

**INDIGENOUS KNOWLEDGE OF PLANTS IN HEALTHCARE PRACTICES AMONG YANADI'S OF CHITTOOR DISTRICT, ANDHRA PRADESH**



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**Short Profile**

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**ABSTRACT:**

Indigenous knowledge, understood as the unique local knowledge existing within and developed around the specific conditions of people indigenous to a particular geographical area, is gaining more and more attention. Indigenous knowledge is an essential condition for sustainable development. In India, where the tribes and their tracts constitute very significant

parts of the underdeveloped people and area, comprising about 8.13% and 18.70% of the population and area of the country, respectively, the indigenous knowledge system plays a pivotal role in their very survival (Samal et al., 1996 and Samal et al., 2000). The tribal communities represent a vast diversity in socio-economic life, cultural heritage and resource use pattern. Despite their habitation in different zones, the tribal people display commonalities in the economic and social life, with variations necessitated to maintain harmonious coordination between the resource availability and population structure (Samal et al., 2010).

**KEYWORDS**

*Indigenous Knowledge, Healthcare practices, Yanadi Tribe.*

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## INTRODUCTION

Indigenous knowledge is one of the important components in the domain of Anthropology. According to E.B. Tylor (1891) Culture is that complex whole which includes knowledge, belief, art, law, morals, custom, and any other capabilities and habits acquired by man as a member of society. The speed of cultural evolution varies and it increases when a group migrates and incorporates components of a new culture into their culture of origin. The influence of culture on health is immense. It affects perceptual experience of health, illness and death, beliefs about causes of disease. The ethnic community are practiced the mother of all indigenous medicines is the tribal medicine. The nature's fury and calamities also made the man to resort to magico-religious practices and to believe the disease is due to nature's fury. The village deities and rituals also became a part of the treatment (Vedavathy, 2002). In this context, Anthropologist's ability to facilitate incorporation of indigenous knowledge into development process has assumed greater significance.

Indigenous peoples are custodians and stewards of their lands and environments and, in some sense, are entrusted to care for these through successive generations. Systems of knowledge and their role in the conservation of the environment are vital to ensuring the continuity of indigenous culture by maintaining cultural diversity; recognition and protection of indigenous knowledge can also benefit environmental conservation and sustainable management (Tripathi et al., 2000)

In the past decade, a growing number of scientists and policy makers have started to analyse the consequences of their development efforts, giving due importance to the traditional wisdoms. The body of knowledge, science and techniques used by rural people, if well identified and documented, can make an important contribution to development. By emphasizing government agents' knowledge, development projects devalue traditional rural people's knowledge and deny their creativity. New institutional ways of realizing the creative ability of rural people are needed in order to achieve a synthesis of traditional and modern knowledge.

Almost 80% of people in developing countries depend on traditional medicines for primary health care, most of which are derived from the plants. The village folk, especially the tribal people are still using the natural resources available in their surroundings to treat many diseases and accidental hazards (Ganesh and Sudarsanam, 2013). With this background present work was taken to throw light on the socio-cultural elements pertained to health standards and indigenous practice of ethno medicine among Yanadi of Chittoor district, Andhra Pradesh.

A survey was carried out to collect firsthand information on the traditional medicinal practice by the Yanadi people. The data for the present work is collected from three Yanadi tribal hamlets or settlements around Chandragirimandal of Chittoor district, Andhra Pradesh. The total population in all these settlements consists of 195 individuals (Males 101 and females 94). The techniques employed in collecting the data are interview and observation method. Ethnographic data has been mainly collected by interviewing Yanadis of all age groups initially, only aged peoples narration alone were taken into account because of their vast experience and the fruitful data. The information acquired on health disorders and medicinal plants used is recorded and analyzed in terms of family, genus, species and also vernacular names. The actual applications of plant parts or fruits or roots and the nature of disorders are also presented for each and every plant. An attempt also has been made to know different plants used for curing various ailments.

Yanadis are one of the major scheduled tribes of Andhra Pradesh and they derived their name

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from the Sanskrit word "Anadi" denoting those whose origin is unknown (Thruston, 1901). They are predominantly spread over the districts of Nellore, Chittoor and Prakasham. Yanadi is one of the most ancient and the next largest tribe to Koya. When Aryans came to India they were called „Yanadulu (means orphans) whose origins are very vague, and they found living in utter poverty. With the invasion of the Dravidians lost their identity, their language and got mixed with the people who subdued them, to such an extent that they forgot their special traits. Not having any script, Yanadis belong to the Hindu religion they performed all Hindu festivals. Earlier they were leading nomadic life style. Yanadis inhabit the Telugu region and the language is Telugu. Identification of Yanadi community is very easy. They are dark skinned, platyrrhine and short stature, long head, prominent chin, thick lips and scanty hair both on head and body (RaveendraNaik et al., 2013). They come under scheduled tribes in our constitution. According to 2011 census reports the tribe of Yandai is 5, 33,746 in Andhra Pradesh and the total literacy rate among Yanadi is 35.35 as per 2001 census.

Yanadis have been divided into 4 sub-castes on the basis of occupations and dietary habits namely Reddy Yanadi, ChallaYanadi, KappalaYanadi and AdaviYanadi. The Reddy Yanadis are called because when the Reddy kings ruled over parts of Andhra, they employed these tribals as their trackers and bearers of arms when they went for hunting. The name ChallaYanadis was given because they were doing menial jobs and working as scavengers were give Challa (buttermilk) as payment. The KappalaYanadi is mostly inland fisher men who hunt in ponds, streams and sell their catches nearby villages. The AdaviYanadi is those who even now live in forests far away from human habitation. This classification varies district to district. The animistic nature of their religion, the production of fire by friction, the primitive hunting and fishing stage indicate that the Yanadis have not yet emerged from primitive stage of culture.

Diseases occurs in each society and every culture in one way or the other making provisions for understanding the occurrence of illness and for coping with it. The medical system is a set of beliefs regarding the causes of illness and the ways in which illness is handled and prevented. In the case of Yanadi's modes of healing is done by folk-practitioners and magicians etc., They comprise an area of behavioural science investigation known as the folk medicine. The idea about sickness and its treatment provide them with the type of knowledge, belief and practices that may be classified as folk-medicine.

Yanadi believe that some diseases are caused by heat, cold or some other causes and the rest are the effects of supernatural and spiritual effects. Broadly the causes of disease understood by the people fall into two groups physical and supernatural beliefs. Many people of Yanadi believe that certain diseases are due to the wrath of some God or Goddess. Small pox and chicken pox are the outstanding examples. They are respectively known as "Peddammaru" and "Chinnammarru". Breach of Taboos believed by some of these people of Yanadi tribe is to be responsible for certain diseases.

A widely held belief throughout these Yanadi settlements is the "effect of evil eye". According to Yanadi people children are considered to be most susceptible to the effect of evil eyes. Diarrhea, Dysentery may attack children due to evil eye or evil mouth. Some diseases such as Hysteria and Epilepsy are regarded by these Yanadi people as due to a spirit or ghost intrusion into the body. The Yanadi believe that people who commit suicide will become ghosts or evil spirits. In order to get rid of the evil spirits they contact a shaman to perform a ritual.

The following medicinal plants are used for different ailments by Yanadi tribe of Chittoor district.

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S.No	Ailment	Botanical Name/ Vernacular Name	Family	Plant part used	Application
1	Abdominal Pain	<i>AbelmoschusFiculneus</i> (Nella benda)	Malvaceae	Root	Root extract (about one teaspoonful) is given twice a day for three days to cure abdominal pain.
2	Amebiasis (RakthaVirechanaalu)	<i>GlochidionZeylanicum/</i> (NeeruMamidi, Banka Mamidi)	Euphorbiaceae	Bark	Bark decoction with buttermilk or curd is taken to cure Amebiasis
3	Cold	<i>Eclipta prostrate</i> (Galagara)	Asteraceae	Leaf	Two to three drops of leaf juice is dropped into nose for getting immediate relief from cold.
4	Delivery Pain	<i>Pterolobiumhexapetalum</i> (Errachikai)	Caesalpiniaceae	Leaf	Decoction of leaves prepared in water is taken orally by pregnant women during delivery to reduce delivery pain

5	Diabetes	<i>Strychnosnux-vomica</i> L. (Mushti)	Loganiaceae	Stem, Bark, fruit, pericarp and pulp	Stem, Bark, fruit, pericarp and pulp (except seeds) are dried and grind to powder. A 300-500 mg small pill prepared from this powder is administered orally, once daily, to control diabetes.
6	Diarrhea	<i>Pergulariadaemia</i> (Jittupaku)	Asclepiadace ae	Leaf	Leaf juice, about 10-15 ml once daily for 3 days, is administered orally to relieve diarrhea.
7	Ear Ache	<i>Cleome viscosa</i> L (Kukkavaminta)	Capparacrae	Leaf	3-5 drops of leaf juice are dropped into ear to melt the wax and to get relief from ear ache.
8	Fevers	<i>Tragiainvolucrata</i> L.(Teluko ndicettu)	Euphorbiace ae	Whole plant	A cup of decoction prepared form 10-15 g whole plant powder is used in all types of fevers.

9	Jaundice	<i>Tribulusterrestris</i> L (Chinnpalleru)	Zygophyllac eae	Leaf	Leaf paste, about 10-15 g once daily for a week, is administered orally to relieve from jaundice
10	Piles and Skin Diseases	<i>Plumbagozeylanica</i> L (Chitramulamu)	Plumbaginac eae	Whole plant	Whole plant decoction (15ml) is taken orally once in 2 days at bed time for a fortnight to get relief from piles and skin diseases
11	Scorpion Sting	<i>Albizia Amara</i> (Nella renga)	Mimosaaceae	Leaf	10-15 ml of leaf juice of Albiziaamar a is administered internally as antidote to scorpion sting.
12	Scorpion Sting and Snake Bite	<i>Leucasaspera</i> (Thum machettu)	Lamiaceae	Leaf	Leaf extract smeared all over the body as relief from scorpion sting and snake bite.

13	Jaundice	<i>Azadirachtaindica</i> (Vepa)	Meliaceae	Stem Bark	Half cup of stem bark decoction is mixed with one spoon of honey and administered daily in the morning on empty stomach.
14	Asthma	<i>Aloe vera (L)</i> (Kalabanda)	Liliaceae	Leaf	Boil some Aloe Vera leaves in a pan of water and breathe in the vapor
15	Toothache	<i>Annona squamosa</i> L (Seethapalamu)	Annonaceae	Root-bark	Scrapings of root-bark are used for toothache
16	Diabetes	<i>Melia azedarach</i> L. (Turakavepa)	Meliaceae	Leaf and stem bark	100g of fresh leaves along with equal quantity of Stem bark are cut into small pieces and prepared decoction is given for diabetes
17	Wounds and Cuts	<i>Cissusquadrangularis</i> L. (Nalleru)	Vitaceae	Tender stems	Fresh stems cleaned and cut into small pieces and ground to paste and is applied on wounds and cuts

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