs and practices in relation to various illnesses such as jaundice and chicken pox. A purposive or judgmental sampling technique was adopted to select the subjects for the study. Data was collected from elderly subjects who had good knowledge about indigenous beliefs and practices of health and illnesses with the age group for the study considered at 50 and above for both genders. From the study, we find that most of the people strongly believed that health related issues can be cured with all the traditional form of practices or home remedies. The study found numerous believes and practices where some are safe and have scientific validation while some do not. We also find that these practices have been prevalent since time immemorial in the Assamese society, to the point that people tend to seek solutions from local 'medicinemen' rather than visit modern doctors. Though some practices have scientific validation, some are purely based on superstitious beliefs and might cause more harm than good if there are not enough interventions to remove ignorance among the people still adhering to such practices.

Keywords: Traditional, Beliefs, Assamese

Introduction

Culture is the collective knowledge, beliefs, values, attitudes, and beliefs acquired by a group over generations through individual and group efforts. It is a combination of elements that shape a people's way of life and affect their thoughts, actions, and possessions. Culture is cultivated behaviour, a totality of learning experiences that are socially transmitted. Health, on the other hand, indicates a state of complete emotional and physical well-being, encompassing physical, mental, and social well-being. Healthcare is essential for maintaining this optimal state of health, as it supports an individual's function in society and provides the means to lead a full life. A person's health is a valuable resource that supports their ability to perform in society. It emphasises social and personal resources in addition to physical abilities. Health is influenced by various factors including environment, support networks, location, finances, and lifestyle. Culture plays a significant role in shaping our perception of the world and experiences. Ethnic and racial minorities may not fully utilize preventive health services, such as vaccinations. Therefore, cultural factors must be considered in health promotional studies to ensure inclusivity and effective health promotion.

Assam, located in the north-eastern part of India, is home to a diverse population of Assamese, a mix of



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Mongolian, Indo-Burmese, Indo-Aryan, and Iranian origins. The Assamese people, known as "Axomiya" or "Assamese" are known for their unique traditions, culture, dress, languages, and exotic way of life. These customs and traditions are widely accepted and strictly followed by the Assamese, with major tribes such as Bodo, Miri, and Rabha. However, the Assamese face challenges in health conception, disease, etiology, status, health-seeking behaviour, and healthcare system changes. Rural areas often rely on diviners or traditional medicine men, leading to irrational beliefs and inadequate healthcare. Folk medicine, intertwined with magic, religion, and traditional social values, serves multiple cognitive functions and involves various magico-religious activities during treatment. These factors contribute to the health and nutritional problems of the Assamese people, requiring special attention.

Assam is home to numerous communicable diseases, with cultural beliefs and treatment practices varying across different regions, tribes, and areas. This paper focuses on two specific diseases, chickenpox and jaundice, and health issues for women, menstruation, and pregnancy. Chickenpox is a highly contagious viral infection caused by the varicella-zoster virus, causing itchy red blisters and fever. Jaundice, a term for a yellowish tinge to the skin and eyes, is a common symptom, characterized by pale stools, dark urine, and itchiness. Both diseases are considered childhood rites of passage and can be treated with medication.

Pregnancy and menstruation are complex health issues influenced by various aspects such as biology, psychology, society, and religion. In Assamese culture, women's experiences of menstruation are influenced by their cultural beliefs and practices. During menstruation, women maintain cleanliness, avoid food preparation, and sleep on the floor. During pregnancy, they avoid places like graveyards and funerals, believing they may indirectly affect the baby and mother. Health, disease, and hygiene status are indicators of human development, and a community's health culture is determined by its physical environment. Every culture, no matter how simple or sophisticated, has its own customs and beliefs about illnesses. Therefore, with this background, we aim to understand the existing beliefs and practices which are related to such illnesses like jaundice and chicken pox and to understand the existing beliefs and practices related to health-related issues like pregnancy and menstruation.

Research Methodology

The study is based on a semi-structured interview. The appropriate data for this study were collected from villages near the Dibrugarh district of Assam. The areas are entirely inhibited by the local Assamese people of Dibrugarh belonging to the different tribes of Assam. The purposive sampling method was used for selecting the subjects for the study. The data were collected from elderly subjects of the locality, who had good knowledge about indigenous beliefs and practices of health and illnesses with the age group for the study considered at 50 and above for both genders. A total of 10 subjects were taken for the study including 4 males and 6 females. Before the proceedings of the interview, a rapport formation was built to understand the insight of the belief systems about the practices of health and illness in Assamese society. In the collection of data, major semi-structured interview questions were kept in mind while collecting the essential data. All questions were constructed for all the subjects except the last question which was left only for female subjects:

- 1. What do you think about the illnesses like jaundice and chicken pox?
- 2. Has anyone in your family ever suffered from such an illness?
- 3. What role do you think the indigenous medical practitioners and folk medicines were useful in the treatment?



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- 4. What are the other different ways that you have used to cure the diseases apart from the normally applied medicines or doctoral prescribed medicines?
- 5. Which one is more preferable the normally prescribed medicines by the doctors or traditional practices for the treatment?
- 6. During pregnancy and menstruation what type of rituals do you follow in your culture? And what are your viewpoints about the effects of such practices?

Table 1 Descriptions of the subjects of the study

Descriptions of the subjects of the study:				
Case 1	Subject 1 is a male, retired teacher in his early 60's			
Case 2	Subject 2 is 54-year-old female, housewife			
Case 3	Subject 3 is a 49-year-old female, housewife			
Case 4	Subject 4 is 50-year-old female, housewife			
Case 5	Subject 5 is 55-year-old, male, banker			
Case 6	Subject 6 is 57-year-old female, housewife			
Case 7	Subject 7 is a 55-year-old female, housewife			
Case 8	Subject 8 is a 50-year-old female, housewife			
Case 9	Subject 9 is a 56-year-old male, teacher			
Case 10	Subject 10 is 54-year-old, female, housewife			

Findings and discussions

Culture significantly influences illness diagnosis, treatment, and prognosis. Assamese society faces challenges in health conception, disease etiology, health status, health-seeking behavior, healthcare system changes, and health needs in India and Assam. However, cultural traditions and beliefs may differ, as some illnesses like jaundice and pox are treated differently in indigenous practices, highlighting the importance of understanding and respecting cultural differences in healthcare systems. We included different person belonging to different communities such as Mishing, Ahom, Deori and Kachari since they were found to be residing in the locality. Though they belonged to different communities but there are a lot of similarities of their practicing methods in treatment of health and illness among them.

We found out from our discussions that, chicken pox is associated with 'Mata' or 'Devi'. But the rules to be followed by those affected by it as per tradition are the same as what modern science says. So, it cannot be called as a myth. As per tradition 'Mata' gets cured by itself in a week. During these diseases, they follow some rules such as having no medicines but getting treatment for symptoms with Paracetamol and some anti-viral medicines, isolated, hanging neem leaves and Elephant Apple 'Outenga' outside the house, sleeping on neem leaves preferably on the floor, having food with no spice or oil, no meats and salts, using of white clothing, not taking bath and keeping the room filled with fumes of incenses. They also believed in worshiping the goddess 'Xitola', offering flowers, and betel



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nuts during the period of illness. There are some restrictions according to their customs while taking medicines during such illnesses. The sufferer or the family member has to offer 'Dokhina' or 'Tupula' to the medicine men while asking for the medicine. During pox, they cleanse by praying in the evening and morning and wearing only white clothes as they believe that pox is caused when a goddess possesses the bodies of humans. So, to satisfy the goddess, the person having the disease eats or do certain things according to their wishes and avoids meat and red-coloured items.

According to the subjects, the diseases yellow fever or jaundice are caused by some supernatural forces or 'evil eye' which can be prevented by a priest or spiritual healers and 'medicine men'. During jaundice, they prepare a natural medicine by pounding five or six numbers of 'xilikha' mixed with 'jaggery' for curing jaundice and go to spiritual healers which gives some 'magical water' and 'tabiz' for curing jaundice. In curing jaundice, they use some kind of herbal medicine made of 'Jomlakhuti', and papaya and sugarcane are used as medicine. A glass of sugarcane juice is also prescribed twice to be taken daily for the purpose. Boiled raw papaya is also said to be good for curing the disease (Deka & Nath, 2015).

During the period of menstruation, women are not allowed to cook anything for the first 3 days, not get involved in any kind of spiritual activities for 7 days, go outside of the home during this period, and are restricted from prayers and touching holy books because of the underlying myth that women are considered to be impure during this period. It is also believed that menstruation women are unsanitary and dirty, therefore the food they cook or handle may get tainted. In Deori tradition, after some years of getting puberty, they perform a ritual known as 'Bukut kapur bondha'; when a girl gets her first puberty there is a ritual of celebrating 'Tuloni biya' or 'Shanti biya'. When a girl reaches puberty, she is sequestered in a room with a specially made bedcovering covered in hay for a period of time. For seven days, she would not be permitted to touch anything or be touched by anyone. She would not be allowed to consume any solid cooked food for the first three days, and on the fourth day, she would have a bath with 'Mah halodi'. At the location of the girl's bath, a banana tree, representing the girl's make-believe spouse, would be fixed. Following the bath, she would be required to don the customary mekhela chador. Women of all ages would participate in this ceremony and bestow blessings onto the girl who was about to menstruate.

During the time of pregnancy food habits are maintained and pregnant women are not allowed to go outside their homes alone at night. They avoid eating 'Hukati' or dry fish powder for the belief that the menstrual blood will smell bad and avoid curd or any sour things like lemon and pineapple. Menstruating and pregnant women also follow some restrictions, such as carrying a knife and wearing metallic ornaments, mustard seeds, and garlic for the belief that it can protect them from any evil spirits or 'bahira bostu /deu'. During the 5 months of pregnancy, women in the Assamese society follow a ritual called 'ponsamrit khuwa', where the ritual is conducted in the maternal home of the pregnant women. Middle-aged women would partake in this ritual and make dishes with items such as honey, milk, butter, sugar and rice and offer to the pregnant women.

The study also found that most of the minor health-related issues i.e. viral fever or sickness (cold, cough, etc.) were treated with some indigenous medication. For instance, the used of warm mustard oil mixed with garlic can be massage on treating the patient suffering from viral fever. There are many traditionally practiced forms of treatment for such minor health and illness. Apart from the minor health related issues, some of the illness like the jaundice or chicken pox is also treated in the Assamese customs. The traditionally practiced method of treatment has a strong influence on the healing process of the people and they believe that such treatment can give them recovery from the illness. Diseases like



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pox, yellow fever or jaundice, diarrhoea and dysentery are caused by some supernatural force (Bhuyan, 2015). Previous studies discussed the reason being it due to the of lack of awareness and transmissions of beliefs among generations.

Even those with higher education are nevertheless impacted by their friends, family, religious leaders, and other individuals. As a matter of fact, most external signs of illness are thought to be nature's means of purging the body of harmful substances that have accumulated within it. They continue to hold the views of self-healing and minimising the use of pharmaceuticals. Apart from the fixed belief systems among the people, we also found out that some subjects believe that the scientifically-based medications are preferable than the indigenous medicines. We found that they are following such practices because of the societal norms and the belief among the people since ancient times.

Table 2 Scientific reason behind the beliefs and practices regarding certain illnesses

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Illness	Belief	Practice	Scientific reason
Jaundice	It is caused by evil spirit as the sufferer's skin becomes yellowish.	Local healers give them tabiz or magical water. Herbs like jomlakhuti juice of sugarcane mixture of jaggery with xilikha powder is consumed.	Skin turns yellowish during the disease because of the presence of bilirubin in the body.
Pox	It is caused by possessing of one's body by goddess named as <i>xitola ai</i> . Elephant apple and neem leaves are kept in the outdoors of the house.	Worshiping to goddess by offering <i>manoni</i> or <i>xukoni</i> . The fragrance of the elephant apple and neem are said to prevent the evil spirit. Usage of white clothes during the period of illness, avoids oily foods and meat.	The fragrance of the elephant apple and neem can kill the varicella viruses that causes pox. Cleanliness helps immediate cure of the illness. During the illness, the liver functions of the sufferer gets weak so it affects digestion.

Table 3 Scientific reason behind the beliefs and practices regarding health issues of women

Health issues	Belief	Practice	Scientific reason
Menstruation	Impure body	Avoid entering kitchen or cooking food, eating pineapple, touching holy books and sharing of food.	During menstruation, the body emits some specific small or ray, which turns preserved food bad. Therefore, women are not allowed to touch food. There is no scientific test has shown menstruation as the reason for spoilage of any food. The enzyme bromelain in pineapple may cause bleeding (Harsoliya et al., 2011).
Pregnancy	Evil spirit can easily possess the body of women during pregnancy.	Avoids places like funerals and graveyard. carrying garlic and mustard seeds while going out in the evening.	of different diseases which may



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Limitations of analysis

Since this study is solely dependent on input from the chosen ten subjects, the opinions of these ten subjects constitute the basis for the study's discussions. This study is not comprehensive, and findings may vary depending on the opinions of the participants. It may also be subject to biassed beliefs based on participant knowledge which may or may not resonate with the general public.

Policy implications

Respecting cultural traditions and beliefs cannot be incorrect, but if it is followed without consideration for the potential risks associated with delaying obtaining assistance, things may turn out differently. If blindly adhering to traditional behavioural patterns has negative effects on patients, it could not be justified. Most of the beliefs and practices that have been followed by the people do not have any scientific validation, but some other beliefs and practices have some scientific logic behind them. The bio medicines that are provided by the local healers have some values; it can cure illnesses akin to that of allopathic medicines. The new generations are not very much interested in the indigenous way of treating diseases, they not even concerned about the values of medicinal herbal plants. There is a need for research about different bio-remedies and healing processes that help to cure illnesses and also for regarding beliefs system in health-related issues like pregnancy and menstruation to create awareness among the rural population. There is also a need for creating education programs among rural communities regarding the implications of these age-old practices. So, growing this interest in the use of folk medicinal plant and different healing practices can lead to scientifically researching the logic behind it.

Conclusion

As per the study we find that most of the people strongly believed that health related issues can be cured with all the traditional form of practices or home remedies. The study found numerous believes and practices where some are safe and have scientific validation while some do not. We also find that these practices have been prevalent since time immemorial in the Assamese society, to the point that people tend to seek solutions from local 'medicinemen' rather than visit modern doctors. Though some practices have scientific validation, some are purely based on superstitious beliefs and might cause more harm than good if there are not enough interventions to remove ignorance among the people still adhering to such practices.

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