

Health and Hygiene of the Nahs of Arunachal Pradesh

Birinchi K. Medhi¹ and Bhabatosh Paul²

1. Department of Anthropology, Gauhati University, Guwahati 781 014, Assam, India

2. District Research Office, Daporigo, Arunachal Pradesh, India

KEYWORDS Healthm Nah; Arunachal Pradesh; malignant spirit; modern medicine

ABSTRACT The Nahs live in Taksing Circle of Upper Subansiri district, a remotest area of Arunachal Pradesh. Here communication system is too bad to maintain regular relation with outer world. The people live here principally with their traditional health care practices under the given ecological condition. The modern medicine system suddenly made its presence at this area through the Government Institutions. No doubt the people are traditional, but they accepted the system. Traditional concepts of health continues; at the same time they have grabbed new system without offering conspicuous resistance. The present paper tries to portray how the impinging modern medicine system adjusts and reacts with the traditional one in the Nah heritage.

INTRODUCTION

The Nah is a less known tribe encapsulated in the remote area of Upper Subansiri District of Arunachal Pradesh, sparsely distributed over nine villages. They cling to their traditional socio-economic system even today. Time has passed and they came into the influence of modern system. Such influence hardly makes any conspicuous impact on their pristine way of life. Their traditional beliefs and practices continue to exist to tackle their health and hygiene problems, but the modern influence that made its appearance towards the early part of sixty's with the installation of Indian Administrative Institutions and Defense System to guard the international border. What more is that the introduction of rice through Indian Administration has brought about a change in their dietary pattern. Previously they were dependent on barley (*amm*), maize (*tapu*), millet (*tami*), vegetables (*tanam*), tubers and roots, etc. Now a days they use rice (*achin*) as staple food, though they do not produce it. They obtained rice from the Central Purchasing Organization on cash payment. This organization collects the requirement of the people of that area and dropped monthly those from a helicopter.

In fact they have become a part of modern economic system. Along with rice modern medicine system has infiltrated into their traditional system of health and hygiene. This paper examines under this newly introduced system how their traditional system of health and hygiene reacts.

THE ETHNOGRAPHIC SITUATION

The Nah is one of the minor tribal group of Arunachal Pradesh concentrating at the Taksing Circle of Upper Subansiri District bordering by Tibet in the North. The climate of the area is cold and lofty mountain peaks are covered with snow almost throughout the year. As per 1991 census, there are 121 occupied residential houses having 733 people, out of which 441 are male and 292 are female. Literate persons among the Nahs are 118, out of which 108 are male and only 10 are female. Some Nahs are also inhabiting in Lung areas of Tibet.

The Nah society is patrilineal and descent, inheritance, authority, succession and residence after marriage are traced through male line. Traditionally they are used to live in joint families, however elementary family is also not uncommon among them. Their society is divided into four clans, viz., Chedar, Hafi, Hari and Tisi. All the Nahs inhabiting at Lung area of Tibet belong to Hafi clan.

The Nahs are traditionally pile dwellers. The houses are constructed on slightly raised platforms with locally available jungle products, mainly bamboo and wood. The roof and side walls are constructed with wooden planks. However, sometimes sidewalls are made out of split bamboo. Generally a residential unit is occupied by two to three consanguineous families, each having separate hearths under the same roof. Monogamy is the prescribed rule of marriage though polygyny also widely practised by them. Child marriage is an age old practice

and bride price is obligatory in the Nah society.

The Nahs profess a local version of Buddhism. There is an old Buddhist monastery (*gumpa*) in the Taksing Head Quarter. The monastery is devoid of Buddhist priest (*lama*). The Nahs believe in numerous gods and deities which are not integral part of the Buddhism. The local priest (*nyibu*) conducts all the household and community rituals including divination. The priest is the indispensable part of Nah heritage. He provides traditional medicine and performs different rituals as protective and curative measures of ailments when situation arises.

Agriculture is the mainstay of the Nahs. They practised *jhum* (*rikpe*) cultivation and produce barely, millet, maize, etc. in the *jham* field. Different vegetable are produced in kitchen gardens and apples in the orchards. Fishing and hunting are common pursuits among them. Selling of musk obtained from hunted musk deer is a chief source of income among the Nahs.

BIRTH, PUBERTY AND DEATH

A parturient mother does all the household chores till she does not feel any physical problem. No special food is given to her. Such a woman is tabooed to eat ghee and meat of sacrificed animal. It is believed that if she eats meat of sacrificed animal, she is supposed to give birth a deform baby. She is prohibited to eat in a burnt house or in a household where a death occurs recently. If she takes food in such situations, expected baby may be a block headed one. She should not change her position during sleep. If she breaches the taboo, the unborn baby may change its position to create obstacle in easy delivery.

Generally child birth take place inside the dwelling house. However, in case of any complicacy which could not be solved by traditional manner, they seek help from the physician of nearby health unit. Till the third day of the birth, all the villagers are tabooed to work in *jhum* field. They believe, violation of this taboo may bring disaster like landslide in the area.

The mother is not allowed to go outside the house till the umbilical cord of the new born dried up. During that period if the new born suffers from any physical problem, then they believe, it is due to the violation of taboo by some consanguineal or affinal kin of the child. To get rid of such distress both maternal and paternal kins of the child sprinkle cold water over the baby. If the mother's breast milk is not sufficient

or she suffers from releasing of breast milk, then her brother comes in hunting attire and touches her breast with one end of his bow. It is believed that such performance can evade the tricks of malignant spirit and the mother acquires the capacity of easy flow of sufficient breast milk.

The Nah children are nourished with a special type of food made by mixing of barley, ghee and milk. This item is given to a child till he or she uses to accept the common food taken by the adult members of the family. Naming of the child can be done by any kin. After coining a particular name if the child cries severely, then another name is selected rejecting the previous one.

Among the Nah girls, twelve to fourteen years is the general age for attending puberty, though it may happen earlier also. A girl who just attains puberty, has to stay in a demarcated area, generally in the right side of the fire place, which is situated near the main entrance of the dwelling house. She is not permitted to take part in any ritual. She is also not allowed to go where from persons started their venture for hunting. She is tabooed to take meat of wild or sacrificed animal. The period of pollution is lifted when flow of blood totally stopped through a purificatory bath of the girl.

Dead body is either buried or kept in a packed box piled over with stones. They observe a set of strict taboos and elaborate purificatory rites in connection with a death. According to the Nahs, excepting the death during old age, all the deaths are unnatural which are caused by malevolent spirits, They believe that death during pregnancy is caused by the spirit *Gir-sinyo*, hanging by the *Sinyo*, attack of tiger or bear resulting death by the *Alo*, death occurs owing to falling by the *Dogong*, drowning by the *Dogong-burg*, death through burning by the *Dogong-taling*, and so on.

FOOD, DRINK AND NARCOTICS

Food and drinks play an important role in maintaining good health. Food habit of a community mainly depend upon the resources available in the area and the produced items. Further depending upon the socio-cultural setup, food item vary from society to society.

Rice is the staple food of the Nahs. Boil vegetables, boil and roasted meat and fish and a few chillies are taken with rice, Traditional Nah food is devoid of oil and spices. According to the Nahs food like barely, maize, millet,

vegetables, potato (*tami*), indigenous papad (*marmi*), milk (*ome*) meat (*adin*), ghee (*suyap*), etc. are rich in food value and a person should include these items in everyday's menu. The general food of the Nahs is rich in food value. However, they pay less attention to the cleanliness of their food. Roasted meat is taken without thoroughly cleaning it. They generally do not cover their food which is invariably contaminated by house flies and they consume such food without slightest hesitation. Generally utensils where food is served to one is used to serve another without cleaning.

Meat and fish are integral part of their diet. Meat of tiger (*patte*), wolf (*sacha*), cat (*ahale*), jungle cat (*sarch*), dog (*ekk*), fox (*tasu*), crow (*poa*), leopard (*korte*), etc. are tabooed food for the Nahs. Moreover, the females are restricted from eating the meat of rat (*kobung*), monkey (*sibi*), bat (*sajo*), snow cat (*sokong-ponang*), etc.

Country liquor (*apo*) is taken by all the Nahs irrespective of age and sex at any time of day and night. They prepare beer from rice, barley, maize, millet and local papad. They also consume tea, curd and milk. The Nahs chew a locally available tobacco (*guye*) leaves which is also smoked with the help of home made pipes (*tungdung*).

HYGIENE AND SANITATION

The Nahs are more concerned about the malignant spirits than hygiene and sanitation. The house sewage water invariably accumulated adjacent to the residential unit which serve as favourable breeding ground of house flies and mosquitos. The whole Taksing area is in dearth of proper drainage system. Domesticated pigs make the situation worst by digging the homestead and other available land and making the area filthy. The latrines they construct do not possess pits and human excreta is consumed by the domesticated pigs and dogs. Rain water carries human excreta along with household debris to almost everywhere of the locality. Stool of pigs seen scattered in each nook and corner. The children defecate anywhere they like. Domesticated dogs very often clean off the stool from their body while licking for their food. Pigsties, water accumulated spots, latrines, heaps of debris, etc. emit stinking odour at any time of the year, particularly during the monsoon. The Nah habitat is full of mosquitos and house flies.

To meet day-to-day necessities they use the water of nearest stream situated at a distance of

about half a kilometer. Because of the cold climate of the habitat, the people get accustomed to drink boil water. The old and the children rarely take bath. The young people generally take bath twice to thrice in a month. They rarely use body soaps. The old people do not cut their nails or brass their teeth. Traditionally the male folk kept long hair which were brassed forward over the forehead and tied into knots. Now-a-days all the males trimmed their hair at irregular intervals. They rarely wash their garbs and household clothes.

DISEASE AND TREATMENT

The Nah perception of healthy person is one who can do all types of work generally done by the males/females in their society and is not impaired by any serious ailment. As per the information available with the Ninth Assam Battalion Health Unit at Taksing, the common ailments of the Nahs are fever, dysentery, cold and cough, abdominal pain, headache, problems of worm, skin disease, etc. The nursing assistant of the Government Health Unit is of opinion that most of the ailment occur among them because of their pattern of living and poor hygienic condition of the locality. Besides the aforesaid ailments malaria, paralysis, leprosy, goiter, pox, etc. are also prevalent among them.

The Nahs believe that all the diseases and ailments are caused by malevolent spirits who seek opportunities to do harm to the human beings. The local priest detects the spirit responsible for a particular ailment of the person through divination and prescribes the remedy accordingly. Generally he performs ritual to propitiate the responsible spirit. Side by side sometimes he offers some indigenous medicines to the ailing person.

The Nahs believe that the world is full of extravagant and erring spirits who rejoice over bringing disease, misery and distress to the people. Table 1 shows the common ailments, responsible spirits, traditional treatment, etc. prevalent in the Nah society.

Anyone who does not get positive result through the traditional curative system approaches a trained physician. The priest treats the people psychologically while the doctors treat them physically. Traditional system of treatment involves more expenditure because sacrifice of different animals is part and parcel in that system.

Table 1: Common ailments, responsible spirits and traditional remedy among the Nahs of Taksing

S. No.	Ailment		Responsible Spirit	Traditional remedy
	English Name	Local Name		
1.	Headache	Demopdumchi	Hipuidumtak	(a) Dry skin of jungle cat is rubbed on the forehead of the ailing. (b) The priest sacrifices a fowl, a pig or a cow in a household ritual.
2.	Stomach pain	Kipoachi	Digna	(a) Coptis and musk are taken with lukewarm water. (b) The priest chants spells over a fowl's egg, soil, etc. and throws those in a distant place. The priest sacrifices a sheep through a household ritual.
3.	Paralysis	Lipalakilu	Singotap	(a) The priest sacrifices a fowl through a ritual. (b) A mixture of bile of beer, musk and coptis is taken with lukewarm water.
4.	Fever	Doliachi	Lirunyrn	(a) A fowl, a pig or a cow is sacrificed through a household ritual. (b) Different medicines are given by the priest for local application according to the nature of ailment.
5.	Pain in eye	Nickachi	Hipuidumtak	(a) A ritual is performed in the Buddhist style offering milk, ghee, etc. and hanging flags. (b) Priest performs ritual where a pig or a cow is sacrificed.
6.	Leprosy	Alotiyit	Alo	(a) A mixture of bile of beer, musk and coptis is taken with lukewarm water. (b) A fowl, a pig or a cow is sacrificed by the priest in a household ritual.
7.	Dysentery	Eching	Kenghidign	

Therefore, the poor people approach the doctor first for treatment to avoid the expenditure incurred in traditional treatment. New diseases have made appearance among the Nahs in which traditional system fails to serve effectively. As a result modern medicine system come into existence in Nah heritage.

HEALTH UNITS AND THEIR SERVICES

The Nahs visit the health unit administrated by the Ninth Assam Battalion of Taksing when necessity arise. During the working hours of the health unit, long queue of local people is seen outside the unit. Although this health unit is established basically to serve the members of the battalion only, yet the unit renders its service to the local people also. During the period of epidemic in the locality the health unit becomes more active. As per the information available in the health unit, the number of ailing person increases during the period of March to April. The Nahs express their satisfaction on the service of this unit.

However, the Nahs are reluctant to go to the Government Health Unit of Taksing in their need. They complain that this unit is devoid of qualified

doctor and only a nursing assistant is there to serve the people. Owing to the lack of medicine and other accessories this health unit is now-a-days becomes functionless.

If one is in need of further medical requirement which is not available in the locality, with the help of local administration he or she is taken to the Government Dispensary of Daporijo, the headquarter of the district. If situation arises, the patient is carried to the Dibrugarh Medical College of Assam by availing Government helicopter. The district medical authority undertakes different medical programmes like immunization of children, family planning, etc. among the people. However, not a single Nah has adopted any measure of family planning.

CONCLUSION

The Nah brought under study are away from so called modern influence once. The very geographical factors help them to maintain their traditional economy, social system and religious pattern almost intact. This is not by the choice, but out of the compulsion imposed by the geography. Communication system even today

is not well enough to make the entry of modern ideas into their society. The change which has come among them is in form of introduction of modern medicine system from outside. Although the people are traditional, yet they are not stubborn to accept the changes. As a result of that we find the unhesitating acceptance of modern medicine system by them which does not come in confrontation with traditional values. The old and new exist side by side. They try to tackle the situation by adopting traditional methods and practices. They are not hesitant to take resort to modern medicine system at the same time in need. They are circumspective. We generally expect from such a people living away from modern influence and concept of modern medicine system that they should resist the modern system, but in practice it is seen that modern medicine system works well among this traditional people.

ACKNOWLEDGEMENT

The authors acknowledge kind help of Mr. Gyaju Chadir, Mr. Tache Chadir, Mr. Eop Chadir,

Mr. Takiab, Mr. Togong Chadir, the local priest, Captain R.K. Mallik, Ninth Assam Battalion, Mr. J.K. Bora, Nursing Assistant, Government Health Unit, Taksing, and to all those good souls of the Nah villages who cooperated immensely to carry out the field-work.

REFERENCES

- Basu, Amitava. 1990. "Anthropological Approach to Tribal Health" in *Tribal Demography and Development in North-east India*. Buddhadeb Chaudhury (ed.) Delhi: Inter India.
- Chaudhury, Buddhadeb (ed.) 1986. *Tribal Health: Socio-Cultural Dimensions*, New Delhi: Inter India
- Dubois, R. J. 1969. *Man, Medicine and Environment*. New York: New American Library.
- Medhi, Birinchi K. 1994. "Health Culture in a Kaibarta Village." *Bulletin, Department of Anthropology, Gauhati University*, VIII: 39-45.
- Medhi, Birinchi K. 1995. "Ethnomedicine: A Study among the Mishings in a Rural Context." *Bulletin, Department of Anthropology, Gauhati University*, IX: 61-68.
- Medhi, Birinchi K. and Rameeza Hasan. 2002. 'Folk Medicine among the Garos of North-East India', in *Tribal Studies of North-East India*, S. Sengupta (ed). New Delhi: Mittal Publications.