

**Kusum Bharati**

## **GENDER DISCRIMINATION IN HEALTH PRACTICES AMONG KONDHA TRIBE OF ORISSA**

### **Introduction**

In every society only a few people have, or are believed to have, the skills necessary to cure. These skills must be acquired, and the ways in which they are acquired vary widely from one society to the next. Herbalists and midwives frequently acquire their skills from their mothers or other close relatives. Through interest and observation herbalists may learn about different plants that grow nearby or that can be obtained in the sidewalk pharmacies of market towns. They may note the effects of food and herbs on patients and exchange information with other people similarly skilled, in this way they build reputation as home curers, to be turned to for common childhood illness and for diarrhoea, colds, rheumatism, and the like.

Traditional healers are recruited in general ways, common way is by divine selection in which an individual has a dream to undertake healing responsibilities (Joralemon 1985). Another form of divine selection is the normative obligations of a person who must accept responsibility in return for his or her secondary form an acute or life threatening illness (Rubel 1966 and Turner 1967). Before a person becomes an established healer there are three broad stages through which he must pass. First of all he must undergo an often frightening supernatural experience by means of which he becomes "clever". Typically this involves an encounter with spirits who adopt him and confer on him their powers, a configuration by the spirits of the dead or an experience such as dying and coming to life again. Second, the types of powers and abilities which the healer claims to possess, the actual visitations of such powers on an individual must be demonstrated. He must show that he is, in fact, able to cure the sick; third, he must attract a clientele and establish his practice, a process which follows automatically once his claim to the role is validated by those who have been cured.

The social anthropological studies on healers more often concerned themselves with areas like roles of healers in natural and social reproduction, and symbolism of healing rituals along with others (Marwick 1967; Turner

1968; Devisch: 1985). Such of these studies were taken as ones where the study of health and illness were considered as vehicles for understanding other domains of social-cultural organization (Colsen *et al.* 1974). The role of healers in the health care has also been the concern for those who are interested in the study of medical pluralism (Foster 1978; Sussman 1981; Kroeger 1983; Astin 1998), health change (Ray 1981), community participation in health care (Green 1985; Sharma 2005) and such other issues. Such studies dealt with aspects of recruitment of men and women into healing profession, the training and apprenticeship, the referral systems and relationships and more generally utilization of their services, besides the coverage of diagnostic and treatment practices.

The objective of the present paper is to describe and analyze the role of women healers vis a vis men healers in health care practices among Kondha tribe inhabiting the southwestern part of Orissa. The role of women healers appears particularly interesting as it provides status for them among ordinary women of the tribe, however the role of women healers is considered inferior to that of men healers. While healers who acquire knowledge of diagnosis and curing of disease are privileged than the rest, women healers are subordinate to the male healers.

The data of this paper were collected in 13 villages in Laxmipur block of Koraput district of Orissa state in an intensive fieldwork. Laxmipur block consists of 171 villages/hamlets with a total population of 54,154 (census of India, 2004). The percentage of Scheduled tribes in this block forms 68 percent of the total population, while Scheduled Caste accounts for 15 percent. As an approximate number of 400 women healers were estimated to be present in this block than others, this was chosen for study. Forty women healers and forty five patients of these healers in the thirteen selected villages were interviewed. Information on ethno-medical practices, choice in ethno-medical care and information with regard to the role and status of women healers in the community was gathered. Along with interviews with the help of schedules other techniques like case study and Focus Group Discussion were also resorted to for an in depth information on the relevant issues. Men healers were also interviewed in order to know their perceptions and attitudes towards women healers.

### **Brief profile of the Kondha**

The Kondha form numerically the largest group among 62 tribes of Orissa with a population 11,40,374 according to 1991 census. They constitute 17.5 percent of the total scheduled tribe population of the state. Although they are distributed throughout the state of Orissa, their main concentration is in the central region of the Eastern Ghats covering Pulbani and Koraput district. The undivided Koraput district contains more than one third of the total population of the state. The Kondha tribe is divided into various sections

such as Kutia Kandha, Dongra Kandha, Pengo Kandha, Jharia Kandha, Meria Kandha and Desai Kondha. The Desia Kandha and the Dongira Kandha represent the primitive sections of the tribe.

The economic life of the Kondha and their survival is mainly based on agriculture and forest produce. They practice both shifting and settled cultivation. The Kutia Kondha and some among the Dongria Kondha are primarily shifting cultivators known as “*Saura Chasa*” by the Kutia Kondha and *Houra* by the Dongira Kondha. The women take major role in economic activities.

Family is the smallest unit in the Kondha social organisation. The family occupies a single domicile. The nature of the family is conjugal. Joint and extended families are very rare. Analysis of sample data on family type records that out of 63 households, 52 (82.2 %) are living in nuclear families where as 11 (11.8 %) are living in joint families. The senior most male member is the head of the family and he exercises authority in every sphere, which is passed on to the eldest son after his death. Family is patrilineal as the Kondha reckon their descent through male line. Kondha comprise many clans like, Mandinga, Samanta, Kadraka, Jambika, Heridika, Himirika, Miniaka, Hikoka, Kulisika, Praska, Nachika, Melaka, etc. Mostly all of them are related to each other, i.e. through marriage relation. At the time of life cycle rituals like, birth, marriage, death and other functions bring them together.

Clan exogamy is observed on the ground of kinship, stemming from the common ancestor. Incest taboo is strong in this community. It is more than a social offence; it pollutes and angers the earth deity herself, causing a misfortune to the whole community. The Kondha are rich and complex in their religious life. Religion plays a dominant role influencing all other aspects of social life of the Kondha. So the Kondha life is filled with rituals and festivals. Singing and drinking is an important aspect of their rituals and festivals. Two important festivals are at the time of sowing and harvesting. These festivals are ‘*Chaitra prab*’ and ‘*Kudi*’ or *Meriah* festivals.

Kondha worship more than 100 gods and goddesses. The chief goddess is *Jakiri Penu* (earth goddess). She is worshipped in almost all the ceremonies as a mark of honour and respect. A rectangular wood or stone represents earth goddess. Kondha people gratify her with human blood, which is known as *Meria* sacrifice. But long ago this custom has been suppressed by the British’ and now a buffalo is sacrificed in place of human being.

The Kondha also observe *Jatra Kudi*, which is an important festival and it is celebrated at the outskirts of the village. Kondhas celebrate this festival for welfare of the people. *Haru Penu*, *Hua Penu* and *Ladan Penu* are the deities of stream, hill and forest respectively. These deities are not worshipped regularly but periodically. The Kondha also worship the ancestors called the “*Mahanai*”. *Jani*, *Disari*, *Samanta*, *Dandiasi* and *Pejinis* are the various religious functionaries who conduct rituals when needed.

## The healers

In Kondha community the traditional practitioners of health care are of two types, one is magico-healers-specifically the traditional women healers called by the names of "*pejini*" and secondly herbalists- herbalists are mostly men healers called by the name of Guru or "*Desari*" who provide herbal medicine for curing diseases and claim specialization for specific illness. As the Kondha community believes that most of the diseases are caused by the supernatural agencies with dimensions of mental and physical illnesses they take the help from both the magico-healers and herbalists. The role of the magico-healers is to ascertain the cause of the disease and then prescribe appropriate ritual and sacrifice.

In each village there is a head woman healer who is known by name of "*Pata Pejini*". This designation is given for the experience in their field and is based on seniority and those who have performed important role in the community. Her main role is to encourage and give guidance to the other healers in her own village.

## Initiation into healing practice

According to the traditional women healers they became the magico healers not by their own choice but by the choice of the spirits who appeared in their dreams and taught the knowledge for their practice. According to them it is obligatory to accept the spirits offer; otherwise the spirit will cause misfortunes to them or their family. For acceptance of this role the woman first consults the head women healer or *Desari* for the validation of her claims. *Desari* is also informed by the gods/spirits of their wish to initiate a particular woman into this profession. *Desari* fixes the auspicious day to make the ritual and sacrifices of the animal or birds to the spirits marking the initiation of the women into the role assigned by the gods/goddesses/ spirits.

Priest is also an important functionary in the health care system of Kondha. His role is mainly to predict and decide the auspicious days and times to treat the sick person. Priests too equally approached as any other herbalists or magico healers when people are suffering from illness. The interview with women healers revealed that the spirit(s), which have ordered this divine duty is not the same in cases of all of them. While some of the healers claimed that they have been ordered by only one spirit, others by more than one at different points of time.

The Table 1 reveals the number of spirits and the spirits which were responsible for divine powers in case of the 40 healers interviewed.

Majority of women healers reported that it was *Buda Devata* and *Takurani* spirits which came into their dreams. These are the spirits worshipped by most of the villagers intensively to appease them. These spirits are the family deities, and also village deities of those women healers.

The healers also informed that these spirits kept appearing in their dreams until they sacrificed a hen / a cock / a goat / a pigeon / a pig as ordered by the gods/spirits. Goat sacrifice is the common ritual performed by the healers. They stated that it is essential to sacrifice the prescribed animal or bird to gods/spirits in acceptance of the divine responsibility. The acceptance of the role by women is more for fear of some misfortunes to their family than for a sense of obligation to serve.

The healers also claimed that the advice of the spirits is not just one time only. They have taken to this role only after they had this advice on several times during a period of one month to one year or so. Thus, in case of some, it is an "intensive" call by one or more spirits where in the spirit or spirits appeared almost once in two to three days in dreams during a month or so, and directed to take up this role. In case of others the spirits appeared once in 15 days or a month but continued for a long time extending up to a year or more.

Table 2 indicates that a majority of 32 women healers had experiences of non-intensive call from the spirits. They claimed that the gods were appearing in their dream, once in fifteen days or once in a month and were directing them to accept this divine knowledge. While other 20 % of the women healers reported that it was intensive call from the spirits who used to visit their dream, twice in a week or so.

Table 3 indicates that 80% of women healers claim that the gods/spirits have visited their dream for more than 10 times, while 15 % of them claim that it was only 5-10 times the spirits visited them.

Table 4 indicates the duration of calling by the spirits to the women healers. It is seen that 75% of the women healers were convinced of the order of the spirits, only after they have had experiences of appearances of spirits for a period of six months or more. Rest 25% of the healers took up the profession just after three months or less than three months time.

Acceptance of the role requires a public announcement among the Kondha. The spirits responsible for healing powers direct them with regards to the sacrifices and offerings. It is only after the sacrifices are made the spirits are convinced of their formal acceptance of the role assigned to them.

Thus, some healers have claimed that they could not accept this profession immediately after they were convinced of the role assigned as it involves significant expenditure, but subsequently they have taken up this role. For that they have prayed and requested gods/spirits for some time, assured and reassured that they will take up this role at the earliest and requested the spirits not to cause any harm to them as well as to their family members. Thus, some of them have taken by after some delay, the role of healing.

### Family response to the 'divine' order to the women healers

All women healers stated to have first informed about their 'dreams' and of the orders of the spirits to their family members. The family members have tried to establish the truth of this by probing into the details of the dream. The senior members of the family have also undertaken some counseling on the negative effects to the women and her family members, if at all she had lied.

The family members also tried to analyze the behaviour of the woman during last few days, like how she suffered from sleeplessness, etc., to establish the fact. It is generally felt by the family members that refusal to accept the role is 'just out of a question', because it is the order by the spirits. If they do not oblige to the order, they would be targeted for many misfortunes. Once the members are convinced of the women's claims, they feel that they are fortunate that one of their family members had been chosen for this important role.

In case of a poor woman, the members of the village community are concerned about the expenditure involved for the sacrifices to be made for accepting this divine role. However, they feel that in spite of this economic burden on them they should feel honoured and fortunate because one of their family members has been chosen for this important role.

The family members once decide to accept conduct the ritual with the help of head *Pejini*. The materials needed to be offered during these rituals are (1) one earthen pot, (2) one winnowing pan, (3) one hen, (4) two chicken, (5) one goat, (6) one mirror, (7) some incense stick, (8) seven types of flowers, (9) three white *saris*, and (10) some *mahua* Liquor.

The head of the household approaches a *Pata Pejini* (head women healer) to inform about the dreams experienced by one of his/her family members. The *Pata Pejini* takes that person to *Disari* (village priest cum astrologer) to confirm the claims of the woman and also to fix up auspicious day and time for conducting necessary ritual for formal acceptance of the role.

Generally *Disari* (priest) also gets the dreams of the arrival of the new woman healer. In that case, it is easy to validate the claims of the member. If he is not informed in advance, then he performs a ritual to communicate with gods and spirits to confirm the claims. After confirmation and validation of the claims he fixes the auspicious day and time to perform the necessary ritual to mark the acceptance of the role. On this day the woman is made to wear a new white sari along with other recognized healers. All of them conduct a ritual publicly. At that time all the important village members will be present for the ritual. In return, new woman healer gives some money (₹ 5 to 10) to other healers and also *Mahua* liquor to *Disari*.

### Balijatra: The festival of validation of claims

A festival called *Balijatra* is celebrated in the month of *Bese* (May). During the *Bali Jatra* festival, the *Pejini* (the traditional healers) play an

important role to appease the gods, ancestral spirits and other benevolent gods to protect the community from natural calamities, like cyclone, drought and also to protect from epidemics, and wild animals. The healers also request the *Darthe Maa* (earth Goddess) to provide good harvest in coming agricultural years. As the *Pejini's* worshipped the Goddess, they shake violently due to getting the divine power and sometimes screamed loudly, and get possessed. They begin to dance in some rhythmic way. They dance vigorously to the beat of *Kandha Baja* (drum). On that day, the new healers get first chance to take part in communicating with supernatural and other beings. They walk on the burning flame and sit on the lollypop made by the nails which is prepared by the village community as a qualifying test of claims of sanction of divine powers by a specified spirit. These healers walk several times on burning flame and swing on nail lollypop without the experience of any pain. If the women express pain then it is believed that the dreams are false and gods/spirits have not given any such divine role to them. It is the opinion of the Kondha that at the time of possession, they do not do anything themselves but their total action is governed by the Goddess. Whatever they do or speak come from the divine power. After this test the village community considers them as the divine healers and give them due respect. It is in this way they get the social reorganization as *Pejini* in the community.

Thus, *Balijatara* is an important festival for the new *Pejini's*. From this festival only she gets the recognition in the community and is allowed to take part in other rituals and festivals, where she learn, train and is made perfect by the head *Pejini's*

### **Gender discrimination in health roles**

Among Kondha society there is a division of labour in the health roles. In the sense, that male members of the Kondha perform the role of both herbal and magico treatment to their clients, where as the women are only allowed to practice the magico treatment. Women are not allowed to learn or have the herbal knowledge because the community believes that this division is made by the spirits, and that due to the "impurity" stages among the woman they should not touch the herbal medicines. Monthly menstrual cycle for a woman renders her polluted and she is generally considered impure and weak. They also believe that if women healers give herbs to her clients then the sick person will ultimately die or that medicine will not work any more.

In case, any women show interest to learn this knowledge or if they have learned from any where and do practice in the community, it is believed that then it will lead to misfortune to the whole community. In such circumstances the head of the village will give severe punishment to that individual because of the violation of the rules that exist in their culture. Thus, the women of the Kondha community are restricted not to practice the

herbal treatment in their culture. So, women healers are prohibited to learn the herbal treatment.

Gender discrimination is also found with regard to the fees or remuneration. Mostly women healers are paid in kind or even if they are paid in cash it is quite low ranging from Rs. 1 to Rs. 5. However, men healers charge immediate payment from their clients of Rs. 10 to Rs. 20, in addition to *Mahua* liquor. According to the villagers the women healers are not expected to demand fees from their clients. The justification for some of the villagers is that women healers are ritual practitioners, whose status is acquired through dream where she personally communicates with a supernatural being and that God has given them power to serve the community from the misfortunes or illness but not to use this knowledge and power for their livelihood. Where as men healers do not have the relationship with the spirit world and that the knowledge of the herbs is inherited or learned from older healers. This knowledge is later transmitted to their followers through intensive training. So from the viewpoint of the villagers it is clear that the women healers are not expected to pursue personal profit, but should perform free service to their clients, where as men healers or herbalists are expected to make their living on this skill. Thus discrimination is seen between men and women healers with regard to the work they do and the payment they receive.

Kondha women healers are not allowed to render their services outside their own villages, as each Kondha village has at least one woman healer. In case there is no woman healer in any village and if that village needs to take help of these women healers, then that individual takes the permission of the head of the village of the woman healer. Then only the woman healer is permitted to serve in other village. But these types of restriction are not imposed to the men health providers. They have freedom to render their services to any community and allowed to go and practice their services outside their own village. Thus, traditionally the women healers of Kondha community are dependent on their men folk and follow the rights and obligations towards the society.

### **Recognition of services**

Generally traditional women healers enjoy better status (as explained above) as compared with other women in the community. Their services are recognized in various ways. The traditional women healers practice their knowledge mainly among the members of their own clans, while they are sometimes consulted in emergencies by individuals who belong to other clans also. Their usual clients are those who are in close personal relationship and therefore have complete faith on them.

According to the villagers, they have a deep feeling of affection and respect towards these women because they have always tried to help them and also are important functionaries in many festivals. It is believed that



disrespect to them can also result in the spread of the illness in the community. In each village there is a head woman healer who is known by name of “*Pata*” “*Pejini*”. This designation is given for the experience in their field and is based on seniority and those who have performed important role in the community. Her main role is to encourage and give guidance to the other healers in her own village. During the occasions of festival or other ceremonies and functions in the family, the head of the family is expected to specially invite the head woman healer. She is offered with clothes, money and liquor, etc. During the time of harvesting these women get grains from their community and during hunting game only *Patta Pejini* gets a share of the hunt as a community member.

During the community festivals whoever desires to give money or local beer, they offer only to *Pata Pejini*. Later the ‘*Pata Pejini*’ shares this with her other colleagues of her own village. Thus the head woman healer possesses extra benefits and powers in relation to other woman healers. She possesses elevated social status. However, there are certain spheres in which men continue to dominate. However, community administration is still in the hands of men. Thus the women healers of Kondha community are dependent on their men folk and follow the rights and obligations towards the society.

### **Interrelationships among the healers**

One of the objectives of the study is to analyze the relationships among the healers. That is to analyze the feelings of one healer to the other, opinions of men healer about women healer and vice versa. It was found that the healers maintain co-operation and have harmonious relationship among them.

The initial attitudes of men healers towards women healers depicted that they consider women healers as an important member in the community whose services towards the community are essential. They opined that the women work for the well being of the community. The men healers themselves would go to the women healers whenever the necessity arose. They never thought derogatorily about them. According to them, God has given certain knowledge to these women for the benefit of the community. In professional relations also they have different roles from the women healers, as they are generally herbal healers whereas the women are the magico healers. So a situation of conflictory interests does not arise. According to the villagers one man cannot be both herbalist and spirit medium. They should either be a herbalist or spirit medium.

According to the Kondha the cause of the most of the diseases is attributed to the supernatural agencies and they mainly hinder the mental health and in course of time it affects the person physically. The segregation in the society between men healers and women healers as herbalists and magico religious healers respectively, for the disease caused by the supernatural agencies they prefer women healers, for they believe that they have direct

contact with supernatural beings. So the women healers diagnose and drive away the evil spirits and refer the patient to men healer or PHC to cure the disease. In this way both men and women healers play a complementary role in curing diseases caused due to evil spirit. According to the men healers the clients give first preference to women healers for identification and driving of evil spirit. This prior dependence on women healers in curing this kind of disease sometimes develops a kind of jealousy among the men healers for women healers. But the men healers to some extent think that professional healers (modern health practitioners) are hurdle in their practices as well as hurdle in their culture. Now a days villagers approach more to the health centre because of free of cost medicines. However, they respect the professional healers. As they frequently visit their village and encourage and give guidance about the diseases which are unfamiliar to these male health providers. Thus, the men healers maintain a cordial relationship with the other healers too in the community.

Women healers also maintain cordial relationship with the men healers as well as other women healers in the community. Woman healers also maintain a cordial relationship with the village priest. Basically all women healers are the religious specialists and play a significant role at the time of conducting worship and rituals, they work together for the well being of the community. Women healers reported that they never thought badly about other healers in the community. According to them spirits selected them to make harmony in the community and help those who are in problems. They respect each other's views and follow the head healer. Whatever the head woman orders her juniors, they follow the same and always obey her orders.

The woman healers also shared their day to day activities. They go together to the market, which is indicative of their harmonious relationship with each other. They believe that if this harmony breaks then there will be misfortune in the community. Women healers also reported that they do not have any problem with the professional healers-government public health personnel. They respect the professional healers as they help in relieving the person from the disease and pain.

Kondha women healers are not allowed to render their services outside their own villagers, as each Kondha village has at least one women healer. In case there is no woman healer in other villages and if that village needs help, then individual of that village has to take permission from the headman of the village of the woman healer. Then only the woman healer can offer her service to other villages. But these types of restriction are not imposed on the men healers. They have freedom to render their services to any community and are allowed to go anywhere and practice their services outside their own village. Thus, traditionally the women healers of Kondha community are dependent on their men folk and follow the rights and obligations towards the society.

According to the Kondha in certain exceptional circumstances a man may be chosen to take the role of spirit medium, but in such cases he will have to give up the practice as herbalists. The women are limited to the roles of spirit mediums. The period of impurity associated with monthly periods debar them from learning herbal medicine and so practice as herbalist.

Thus gender discrimination is found among the Kondha in role, payments received and services provided. The women healers like any other women also not included in the village councils but men healers are most often chosen as members of village council. Thus, the socio-cultural status of Kondha traditional women healers is relatively high compared to the other women in their society but not equal as that of men. So traditionally women healers are discriminated in certain spheres where as men continue to dominate, in most areas.

There is a gradual change in their perception about health and disease. They are beginning to realize that disease is not caused by supernatural beings and so they are approaching more the men healers, and modern medical practitioners. Thus, conversely, traditional women healers being neglected. The women are doubly affected as they not allowed learning herbal medicine and their role as spiritual mediums has been undermined.

The Table 1 reveals the number of spirits and the spirits which were responsible for divine powers in case of the 40 healers interviewed.

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**Table 1**  
**Distribution of healers by the spirits that sanctioned divine power**

Number of spirits involved	Name of the spirit(s)	No. of healers
1	<i>Budadevta / Takurani / Raska Madi / Usajala / Sindimunda / Pataraja Kalighata / Kalamanidevi / Tangnimadi / Saban Madi / Kading Madi</i>	30
2	<i>Mundurudevta and Chautirani</i>	3
3	<i>Mundurudevata / Chautirani / RaskaMadi/Pidigara / Draupati / Budaraja / Sindimuda/Sabamadi / Sadramadi / Saatirani / Matirani / Ragakami</i>	3
4	<i>Likidi / Tangni / Arbudombro / Odivaya / Dinavaya / Pataraja / Patruba-ni / Gandiwati / Rabuwali / Satabauni / Saubauni / Kankajani / Sindimunda</i>	4

**Table 2**  
**Distribution of healers by intensity of calling by the spirits**

Nature of Calling	No. of Women	Percentage
Intensive calling	8	20.0
Non intensive calling	32	80.0
Total	40	100.00

**Table 3**  
**Distribution of healers by frequency of appearances of spirits**

Approximate appearances of spirits	No. of Healers	percentage
5	2	5.0
5-10	6	15.0
10+	32	80.0
Total	40	100.00

**Table 4**  
**Distributions of healers by the approximate period of appearances of spirits**

No. of Months/ Years	No. of Healers	Percentage
1-3 months	2	5
3-6 months	8	20
6+	30	75
Total	40	100.00

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