

Traditional Medicine and Healing Practices among the Rabhas of Assam

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ABSTRACT

The Rabhas of Assam, an indigenous community with a distinct cultural identity, possess a vast repository of traditional knowledge and folk traditions that have been transmitted orally through generations. Their indigenous knowledge encompasses diverse aspects such as agriculture, ethno-medicine, food processing, weaving, folklore, and rituals, which reflect a harmonious relationship with nature and community life. These traditions not only serve as practical guides for daily living but also embody the Rabhas' worldview, values and spiritual beliefs. However, the forces of modernization, migration, and cultural assimilation have led to gradual erosion of these age-old practices. Their traditional healing system is based on close observation of nature, the use of locally available herbs, and the spiritual beliefs that health and illness are interconnected with the balance between humans, nature, and the supernatural. This paper explores the various traditional medicine and healing practices among the Rabhas, focusing on herbal remedies, spiritual healing and the role of traditional healers such as Ojha and Bej. Its highlight how different plant species are used for curing common ailments like fever, cough, stomach disorders, and snakebites, as well as for maintain overall well-being. This study also examines the rituals, taboos, and transmission of healing knowledge through the oral traditions within the community. Despite their effectiveness and cultural significance, these indigenous healing practices are declining due to modernization, lack of documentation, and the growing influence of modern medicine. The preservation of indigenous knowledge and folk traditions among the Rabhas if therefore essential to maintain their cultural heritage and to promote sustainable development rooted in local wisdom.

Keywords: Herbs, tradition, community, medicine, indigenous, knowledge

Traditional medicine remains an essential source of health care for many rural and indigenous communities North East India. The Rabhas an indigenous ethnic group primarily found in various districts in Assam, particularly in Goalpara, Kamrup, Kokrajhar, Baska, etc. These practices are interwoven with ritual life, belief systems and social structures. Despite their cultural and practical value, Rabha traditional healing systems face pressures from rapid socio-economic change, environmental degradation, and the dominance of biomedicine. Traditional healing among the Rabhas primarily invokes using local plant, often prepared as pastes, extracts, or inhalation. The World Health Organization defines traditional medicine as "the sum total of the knowledge, skills, and practices based on the theories, beliefs, and experiences indigenous to different cultures, whether explicable or not,

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used in the maintenance of health as well as in the prevention, diagnosis, improvement or treatment of physical and mental illness".

The concept of health is dynamic and complex. The World Health Organization (WHO) defined health as "a state of complete physical, mental and social well-being and merely the absence of disease or infirmity. 'Health is a concept has different meaning for different people. There is no any universal definition of health (Tylor, 2008 –p5 frog). People and cultures, groups and societies interpret the concept of the health in different ways. According to Keleher and MacDougall (2008). 'Understanding health is built upon broad notions of health that recognize the range of social, economic and environmental factors that contributes to health (P. 6-7 cactus). Health as a dynamic concept is complex whose definition varies with the context in which term is used. There are different perspective to understand health. Health can be understood on biological approach, biomedical approach, behavioural approach, spiritual approach, health education approach, public health approach.

The traditional medical practitioner or traditional healer can be defined as "someone who is recognized by the community in which he lives as competent to provide health care by using vegetable, animal and mineral substances and certain other methods based on the social, cultural and religious backgrounds as well as the prevailing knowledge, attitudes and beliefs regarding physical, mental and social well-being and the causation of disease and disability in the community" (Shankar. R., et al., 2012). The health status of a community is dependent on multi-dimensional factors. In tribal communities, this is associated with beliefs, customs and practices. It is influenced by their way of life, including their social and economic conditions, nutrition and living conditions, dietary habits, housing, education, child rearing practices, socio-religious beliefs, taboos, superstitions, etc. The herbs used by Rabha tribe are considered as important aspects of their traditional health care system and some are proved to be useful medicine for major diseases like jaundice, piles, etc. Though the Rabhas do not know botanical terms and inner components of herbs, they have knowledge about the efficacy of certain herbs curable properties. Different plant materials like leaf, sap, stem, bark, roots, etc., are used for curing diseases. Cures are prepared using plant materials for different kind of ailments like fever, headache, pain in joint and other parts of body, gum and teeth problem, diarrhea, dysentery, stomach pain, cough and cold, skin diseases, eye infection, cuts and injuries, measles, chicken pox and small pox, jaundice, etc. Common villagers too have traditional knowledge for cures and many health cures are based on home remedies. With regard to aging and related health care practices, the Rabhas consider old age as a natural process in life. As people in the community grow old, they realize the necessity to take good care of one self. The Rabhas believe that mental illness is a result of several factors. Many believe that certain condition may be due to super natural or spiritual causes. Hence for the psychological well-being of the individuals, they follow certain health practices like performance of certain rituals to propitiate the spirits.

The Rabha people believe that diseases like pox, scabies, viral fever, jaundice, malaria are communicable diseases and there is some health practices related to communicable diseases. When confronted with an illness, the people first try to understand the symptoms and then diagnosis the illness. In the villages, when a person falls ill due to any type of disease, the members of the family observe him/her for 2/3 days, and if the person does not get well, they consult doctors or healers depending on the symptoms of the disease.

The health practices related to a woman's health cycle includes puberty, menstruation, pregnancy and birth related health issues, abortion, miscarriage, menopause, etc. Earlier the

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puberty of girls among the Rabhas, was not regarded as a special event. But at present, the Pati Rabhas and Dahuri Rabhas observe similar rituals of puberty observed by the caste Assamese population. Women follow certain taboos related to menstruation. At present, women are also becoming aware of the use of sanitary napkins. According to Rabha women, irregular menstrual pattern around the age group above 45 is a common sign of menopause. They also tell that women undergo mood swings during the time of menopause.

The Rabhas regard pregnancy as a natural progression of life. When a married woman's menstruation stops for more than a month then she is presumed to be pregnant. Few taboos are followed by pregnant women among the Rabha. They also perform certain rituals for the welfare of the pregnant woman and the unborn fetus. The adherence of traditional beliefs and practices are considered beneficial for the woman. The birth of the baby generally takes place at home by traditional or local dhai. But nowadays, women go to the hospitals for giving birth to their babies. The health of the new mother and new baby are priorities for the family and as such the family where the birth has taken place as well as the women of the village takes particular interest in their well being. The pregnant woman or mother is fed with a healthy diet which is considered an integral part of antenatal health care practices among Rabhas. They also perform certain Puja. Traditionally, the new born baby is given a bath with lukewarm water and massaged with coconut or mustard oil. A few drops of local rice beer are dropped in the mouth of the infant as they believe that rice beer prevents the baby from the onslaught of many diseases.

The incidence of diseases and illness is as old as mankind. Before the advent of modern medical practices, people have been using means to keep illness at bay and also ways to cure diseases. Observation and use of ancient wisdom created a wealth of knowledge which has been passed from generation to generation in all societies. Likewise among the Rabhas, the traditional health care knowledge and practices are still in vogue. Specialists, elderly men and women have been providing their knowledge and skills for curing diseases of villagers. Traditional health practitioners are present in some villages inhabited by the Rabhas, They consist of midwives and traditional healers.

Traditional healers are generally divided into two categories – those that serve the role of diviner-diagnostician (or diviner-mediums) and those who are healers (or herbalists).⁶ The diviner provides a diagnosis usually through spiritual means, while the herbalist then chooses and applies relevant remedies.⁷ Colonial powers and structures have played an overpowering role in changing the cultural landscape and practices of traditional healers and their patients and have disrupted the distinction between diviners and herbalists. The Jolles brothers write that various pieces of legislation (such as the Witchcraft Suppression Act of 1957 and the Witchcraft Suppression Amendment Act of 1970) explicitly prohibited the diviners from practicing their trade – as early as 1891 in colonial Natal.⁸ With the additional encroachment of 'Western' health care systems in South Africa on the practice and livelihood of traditional healers, the roles of the diviner and herbalist have become increasingly blurred.⁹ Traditional healers are thus undergoing a strange process of mutation as the continent modernizes.¹⁰ In addition, I would argue that the AIDS epidemic constitutes a considerable part of the modernising forces that constantly challenge and change traditional

Objectives

1. To document component of traditional medicine and healing practices among the Rabhas
2. To identify local healers and their roles in community health.

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3. To record medicinal plants and their uses in traditional treatments and to study the cultural beliefs related to health and illness.

REVIEW OF LITERATURE

Ethno-medical systems across North East India are well documented in broad terms, they are characteristically plant-based, embedded in ritual, and transmitted orally. Among the Rabhas show strong links between ecological knowledge and healing practices.

METHODOLOGY

A qualitative ethnographic ethno-graphic approach combining participant observation, unstructured interviews and field herbarium work. Field work was conducted in selected Rabha inhabited village in the districts of Kamrup and Goalpara districts of Assam. Participants included traditional healers both male and female practitioners, elderly knowledge holders, women involved in household healthcare, and younger community members.

Data Collection Methods

- i. Unstructured interviews with 40 -50 informants focusing on illness categories, plant remedies, preparation techniques, ritual practices and knowledge transmission.
- ii. Participant observation during healing ceremonies and daily medicinal plant collection.
- iii. Walk-and-talk (soil/plant walks) with healers to identify species used, specimens were recorded with local names and photographed.

Findings

1. Categories of Healers and Their Roles
 - i. Herbalists / Folk Practitioners: often family-based knowledge holders who prepare decoctions, poultices, and pastes for common ailments (fevers, diarrhea, coughs, wounds). They rely primarily on plants and material from surrounding landscapes.
 - ii. Ritual Specialists (e. g. Oja/Bej Loacl name) These practitioners combine diagnostics (dream signs, divination, pulse-like observations) with spirits-invoking rituals. They address illnesses, attributed to spiritual causes (soul-loss ancestor displeasure, spirits affections)

Divination is wide spread among the Rabhas. In their day to day life, they believe the influence of magical power. When doubt or face any difficulty or danger, it is desired by these people that must be warned by diviner about their future. Publicly organized divination is very common among the Rabhas. The Rabhas have their female diviner(*deodhanis*), female religious dancer who perform shamanistic dances and make pronouncements in a state of trance on the occasion of *Marai Puja*, often the priests themselves perform the function of foretelling the future with the help of omens and auguries.

When one falls ill the *Oja* or *Ojani* is called in for treatment. The Oja or Ojani at first observes the patient and feels his pulse and diagnoses the cause of the disease, which spirit is responsible for the illness. After determining the spirit responsible, he or she performs some magical rites for the remedy of the ailment.

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Methods of treatment

| S.L. No. | Plant / seeds, leaves | Name of methods | Methods of treatments |
|----------|------------------------|-----------------|---|
| 1 | Muster oil | Tel Jhara | Determination of cause of the ailment and its remedy by charmed muster oil |
| 2 | Muster seeds | Behar Jhara | Determination of cause of the ailment and its remedy by charmed muster seeds. |
| 3 | Water and basil leaves | Pani Jhara | A little water in a brass pot and drops a few sacred basil leaves in it. |
| 4 | Plant of dhekia | Dhekia Jhara | Prepares a branch with five or seven saplings of Dhekia plant with this bunch he thrashes the body of the patient uttering the mantras. |

- iii. Birth Attendants/ Midwives: Traditional knowledge for childbirth and postnatal care is maintained by experienced women in the community. They manage pregnancy related remedies and new born care using herbal baths and poultices.
- iv. Bone –setters/ Trauma Healers: Skilled in setting dislocations and treating fractures with splints and herbal pastes.

Diagnostic Methods

Diagnostic methods empirical observation (symptoms, tongue, pulse-like feel, urine colour) with contextual enquiry (recent social/ ritual transgressions, interactions with spirits). For suspected spirit related illnesses, ritual diagnostic processes- consultations, offerings and divinatory techniques are common.

Medicinal Plant Use and Preparations

Common therapeutic categories treated with traditional remedies include:

- i. Fever, malarial type illnesses and general debility: Decoctions of bitter leaves, roots and specific herbal tonics taken orally.
- ii. Respiratory ailments (cough, cold); Steam inhalation with aromatic leaves, syrups made from plant extracts.
- iii. Gastrointestinal disorders (diarrhea, dysentery); Astringent plant preparations, oral rehydration with herbal infusions.
- iv. Wounds and skin infections: External application of poultices, antiseptic herbs, smoking –drying techniques.
- v. Snakebite : Immediate first-aid measures (tourniquet practices vary) local poultices, and ritual invocations, severe cases often referred to biomedical facilities.
- vi. Reproductive and postnatal care: Herbal baths, uterine tonics, and dietary prescriptions for lactating mothers.

Preparation techniques include decoction (boiling plant parts in water) infusion (soaking) poultices (crushed plant matter applied topically) pastes (mixed with rice or oil) and smoke fumigation. Many remedies are prepared with locally available adjuncts-rice, curd, ghee or fermented products.

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Ritual and Spiritual Elements

Ritual play a central role- healing is often a social performance that re-establishes balance between the afflicted person, the community and supernatural. Offerings to local deities, recitation of invocation songs, and rite-specific dances may accompany healing sessions. This combined approach addresses material and non-material dimensions of illness.

Knowledge Transmission and Social Context

Knowledge is primarily transmitted orally within families and through apprenticeship with a healer. Women are key custodians of household remedies; certain ritual knowledge may be generated or restricted to hereditary lines. Transmission is informal and based on demonstration and memorization.

Contemporary Challenges and Adaptation

1. Erosion of oral Transmission: Younger generations often prefer formal education and urban employment, reducing apprenticeship opportunities.
2. Loss of Habitat and plant Resources: Deforestation, land-use change and agricultural intensification threaten availability of medicinal flora.
3. Biomedical Encroachment and Hybrid Practices: Increased access to biomedical service has led to selective integration- some communities' combine both systems –but it also contributes to devaluation of traditional practices.
4. Commercialization Risks: Unsanctioned commercialization of plant resources and knowledge by outsiders raises concerns about misappropriation and loss of benefits to the community.

Discussion:

The Rabha healing system exemplifies a resilient, place-based medical ecology; it is adaptive, low-cost, and intimately connected to local biodiversity. Its strengths include ecological sustainability (use of local, renewable resources), social embeddedness (community based care) and cultural resonance (rituals that manage psychosocial dimension of illness)

Health seeking

The terms 'health' 'disease' and 'illness' are intermingled when Rabha people discuss about the definition of the said words. Being able to lead an active life- work, eat and physically move around is an indication of good health. The perception regarding illness and diseases is explained in simple terms by common Rabha individuals. When asked , “What do you understand about disease?”, the following types of responses are received; “When the individual experiences physical discomfort like pain, nausea, etc, then it indicates that the person is suffering from certain illness or disease”. Most of the villagers belonging to the Pati Rabha section say that, ‘feeling physically unwell’, “not being able to do daily chores and work”, “weakness”, “ pain” are the symptoms of disease. A diseased person may have physical or mental weakness. The concept of health among the Rabhas is not only related to physical and mental well being of an individual but has other dimensions too. Illness, health, diseases, are results of the influence of both genetic predisposition and the physical environment. These are also dependent on the favours and disfavours of Gods and Spirits. Some illness and disease can be cured with medicines, while others need the intervention of spiritual deities who have to be propitiated with prayers and offerings. The various groups of Rabhas of Kamrup and Goalpara district like Pati Rabha, Rongdani Rabha and Maitory Rabha believe that most of the

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disease occur due to dissatisfaction of their god 1 or influence of evil spirits. They stay healthy by the mercy of God. They also believe that to prevent disease, keeping oneself and the surroundings clean is very important. According to some villagers, poor food habits, disease and dirt are determinants of illness.

Types of traditional Healers among the Rabhas

| S.L No. | Category of Healer | Local Name | Specialization | Major Healing Methods |
|---------|--------------------------|-----------------|--|---|
| 1 | Herbal Healer | Ojha/ Baidya | Uses medicinal plants and natural substances | Preparation of herbal decoctions, pastes, and infusions |
| 2 | Ritual Healer/ Shaman | Deodhani | Spirit related illness, exorcisms | Ritual Chants, offerings, and spirit appeasement |
| 3 | Birth Attendant | dai | Pregnancy, Childbirth, postnatal care | Massages, herbal baths and dietary advice |
| 4 | Bone –setter | Ojha | Fractures and sprains | Manual bone adjustments, herbal poultices |
| 5 | Folk Healer | Ojha | General illness | Combination of herbs, rituals and prayers |

Common Medicinal plants Used by the Rabhas of Assam

| | Local Name | Scientific Name | Parts Used | Ailments Treated/ Purpose | Methods of Preparation/ Application |
|--|------------|---------------------|--------------|------------------------------|---|
| | Tulsi | Ocimum sanctum | Leaves | Cough, cold, fever | Leaf juice mixed with honey or ginger and consumed twice daily. |
| | Halodhi | Cucuma longa | Rhizome | Wound healing, skin diseases | Rhizome paste applied externally on wound or rashes. |
| | Siju | Euphorbia nerifolia | Latex | Toothache, swelling | Latex applied locally to the affected areas. |
| | Bhedailota | Paederia foetida | Leaves | Stomach pain, diarrhea | Leaf paste eaten or mixed with rice water |
| | Neem | Azadirachata indica | Leaves, bark | Skin infections, fever | Leaves boiled in water for bathing or used as paste on skin. |

CONCLUSION

Health seeking practices among the Rabhas represent a blend of traditional and modern healthcare systems. While traditional healers and herbal remedies remain important due to cultural beliefs and accessibility, modern medical services are increasingly used for serious health conditions. This coexistence of indigenous and biomedical healthcare systems highlights the adaptability and resilience of Rabha health culture.

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Conflict of Interest

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