



INTERNATIONAL JOURNAL OF CREATIVE RESEARCH THOUGHTS (IJCRT)

An International Open Access, Peer-reviewed, Refereed Journal

Indigenous Knowledge Of The Bodos On Childbirth

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Abstract: Childbirth is considered as an important event in every human society since ancient times. In the absence of modern medical sciences and technology, the ancestors of different communities all over the world had devised their own methods around childbirth and health which has allowed them to maintain a healthy population and also continue their lineage. These traditional knowledge and practices are therefore, a vital part of their heritage and culture. The Bodos, an indigenous community of Northeast India have a vast resource of such knowledge which has been carefully preserved through generations. Although the development of modern medical sciences has minimized the dependence to such practices, many of the superstitious beliefs and customs are still popularly followed within the Bodo community. This paper therefore, is an attempt to highlight the indigenous knowledge of the Bodos on childbirth and maternal health.

Keywords: Indigenous Knowledge, Childbirth, communities, Bodo, maternal health.

INTRODUCTION

Indigenous knowledge includes the expressions, practices, beliefs, understandings, insights, and experiences of Indigenous groups, generated over centuries of profound interaction with a particular territory (Grey, 2014, p. 3230). Much prior to the development of modern science, the knowledge and wisdom gathered by the people helped them in their survival and existence. It has been preserved and passed down through generations. Indigenous knowledge is embedded in folklore, superstitions, customs, beliefs, religion etc. such that it can be regarded as the foundation of a community. Such information has been a resultant of a communities' response to their environment and have been tried and tested across time maintained through traditional practices. In the present world, only few indigenous communities remain unaffected by the influence of globalization while often rejected as methodical. However, traditional knowledge has allowed communities to survive and exist in nature and therefore, are an important asset in the development of modern science and in understanding local environment.

The Bodos include the large group of Tibeto-Burman linguistic group who are inhabitants of North Bengal, East Bengal, Assam and Burma. They are considered to be the one of the earliest settlers in the North Eastern states of India. Traditionally known as agriculturalists, their multi-faceted culture incorporates various other elements such as weaving, dancing, music, cooking etc. Like the societies in different parts of the world, the Bodos also developed a rich treasure of traditional knowledge fostered by their immediate environment. This paper attempts to study the indigenous knowledge of the Bodos on childbirth and maternal health through data collected by ethnohistorical methods and a critical learning of existing secondary sources.

The Bodos and Childbirth

In the absence of modern medical sciences, different communities had developed their own knowledge on health. The Bodos have also acquired a vast resource of traditional wisdom from their ancestors, some of which are still popularly practiced by them. The Bodos believed in the existence of two different types of ailments: one caused by natural illnesses or diseases and the other due to magic or supernatural reasons. In both cases traditional healers known as 'Ojas', have an important role as preservers as well as practitioners. They usually heal sickness through the use of herbs or by chanting *mantras* and at times both. However, the *ojas* were not the only people who utilized the community's knowledge on healing. The members of the community also shared knowledge of preparing homemade remedies, especially the women. In addition to that, the Bodos believed in social customs and taboos regarding important events such as marriage, childbirth, festivals etc.

The birth of a child is considered to be an important event in any society since time immemorial. It is considered to be vital for the maintenance of population and the family lineage. Therefore, the whole family assists in assuring the birth of a healthy child as well as in maintaining the health of the mother. Due to its importance, there are many beliefs and taboos associated with childbirth which are still prevalent among the Bodos. Traditionally, in order to predict the pregnancy, the menstrual cycle of the woman is observed closely as well as its symptoms such as nausea, changes in the body, eating habits etc. The husband is usually the first person to learn about the pregnancy followed by the mother-in-law. In order to confirm the news, an expert and experienced female family member and in her absence, an expert woman from the village is consulted. Upon confirmation, the news is conveyed to the rest of the family members and the relatives. The Bodos do not have any specific ceremony or ritual to mark the event but influence of other cultures is evident in the present society especially among the wealthier families.

The news of the pregnancy is treated with utmost excitement and in order to ensure a safe delivery, the pregnant woman is prohibited from performing difficult tasks such as lifting heavy items. However, she can continue to work as little physical activity is considered beneficial for a safe delivery. Moreover, she has to avoid travelling to distant places and forested areas as the Bodos believed that an evil spirit might endanger both the expectant mother and the baby. She is also advised to avoid visiting cremation grounds, funerals, come in contact with a dead body or kill animals. However, in case of the death of a family member or close relative, then the expectant mother is allowed to participate in the funeral rites, after which she has to undergo a purification ceremony in front of the *Bathou* (the traditional deity of the Bodos) with the assistance of the *Dwori* (priest) or *Oja*. Until her delivery, the pregnant woman is also advised to avoid any discussions on evil supernatural entities and have negative thoughts as it is believed that it may endanger the fetus.

Dietary restrictions such as avoiding the consumption of certain vegetables like papaya, are also to be strictly followed as the Bodos believe that consuming them can result in miscarriages. Studies suggest that while eating ripe papaya may not cause any harm but the unripe ones have to be avoided as it contains latex which can cause uterine contractions and thus considered to be unsafe (Adebiyi et al., 2002, p.203). The Bodos must have acquired this knowledge from their ancestors. The expecting mother and father were also prohibited from consuming twin adjoined fruits as they believe that consuming them can result in the birth of twins. The birth of twins is probably not preferred as it can result in some pregnancy-related issues and premature babies. Eggs, bitter or sour food were also to be avoided during the term of pregnancy.

Traditionally, during the delivery of the baby, the family was assisted by the experienced women of the village. There were no trained practitioners, nurses or midwives. Unlike the Assamese, the Bodos do not use a distinct house for the purpose. Every item required to ensure a smooth delivery were prepared as soon as the pregnant woman begin to experience labour pain. The items include a sharp blade made out of green bamboo, *Uwal* (wooden mortar), cotton or silk yarn, warm water, bamboo mat etc. An iron knife or sickle is kept at the bed or attached to the room where the delivery will take place. This was done as it is believed that it will ward off evil spirits. Men were not allowed to enter the delivery room but in some rare cases, the father may be allowed to provide mental support. The pregnant woman is laid on a mat which is covered with a cloth. While the woman is in labour, she positions herself in the kneeling position and takes the support of the wooden mortar to push the baby out. In order to relieve the pain, the lower abdomen is massaged. Any complication during the delivery is believed to be a result of the violation of restrictions or taboos. The husband then, have to confess their wrongdoings in front of the *Bathou* altar with the help of the *Dwori* or *Oja*.

After the birth of the baby, the umbilical cord is cut off with the sharp edge of the green bamboo stick and then it is tied with a silk or cotton thread (Brahma, 1992, p.67). This practice is known as *Utumwi Hanai*. The sex of the new born baby determined the number of times the thread is spun around the umbilical cord. If the baby was born as a male, the cord is wound for five times and in case of a female, it was done for six or seven

times. Moreover, a widow or widower was not allowed to partake in the cutting of the umbilical cord as it is believed that it will shorten the life span of the child. The Bodos had a popular belief that people had three types of hands viz; sweet, bitter and sour. It was generally thought that only people with bitter hands should cut the umbilical cord as it will allow the healing to take place faster. Sour and sweet hands were not favoured as it will have the opposite effect and will result in discomfort to the new born baby (Brahma, 2011, p.35). Therefore, a woman whose possessed bitter hands would always be ready prior to the delivery.

The placenta, also known as *Jwr* is buried by laying it down gently in a burial pit of about one and half foot depth dug by the father of newly born baby in front of *Noma No* (Main house) of the family. The remaining portion of the umbilical cord falls off after it dried, which is then it is put in an empty *eri* (a kind of silk worm) cocoon and tied around as a talisman to the baby's neck. This is done to ward off any bad luck for the child in the future. *Gotosa Pwtarnai* is a ceremony performed for the purification of the newly born baby, where the child is given bath by the mother with warm water and placed on a *Songrai* (winnow) that is covered with a dry and clean cloth. Then the *Songrai* with the baby on top of it is kept in the veranda of the *Noma No*. One of the elderly woman, who acted as the midwife or the *Dwori*, gathered nine *dubri* grass (*Cynodon dactylon*), a branch of *tulsi* (holy basil) and a gold ring, which are tied together and used for sprinkling water from a river on the newly born child. The following words are then recited to the baby: *Oi goto! Nwngba gwdw mamwn! Bangal na Jungal, Garo na Gongar, Harsha na Nepal mwn? Dinwiniprai Bodo Jabai.* (Narzi, 1995, p.110) Translated as 'Oh child! Wonder who were you in your past life! If you were Muslim, Garo, Bhutanese, Nepalese? No matter what you were in your previous lifetime, from today onwards, you are Bodo.

Post this ceremony, the baby is then taken to seek the blessings of the *Bathou Bwrai* and *Bathou Buri*. A fowl is sacrificed and offered to the gods for the well-being of the baby. This ceremony is known as '*Dwi Sarnai*' viz., sprinkling of holy water. A small feast is organized to express gratitude to the people who helped during the delivery and the well-wishers. Traditional rice beer (*jwo*) is served to the guests by the child's family. The naming of the new born child is a significant event but it is not celebrated as a separate ceremony. Usually, names were decided based on the physical features of the child, the time of their birth or according to the wishes of the parents and relatives. Therefore, names which means tall and slender like *Laoga* (for male) or *Laogi* (for female) etc. are popular among the Bodos. If frequent death of children occurred in the family, the baby is given odd names such as *Dao khi* (fowl excreta), *Oma khi* (pig excreta) etc. (Narzary, 2020, p. 92) It was believed that it will prevent any misfortune due to evil spirits in the future.

Conclusion

The Bodos believed in a number of superstitions and taboos related to childbirth, some of which are still prevalent even in the present times. Lack of ways to diagnose the causes behind a particular health condition probably led to the growth of such beliefs. However, at the same time, the Bodos have also a rich knowledge regarding childbirth which had allowed them to successfully maintain their population throughout the years. Although the growth of modern medical sciences has diminished the importance of such traditional practices as more people preferred opting for hospitals and doctors, it is still prevalent in some rural areas. Moreover, indigenous knowledge on diet, restrictions on activity during pregnancy are still observed by many Bodo women, some of which have even been scientifically proven to be effective.

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