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The medical system of the Garos of Goalpara, Assam: A historical study from the pre-colonial to the colonial period

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Abstract---Medicine is a part of Human society from the very beginning until the present time. It makes the medical system by comprising various practices and treatment procedure to prevent and cure diseases. In India, medicine and the medical system was started from the ancient period popularly known as Ayurveda which was enriched by the Unani medicine developed during the medieval period with the advent of the sultans of Delhi. This again saw changes with the introduction of the British rule in Indian scenario. Assam as a part of the historical context of development in the medical system of India, also witnessed transformations in the culture and socio-political administration. The present study will try to draw a historical development in the field of medical practices in the Goalpara District of Assam, after being a Part of the British administration. It will give an understanding of the socio-cultural changes from the pre-colonial to colonial time that the Garo population went through due to the medical activities of the British in the hills.

Keywords---Medicine, Garo, British, Assam, Goalpara, Medical, Historical.

Introduction

Medicine has been an integral part of human society since ancient period. It saved lives, cured illness and protects the humans and the animal kingdom from dangers time to time in history. In the ancient period in Indian context, medical system was entirely based upon natural ailments comprising of herbs, leaves and stems of natural resources. The system of medicine and healing practices in India can be traced back to the Vedic period when *Atharvaveda*, the last of the four Vedas has mentioned about it. Before that period the medical system during the Indus Valley civilization is hard to find any evidence. The ancient system of medicine in India was popularly known as *Ayurveda*, derived from a Sanskrit word having two roots; *Ayur* means life and *Veda* means knowledge. Ayurveda which became the leading textual healing practice in India paved the way for the further development in the field of medical system in India. During the early medieval period around 7th century CE, the sultans of Delhi established their rule and brought a new culture of healing known as *Unani*, coming from the word Ionian mixed with the existing one and creating a space for inclusion and exclusion of the healing techniques accordingly. Another important development occurred in the south with the Siddha medicine, aiming the same to cure and heal by balancing internal and external health of a person. In the 18th century when the British started implementing their administrative policies the medical system went through another transition. Especially the introduction of Bacteriology and Laboratory in the field of medicine transformed the whole concept of medical treatment in India. Also, this brought a new cultural identity to India which marginalized the already existing systems and popularized the new system as scientifically reliable.

Assam as a part of the Indian context witnessed the transitional process in the medical field when the British came and settled here. Before that, North-east was a distant place for most of the ancient and medieval kings of India, including the Mughals though they attacked on the region in the medieval period. This is why the Socio-cultural system of Assam was not known to the entire country. Especially the potential of the land was not particularly known before the British. In the early part of 1858, the Europeans were commercially driven more than socio- politically accountable towards Indians under the East India Company and its various traditional systems. There was a lack of voluntary initiatives to develop the land and the people of the region. After the treaty of Yandaboo, all the regions they acquired hold commercial profit for them. It is worth mentioning that the north-eastern part of the country has an abundance of ethnic communities along their different cultures. The Garos, an ethnic community of Assam mostly inhabits the area of Goalpara. It was a territory under Cooch Behar before being a part of Assam, lying between Assam and the Bengal province. It worked as a pivotal region for the East India Company to explore the North-eastern part of the subcontinent. The first colonial medical intervention happened in the land of the Garos was in 1899, when a mission established hospitals and dispensaries in the region. British officials came here to serve and teach western medical knowledge to the people, who were relying on the age old system of sacrificing rituals for healing diseases. The introduction of new systems, administrative divisions of the land and cultural changes had a long lasting impact on the Garo people and the region of Goalpara. Though the beneficial changes brought by the colonial

authority among the people is tremendous in terms of mitigating epidemics and diseases like kala-Azar, Malaria, venereal fevers etc, it is also important to be aware of the traditional healing culture prevailing among the Garos left behind by their ancestors. This study will create awareness regarding the importance of traditional medical system among the people and will build an understanding for promoting a more co-existing environment for medicine as a system of healing the body and mind. The focus is not limited to western or eastern medicine only, rather a cumulative system of knowledge of medical treatment of different types exchanging and collaborating with each other in various times in History.

Objectives of the Study

The study will be focusing on the following subjects-

- Historical development in the field of medical practices in the Goalpara District of Assam, after being a Part of the British administration.
- Understanding the socio-cultural changes that the Garos of Goalpara went through due to the activities of the British in the hills.

Methodology

The study makes use of both primary and secondary sources to write the historical overview of the medical system of Garos of Goalpara from the pre colonial to the colonial period. Especially for reconstructing the medical history of Assam and Goalpara colonial records has been referred in the study extensively.

History of medical system of India from the colonial period:

The relationship between medicine and colonialism in India has been addressed by many scholars in their works. Most of them talked about the socio-political scenario behind the development of western medicine. It was perceived to be a colonial tool to colonize the people's body and their culture. This resulted in a huge setback for the traditional system of medicine prevailing in India from the pre-colonial period.

According to Foucault 'disease is deviation in life' (Foucault, 1975). His idea on knowledge and power can be linked with the notion of imperial medicine and indigenous system in India. It was the development of western science that popularizes the Imperial medicine over indigenous system from the 18th century onwards. The traditional practitioners of medicine such as the *Vaidyas* and the *Hakims* were replaced with the new physicians in India known as *Doctors*. Alternative system like this ultimately made medicine an authoritative tool for the colonial rulers. According to George Basalla, western science was developed in the western countries and diffused in the non-western nations which became the source for it to popularize. He stated three stages of this process of diffusion of ideology where the phase one witnessed the non-western countries becoming the source for western medicine, phase two saw the science of colonial period and the last phase saw the struggle for developing the independent scientific culture (Basalla, 1967: 611). David Arnold's views on imperial medicine argue that disease and medicine was linked with power and authority between the ruler and the ruled in the colonial era. In his "*Colonizing the body: state medicine and epidemic disease in nineteenth century India*", he talked about how the

institutionalization of public health policies in India was built on the basis of the medical encounter and it was based on the topographical survey reports of the British officials. He again said that this institutionalization process of imposition driven by the state on the Indians rather than a voluntary act (114-115). The already existing and well practiced Ayurvedic treatment in India was never an unchallenged system. Historically the introduction of *Unani* as a medical system during the medieval period brought many new concepts and treatment procedures from the west to the east. Both the system collaborated and learned from each other for the greater benefit of the people. It was never a kind of hatred or ignorance that any of the medical system witnessed in India unlike during the British rule. There were differences in the systems of medical treatment as the Arab physician Ali- Ibn- Sahi- Al-Tabari talked about it in his work '*Kitab Firdwas Al Hikma*' (Basu and Kumar, 2013: 4). According to Rajasekhar Basu and Deepak Kumar it was not a newly introduced medical system but rather an exchange of ideas that happened with various types of medicine got interacted by carrying their traditional differences within. According to Worsley, assimilation process of different types of medical systems includes folk medicine (included magico-religious practices showing the popularity of cult culture among the people), popular medicine of the people, market and the society (Worsley, 1982: 318-320). What made the medical system developed in the western countries was the discovery of laboratories and bacteriology which revolutionized the concept of sanitary, disease, medicine and other related subject to it.

The transitional period in medical system of India was the colonial period when the institutionalization of the healing practices was done by the Government aid. During the pre-colonial era, the Vaidyas and Hakims in India used to enjoy a respected position in the society as a savior of the society. Their job was to cure the patient by every means they could try to save the life. In case of the death of the patient after treating, the fate is held responsible for such deaths. This was the belief driven practice prevailing during the pre-colonial period, in the absence of microscope and laboratory experiments. The notion of scientific and rational in terms of medicine came when the British took over the field of medicine. Folk medicine, which constitutes an important part of the medical systems, was based upon various herbal, age old popular remedies and cult culture from the pre-colonial period. The practitioners of this medicine were popularly known as shamans, diviners, herbalist, or Ojha. They played their role as a curer of both internal and external illness of the patient. The learning process of the medical knowledge in folk medical system is also very unique. The healer by roaming around with his master, collecting and identifying the plants and their preparation method and discuss the process of treatment etc to learn the knowledge of traditional medicine. If the treatment doesn't work or doesn't cure the disease, then the aspect of fate comes in. In most of the cases the master decides whom to handover the knowledge of medicine next to himself as an heir. This system of knowledge is limited in terms of popularity and very scattered unlike the modern system of medicine. In the folk or traditional medicine, beliefs play a crucial role. According to Hughes, ethnomedicine are those medical beliefs and practices which are the product of indigenous cultural development and not derived from the framework of modern medicine (Hughes, 1968). The lack of institutionalization and promotion of curriculum based education in this

traditional healing system in India is one of the important reasons for its unpopularity and setbacks.

Medical system of the Garos of Goalpara:

The medical system among the Garos was mainly comprises of the herbal treatment and practices related to religious belief system. The customary norms and cultural beliefs of the people were also related to the healing system. The beliefs related to medical treatment was a part of everyday life of the people. Worshipping different kinds of deities for the wellbeing of the society and the people used to be an integral part of the Garos. From the pre-colonial period the healing culture was basically governed by the worshipping and sacrificial rituals to various deities to cure diseases among the people. One traditionally continued concept among the Garos is 'Mite' meaning spirits. Mites are considered to be immoral and crucial for the wellness of the society as a whole. Some of the primary mites traditionally popular among the Garos are- Tatara Rabuga, Saljong, Goera, Kalkame and Susime etc (Sangma, 1981:221-223). Here Tatara Rabuga is believed to the creator of the world and curer of diseases like Kala-Azar and fevers (Playfair, 1909: 80). The spirit of Kalkame is considered to be the savior of all the living things from dangers while Susime is considered to be the curer of diseases like deafness, lameness and blindness (Sangma, 1981: 223). The medical knowledge regarding plants and natural elements is also evident among the Garos from the ancient times. In the folk literature, a plant called 'Muni' has been mentioned as a medicinal plant by Playfair in his monograph on the Garos (Playfair: 1909, 144). According to the folk culture the plant was used for hypnotizing or making unconscious/sleepy animals or peoples according to the people though the proper scientific name of the plant is difficult to ascertain. Another popular plant called as 'Makhal', also works in a similar way, which is use for medicinal purposes as well. Considering the nature human relationship and habitation of the people, herbal medicine is highly use in diseases like fevers, cold, body aches and many others. Playfair mentioned that the Garos plant a tree called *Shishu*, which has healing properties into it nearby their asongs or sacrificial stones. Juice of the leaves of the tree is used in headaches, swollen fingers or sore thrust etc. as medicine (Playfair, 1909: 18). Sources on the medical practices of the people show the reliance on herbal medicine and socio-religious beliefs to a large extent. Knowledge of ethnic medicine of the community did not really confined to a section of people but known to every single person in the family, society. It worked like a home remedy in the time of emergency and transmitted through verbal communication from generations to generations from the pre-colonial times.

The available sources on the medical history of the Garos during the colonial period speak about fevers, leprosy and skin related diseases mostly prevalent among them from the pre-colonial period (William Carrey, 1919: 256). According to the British officials deputed in the land of the Garos, fevers and skin diseases was mostly seen due to the lack of sanitation facility and unhealthy rituals performed by the people to cure disease from the pre-colonial time. Even Playfair, a deputed British officer as Deputy Commissioner of Eastern Bengal and Assam talked about the unhealthy practices and unhygienic condition of the Garos in his monograph on the tribe. The first medical encounter in the Garo hills was seen to

be happened in the year of 1879, through the medical activities done by the mission societies in the hills ((Sangma, 1981: 260). The missionary activities established the hospitals and dispensaries and done charitable works in the field of sanitation and hygiene for the people. In doing so, teaching gospel and spreading the knowledge of Christianity became a great part of the medical activities in the hills. Language and education play as a medium for the mission societies in the hills to connect people of remote areas and popularize western science and its ideologies. The medical activities in the initial period were mobile, which became institutionalized both as a profession and an academic career for the native. The officers and surgeons who came and served in the hills, gave training to people in western medicine and slowly the number of trained medical professionals in the field of medicine became larger among the natives. The early medical works of the missionaries tried to supply medicine and treatment to people of the hills by their own funds and limited experiences (Carrey, 1919: 257).

Findings

Westerners when came to the hills, they only focused on the herbal knowledge of the people for medical purposes. The socio-religious beliefs related to medicine and medical treatment was not given importance as it used to hold its place in the society from the pre-colonial times. Though in most of the cases it was seen to be noticed and reported by many officials that the beliefs of the people regarding diseases sometimes works as miracle. Dr. Crozier talked about a village on the basis of eyewitness which became leprosy free even without using any western medicine and by the help of a doctor or a priest without any scientific knowledge (Carrey, 1919: 257). Undoubtedly one of the greatest medical remedy that the people get benefitted due to the introduction of western medicine in the hills was the use of soap for cleaning. Along with medicine, the mission societies used to supply soaps for sanitation purposes to the people which reduces the skin related issues among them. Also it has been found that the new medical treatment brought by the missions in the hills had a long lasting impact on the socio-cultural practices of the Garos. It reduces the amount of sacrifices of animals in the name of healing diseases. The westerners taught people sanitation and hygiene which had a great impact on the Garos. It is also evident from the sources that Christianity or a Christian community was outgrown as an extra group of people among the Garos who had been taught medicine in English and trained in medical treatment by the British officers. This whole system created a new section in the society who were the first converts, and got benefitted from the resources that the British government would supply to them. The transitional phase among the people socio-culturally was initiated by the British with the help of medicine and sanitation works in the hills. Reducing death rate from venereal fevers and skin diseases provided security to the Garos to accept Christianity and support the new system of medical treatment in their places.

Conclusion

The traditional knowledge regarding medical treatment especially age old practices and cultural norms are fading among people nowadays. People are more inclined towards rational, scientific process of treatment, discouraging with the fact about the richness of natural ailments for curing diseases. The study was

done to promote an environment of co-existence of different kinds of medical treatment process, their interactions, collaborations and equal representation before the people for a greater help and benefit. The historical overview of the medical system or health care system of the Garo ethnic community was important to show from the pre-colonial to colonial period in this regard. This paper tried to bring the historical development of the health care system of the Garo people and its transitional phase during colonial era due to various reasons. Transition did not entirely alter the dependency on traditionally used medicines beliefs related to health care system among the people. Teaching gospel and transformation though resulted into a huge number of conversions still did not reduce the importance of traditional medicinal knowledge among the people, for what purpose the study was done.

References

Books

- Arnold, David, ed. *Imperial Medicines and Indigenous Societies*. Manchester: Manchester University Press, 1988.
- Chakrabarti, Pratik. *Medicine and Empire: 1600–1960*. London: Bloomsbury Academic, 2014.
- Dalton, Edward Tuite. *Tribal History of Eastern India: The Native Races of India*. New Delhi: Cosmo Publications, 1978.
- Harrison, Mark. *Climates and Constitutions: Health, Race, Environment, and British Imperialism in India, 1600–1850*. Oxford: Oxford University Press, 1999.
- Kumar, Deepak, ed. *Disease and Medicine in India: A Historical Overview*. New Delhi: Tulika Books, 2001.
- Kumar, Deepak, and Raj Sekhar Basu, eds. *Medical Encounters in British India*. New Delhi: Oxford University Press, 2013.
- Playfair, A. *The Garos*. Guwahati: Spectrum Publication United Publishers Panbazar, 1975.
- Sangma, Milton S. *History and Culture of the Garos*. New Delhi: R. K. Jain, 1981.
- Sangma, Milton S., ed. *Hill Societies and Their Modernization: A Study of Northeast with Special Reference to Garo Hills*. New Delhi: Omsons Publications, 1995.

Journal Articles

- Arnold, David. "The Rise of Western Medicine in India." *The Lancet* 348 (October 19, 1996).
- Basalla, George. "The Spread of Western Science: A Three-Stage Model Describes the Introduction of Modern Science into Any Non-European Nation." *Science*, May 1967.
- Worsley, Peter. "Non-Western Medical Systems." *Annual Review of Anthropology* 11 (1982): 315–48. <http://www.jstor.org/stable/2155785>.