# The impact of COVID-19 Pandemic on Indigenous People of Tamilnadu – A Medical Anthropological Perspective

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ABSTRACT: The Indigenous people are culturally unique and they are into many ethno-medicinal practices. There are about 36 indigenous people (Scheduled Tribes) are living in the State of Tamilnadu, India. These people were also seasonally migrating to various places for the jobs. The COVID-19 pandemic has created a great impact on their livelihoods and also on their health. These communities are more vulnerable and the impact of COVID-19 on these communities is under-addressed. The Indigenous communities require a prime attention and more need for awareness on the COVID-19 pandemic. The Elderly population of the Indigenous communities are having traditional knowledge systems and healing practices. The practice of herbal medicine, naturopathy and spiritual healing are preferred by them. Lack of emotional content and belief in public healthcare system continues to distance them from modern medicinal systems. The indigenous communities are generally suffering from diseases like tuberculosis, hyper tension, diabetes mellitus, cardio vascular diseases and sickle cell anemia. These conditions are weakening their immune system and increase their vulnerability towards COVID-19. The prevalence of anemia and malnutrition makes the women and children also lower the resistance towards the COVID-19. The study trying to identify the special strategies to safe guard the Indigenous communities from a medial anthropological perspective through case studies using grounded theory method.

KEYWORDS: COVID-19, pandemic, indigenous communities, migration, ethno-medicine, medical anthropology, grounded theory

## Introduction

The tribes are ethnic, heterogeneous and aboriginal population. The term tribe, derived from the latin word *tribus* (tri and bu), denotes an inhabited place. Strictly speaking, no precise or specific definition of a tribe can be given. Various definitions of a tribe have been given by the social scientists but none of them is universally accepted (Choudhury 1977, 6-7.). Article 342 of Indian constitution provides definition of tribes as "Tribes or tribal communities which are deemed to be for the purposes of the constitution the Scheduled tribes in relation to that State or Union Territory. In pursuance of these provisions, the list of Scheduled Tribes is notified for each State or union territory and is valid only within the jurisdiction of that State or Union Territory and not outside". There are 705 communities are identified as Scheduled Tribes of India. 36 Scheduled Tribe communities are living in the state of Tamilnadu. Traditionally, the term 'tribe' has been used or those groups of human beings, whose place of residence is situated in remote areas like hills, forest, sea coasts and islands and whose style of life quite different from that of the present day civilized men and women. In India different tribal groups are living in various degrees of socio-economic backwardness (Raj 2016, 1-3). Most of these Indigenous communities are dwelling inside the forest or hilly terrain. They have very minimum basic amenities, nutritional deficiencies; high dropout rates in schools, low literacy rate and often migrate to other places in search of better livelihood. These communities are behind development due to their remote

location. They are into vulnerable living conditions. Unemployment, indebtedness, inadequate health care facilities are the common problems faced by them.

The public health is concerned with the total system and not only the eradication of a particular disease. The three main public health functions are:

- The assessment and monitoring of the health of communities and populations at risk to identify health problems.
- The formulation of public policies designed to solve identified local and national health problems and priorities.
- To assure that all populations have access to appropriate and cost-effective care, including health promotion and disease prevention services (Jaiswal 2015, 4-5).


**Grounded Theory Methodology**

Grounded Theory is a form of qualitative research developed by Glaser and Strauss (1967) for the purpose of constructing theory grounded in data. Though the methodology was developed by two sociologists, its use is not limited to the social sciences. It has applicability to many disciplines for the following reason. It allows for identification of general concepts, the development of the theoretical explanations that reach beyond the known, and offers new insights into a variety of experiences and phenomena (Corbin and Strauss 2015, 6-7).

It is this feature that grounds the theory and gives the methodology its name. Second, in grounded theory, research analysis and data collection are interrelated. After initial data are collected, the researcher analyses that data and the concepts derived from the analysis for the basis for the subsequent data collection. Data collection and analysis continue in ongoing cycle throughout the research process. Studies using Grounded Theory (Padgett 2012, 32-33) typically involve interviews with a moderately sized sample carefully selected persons (20-30 is about right but sample sizes can be smaller or larger). It is notable that in health research, crowdsourced data gathering techniques have also been used as part of structured research projects. Examples include researchers using social media to identify people with specific diseases and using online discussion group to identify examples of side effects of particular drug (Halfpenny and Procter 2015, 42-43). The present study is conducted through telephonic interviews and social media messages received from Tribal leaders at frequent intervals reveal the impact of COVID-19 among the tribal/Indigenous communities of Tamilnadu from grounded theory perspective.

The indigenous communities are well-knitted and culturally very strong. The COVID-19 pandemic has created a livelihood challenge among the tribal communities. The inputs received from tribal leaders confirm that the Minor Forest Produces collected from the forest by tribal people are not in a position to reach the market due to lockdown. Even though not many tribal people are affected with COVID-19 there is a stigma existing among the tribal communities. The general publics also have a fear that since COVID-19 is a zoonotic disease, the tribal produces may have the infection. On the other hand indigenous communities are having a better understanding of the environment and practices indigenous medicinal systems to protect themselves from diseases. The tribal communities living inside the forests are generally food self-sufficient. Due to lockdown, many tribal people do not indulge in agricultural practices, which was their routine. This leads to more of food insecurity. This uncertain situation has affected them psychologically also. The tribal communities are already having a minimal access to healthcare systems is of more concern from the medical anthropological perspective in the present day scenario.

## Indigenous Communities and Health Care

All health care delivery systems are derived from the following basic components; the consumer/patient/client, the provider of service, such as physician or other health worker, and the institution where the health services are received (Gallagher, Heald and Garell 1976, 746-747). The basic medical supplied to indigenous communities are at scarce. The reach of healthcare systems in the tribal areas are challenging to administrators due to their remote location. The indigenous people suffer more due to their vulnerability. Even the diagnosis of any disease is really challenging. The health care information/ awareness do not reach them appropriately. Most of them do not have access to internet or lack literacy level. Lack of information and awareness about the COVID-19 pandemic makes them more susceptible to the disease. The information flow to these communities through their traditional folk medium or through community radio will create awareness among them. There is lack of communication that prevails between government and the indigenous communities. Due to lack of awareness some of them believe on superstitious practices to get rid of COVID-19. There is a need for active participation of indigenous communities to fight with COVID-19 pandemic. The government needs to ensure the indigenous rights and allocate more resources to safe guard the interests of the indigenous communities. It is important that we should recognize the indigenous people are important and indispensable partners in fighting the pandemic.

## Risks and Vulnerabilities

The social gathering takes place very frequently takes place among the indigenous communities are of great danger in these pandemic days of health hazard. For example their traditional gatherings for life cycle rituals, agricultural rituals, etc. which puts indigenous people and their families, elders into risk. The tribal people believe in traditional medicinal practices, which may have positive and negative impact on the pandemic management. The traditional medicine, in turn, centre on two traditional systems of medicine, i.e., *Little Traditional Medicine* - Folk systems of medicine and *Great Traditional Medicine* - Ayurveda, Unani, Sidha, Nature cure and yoga medical systems and even Homeopathy, too (Chaudhuri 1986, 15-16). The poverty condition prevails among these communities make them not accessible to quality medicines and nutrition. The food consumption patterns of every culture, including our own, have elements that may be detrimental from the standpoint of nutrition and health (Johnson 1977, 64-65). Their immune system will be weaker due to malnutrition. Their voluntary isolation may have an impact on communicable and non-communicable diseases prevailing in their societies. They lack access to general public services too. Washing hands with soaps kind of preventive measures requires more of persuasion among these communities. The lack of data about the indigenous communities, is a challenge for providing them adequate awareness and healthcare. The public information system should adapt the awareness creation in their local languages. The information communication tools must be used for the effective awareness programs.

## Participation of Indigenous Communities

The inclusive policy of Indigenous communities to fight COVID-19 should be evolved through their active participation. There should be a quick response system to be developed to fight the pandemic within the community. As Cultural Anthropologists plan and conduct research, there are several distinct goals that they can pursue, a variety of criteria they may choose for judging a good work, and numerous research strategies for fulfilling these specific criteria. Among possible goals, researchers can aim to accurately describe a social situation, vividly convey another person's perspective, teach a lesson, or develop and test general explanations for behavior. Debates sometimes erupt about the primacy of these goals, but they need not be at odds (Bernard and Gravlee 2015, 111-113). The issue for anthropology pertains to a notion of social responsibility. The enactment of new roles for anthropologists might make matters worse for local people because of their involvement. The field anthropologist may advise the local people

to adopt certain strategy but this may lead to antagonism with other nearby communities, or even with government officials who may regard the well-meaning anthropologist as a troublemaker who is usurping local control. What this means is that any type of advocacy work in anthropology could also involve a certain degree of conflict management (Hedican 2016, 48-49). There should be a bottom-up approach in developing the strategies especially for the indigenous communities. Their views and needs to be taken into account. There is a need for frequent communication between healthcare professionals and tribal leaders. Information campaigns should be specially designed for indigenous communities. The involvement of the tribal youth in the awareness creation is inevitable. The indigenous communities must be provided with psycho-social support and appropriate mental health care, because their psychological well-being is susceptible during the COVID-19. The role of government in public health system is important. Public health programs are financed and the broad organizational patterns for their implementation are determined by governmental policy decisions (Hanlon and Pickett 1984, 99-100).

## Conclusion

The Indigenous people are more susceptible to COVID-19. If it spreads in tribal pockets, the infection would be uncontrollable. Many of the Elderly people of indigenous communities are having comorbidities. This makes them more vulnerable to COVID-19. In this view the appropriate policy intervention from the medical anthropological perspective only safe guard the indigenous people and their health.

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