

Subaltern Voices in Healthcare: Exploring Indigenous Medical Knowledge Systems among Santhal Tribes in Bihar

The presentation will be focused on my ongoing research on the indigenous medical knowledge systems among Santhal tribes in Bihar; which I have just started after the award of ICSSR Major Project in December 2023. The research aims to investigate the interplay between indigenous medical knowledge systems and the marginalized Santhal tribes in Bihar. The Santhal communities, renowned for their rich cultural heritage, have safeguarded their traditional healing practices as a vital aspect of their identity and healthcare for generations. Despite the immense cultural and practical significance of these indigenous medical knowledge systems, they exist at a crossroads, where the pressures of modernization, urbanization, and globalization threaten their continuity. The growing availability of conventional biomedical healthcare services, the encroachment of modern lifestyles, and the diminishing accessibility of natural resources all challenge the sustenance of these traditional practices. In light of these challenges, it becomes imperative to embark on a comprehensive exploration of the indigenous medical knowledge systems among tribal communities in Bihar.

The primary objective of this research is to illuminate the resilience, significance, and challenges inherent in Santhal communities' preservation and application of their indigenous medical knowledge systems. To achieve this, the study will employ a mixed-methods research approach, encompassing ethnographic fieldwork, qualitative interviews, and participant observation. These methods will enable a comprehensive exploration of the multifaceted dimensions of Santhal healing practices. Qualitative data collected through interviews and observations will be analysed using the theoretical concepts of medical pluralism, medical marginality, Michael Foucault 's theory on power and knowledge and Pierre Bourdieu's cultural capital theory.

Leslie (1998), Leslie and Young (1992), Sujatha and Abraham (2009) highlighted the existence of different types of medicine alongside western medicine and termed it as medical pluralism. They argue that although allopathic system exists in every country, most people continue to depend on the folk and traditional practitioners as well. This assimilation co-existence of multiple medical systems does not entail equity among different systems of medicine. Plural medical systems become dominative as one medical system generally enjoys a pre-eminent status over the other medical system. From the issue of unequal power and unequal recognition comes the concept of medical marginality. Hardiman and Mukharji (2012) uses the concept of medical marginality with respect to that subaltern therapeutics which are indigenous, non-

institutionalized and are not recognized by the state but still exist even today serving the needs of people. In this context, Michael Foucault 's theory on power and knowledge (1980) will be used for identifying power dynamics related to the integration of indigenous knowledge into the broader healthcare system. Through the perspectives of Foucault, we can uncover how disparities in power and resources impact the recognition and utilization of indigenous medical knowledge within tribal communities. Pierre Bourdieu's cultural capital theory (1986) will be instrumental in understanding how indigenous medical knowledge functions as a form of cultural capital within tribal communities.

By actively engaging with Santhal healers, community members, and healthcare practitioners, the research will amplify subaltern voices. It will provide a platform for Santhal narratives, allowing them to articulate their experiences, confrontations with challenges, and aspirations within the healthcare landscape. Along with it, the research holds significant relevance for policy making. The relevance for policy making lies in its potential to inform policies that address health disparities, preserve cultural diversity, and promote more equitable and inclusive healthcare practices. By documenting the disparities and amplifying subaltern voices, the research will provide empirical evidence to inform policy decisions aimed at reducing health inequalities.

Dr Priyam Sharma