

Issues of alcoholism dependence among tribes: how Koraga tribal population of Kerala find their everyday life

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ABSTRACT

Healthy Youth with sound mind and body is indeed could be of a catalyst for the uplift of socio-economic spheres of a geographical area and a greater asset for the nation in the process of its building. It is not alien that this population come under the enormous pressure of the substance abuse in the forms varied. Here the focus is on tribal youth who cannot be left behind in the race of youth welfare both in policies and practices. It cannot go well when the already aspiring population of tribe's venture into the serious health marring activities in the forms of drugs and alcohols. Koraga is a PVTG tribe who lags far behind in many socio economic and health indices, whose case is an alarming tipping point inn this aspect. This study is descriptive in nature and conducted in Kasaragod district of Kerala at the different hamlets of Kasaragod and Manjeshwar talukas with case studies of 10 families and simple random sampling of 40 respondents with the help of unstructured interview schedule. Finding of the study shows that the population is majorly concentrated in more than 40 different hamlets crisscrossing the two given talukas, substance abuse is prevalent in the hamlets which puts them in serious health related issues with the consequences resulted in many psycho social issues and loss of productive man hours and even leads to suicide among youth. It also stresses the importance of the interventions to address the malaise which otherwise has the potential to put them in larger risks and make them more vulnerable than they are now.

Keywords: *Alcoholism among Tribes, Youth Development, Koraga Tribe, Koraga Livelihood*

According to the scholars like Virginias Xaxa (2012) tribal population are considered as the fourth world in social science. In India the situation is no different owing to many psychosocial, geographical and yet importantly historical reasons. Our country with the boiling pot of many ethnic varieties and societal variations uphold to the noble notion of unity in diversity and is one of the emerging world's economic superpowers next only to the most populous country of China. This is with the add on quality of our youthful population who make the profile of our country much high in terms of future prospects and added productive man hours to the burgeoning economy.

Along with these advantages yet there are many adversaries what we face today in the likes of many social evils which hamper the growth and smooth functioning of our valuable

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agencies. Substance abuse is a challenging issue, any country can face today especially when it locks horns with the promising lot of youth, it is something which requires much attention from top bottom. Developing countries like India experiences more problems with the alcohol abuse than the developed countries despite equal amounts of drinking (Saxena S WHO;1995)

When it comes to the tribal population who are a sizeable population of more than 104 million according to the 2011 census it next only to that of African continent majorly populated in the central, eastern and southern part of our country including the PVTG (Particularly Vulnerable Tribal Groups) of Andaman and Nicobar islands namely the Sentinalese, Jarawas and Onges who are still in the hunting and gathering stage and in an “hands off and eyes on” policy of our country.

There are many reasons for the alcohol abuse among the tribal population of our country and Koragas in particular who are also among the PVTG category of the tribal population. The youth among the tribal population who fall in frequent numbers is a grave concern at the hamlets and for the nation in general as they are considered to be the forbearers of their generation and people it is not at all a healthy trend to see this lot mired in the vicious circles of substance abuse creating more untoward incidents in terms of livelihood alienation, emotional issues and other many factors to be worried among them.

Tribal Scenario in India

India is home for 10.43 crore of tribal population comprising 8.6% of the entire Indian inhabitants (census; 2011) in its vast expanse of geographical area crisscrossing the length and breadth of the country, majorly in the two distinct geographical area of Central India and North East. In central India it is stretched from Banswara in Rajasthan to West Purulia in West Bengal encompassing nearly 100 districts in 8 states of Rajasthan, Maharashtra, Gujarat, Chhattisgarh, Madhya Pradesh, Orissa, Jharkhand and Andhra Pradesh these together accounts for more than half of the whole Indian tribal populace. The other area of North East is comprised of Assam, Mizoram, Meghalaya, Tripura, Nagaland, Sikkim, Arunachal Pradesh and Manipur (Ministry of Tribal Affairs: 2013).

Since the independence the rhetoric on the abysmal under performance of the tribal population is seemed to be a banal debate to ponder upon for the non-tribal medias, even now the Human Development Index (HDI) of the scheduled tribes in India remains to be lowest compared to the other sections of the society, there may be many socio political reasons and justifications for this low performance. The attitude of a state towards its vulnerable sections of people determines the progress achieved by that particular society (Kunhaman;1980) ours is a country with a complex landscape of people from different culture and backgrounds who are in the dire need of the state’s intervention in many spheres.

The issues faced by the tribal societies in India are manifold from land alienation to alcoholism to under employment there is larger lacunae felt in the tribal being. The concerted effort for a society’s upheaval should be based upon in creating a body with sound mind and soul with the better health to contribute to the nations development, to achieve this benchmark there is a long way to head on with the apt political and social willingness along with the targeted policies after the expert consultations.

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Other than substance abuse few problems of the tribal population from the land alienation by the different developmental programmes post-independence even this has started by the time of Britishers who have chased away the tribal from their habitats in the guise of railway developments programmes, after the independence there was a need for the dams and among the displaced people for this development projects a large chunk is the tribal populace, where a very less of them had been paid the compensations without a well thought out plan or without following the rehabilitation norms. The development induced displacement is a larger problem which throw the normal lives of the displaced out of gear create future problems.

Speaking about the dismal status of health among the tribal, it is poverty, under nutrition, poor environmental sanitation, hygiene, lack of safe drinking water and specific diseases such as Malaria, TB, Yaws, sickle cell anemia and Thalassemia (RCH II ;2006). In continuation to this even some particular vulnerable tribal communities (PVTG) such as Onges, Jarawas and Shompens of Andaman and Nicobar are in the verge of extinction due to the depopulation by the result of disturbing health scenario (Verma ;1978). Many of the central states in India fail to provide the basic health care facilities to the tribal poses a grim picture of our health facilities and the inadequate infrastructures to cater to the need of the vulnerable sections. The institutional deliveries of the tribal still stand at 17.7% births where it is 51% for the category of others in the government health facilities.

The unemployment and the failing livelihood are general issues in the country for a larger people, while talking about the tribal, it is somehow more appalling. 89.97% of tribal live in rural areas where the infrastructures and the systematic mechanisms are less with this major population in the primary sector of agriculture and agriculture labour, other than this there are who engage in Minor Forest Produce (MFP), Non Timber Forest Produce (NTFP) and daily wages in the rural areas and those who migrate to the cities in search of better works.

Among the tribal the artisans who create their art works which is of great aesthetics and much of demand from the markets are of greater quality by inherent or being trained by the elders from the community. But this works as seasonal in to yield a good return from the market directly to the tribal hamlets, there are also many tribes other than Koraga from Kerala and Karnataka, a Particularly Vulnerable Tribal Group (PVTG) who make baskets from the tree barks and other leaves and sell those in the market or by the middlemen which fetch them a very less amount for a day, this can be because of the less demand for the particular product in the market as there are many in other ways, this is how the expertise and the skills of a community somehow becomes obsolete by the passing of time without being substituted with a more cost effective, decent yielding and sustainable livelihood practices.

Those who migrate to the urban centres of the country from the tribal youth in search of better living face multiple issues of their identity crisis to cope up with the situations and adjust to the new environs, where the reports of harassment, underpayments, violation of human rights prevail in a large number. The survey system of ours also poses a larger problem in assessing the exact population live in the cities, who somehow happen to be assimilated in the migrated rural population to the metropolises, rather than being added into the tribal migrators to the cities. This creates the gap in availing the numbers of tribal who travel for the better returns to the cities, who end up in daily wages and other labours which require much of physical hardness.

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PVTG Tribes in Kerala

There are varied reports on the exact number of tribal in Kerala from 33 to 36, the government website of Kerala denotes this number to be 34 who are 1.4 per cent of the total population of Kerala population, where district of Wayanad has largest tribal population more than 1.5 lakh followed by Kasaragod (more than 83,000- due to the recent entry of Marathas into the fore who are more than 34,000-) and Idukki(more than 52,000). PVTG population of the tribes are very less with the percentage of 5 in Kerala. Pre agricultural stage of livelihood, very low literacy rates and the marginal and stagnant growth are the distinct features of the PVTG tribal populace. Other than Koraga there are four more PVTGs in Kerala, namely, Kadars, Kattunayakan, Kurumbas and Cholanaickans.

Koraga: Koraga tribe who are inhabited mainly in the Kasaragod district in Kerala (with the population of 1803 with 503 families according to the tribal welfare department of Kerala) and also seen in southern part of Karnataka (with the population of 14,794 according to the census 2011), face much problems in socio economic conditions as well as in the struggling livelihood. The literacy and employability rate in Kerala's Koraga population is very low compared to the others. Thus, putting this tribal people incompetent in the fierce markets of today's. Although the shrinking natural resources and the traditional basket making way of livelihood is facing the threats which lead their lives to deprivation in terms of socio-economic spheres and unhealthy and unhygienic living conditions. The literacy rate of Koragas is comparatively high among the PVTGs of Kerala at 78.5 per cent according to the reports of KILA in 2008.

Kadars: Kadar community is mainly the inhabitants of Thrissur and Palakkad Districts. They are also found in Kozhikod District. Kadars have 545 families with a population of 1974. Their family size is 3.62 as there are 967 males and 1007 females, the sex ratio is seen as 1000:1041. Literacy rate of Kadaras is 57.67 per cent.

Kattunayakan: Kattunayakans are distributed in Wayanad, Kozhikode, Malappuram and Palakkad Districts. They are also found in the neighbouring States of Karnataka and Tamil Nadu. An overwhelming majority of the population is concentrated in Wayanad district. Kattunayakan is a community with the largest population among Scheduled Tribes in the State. They constitute 4.69 per cent of the population of Scheduled Tribes in the State. They have 5137 families and majority of them are in Wayanad District (4369 families). Malappuram (517 families) and Palakkad (218 families) are two other districts which have representation of Kattunayakan. In Kozhikode District there are 32 families whereas one family is located in Idukki District. As the total population of Kattunayakan community is estimated as 19,995, their family size works out to 3.89. Among the Kattunayakans there are 9953 males and 10042 females. As such the sex ratio is 1000:1009, their literacy rate is 59.41 per cent.

Kurumbar: Kurumbar are distributed in Attappady Block Panchayat of Palakkad District. They are the earliest inhabitants of Attappady area and are called '*Palu Kurumba*' to distinguish them from the '*Alu Kurumba*' of Nilgiris in Tamil Nadu State. Kurumba community is settled in Agali and Pudur Grama Panchayats of Palakkad District. There are 543 families with a population of 2251. The family size is 4.14. As the population consists of 1128 males and 1123 females the sex ratio is 1000:996. Ninety-eight per cent of Kurumba population is settled in Pudur Grama Panchayat and

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the rest in Agali Grama Panchayat. Kurumaba's literacy rate is estimated to be 56.6 per cent.

Cholanaickan: Cholanaickans are found only in the evergreen recess of the forests of the Ghat section of Karulai and Vazhikkadavu forest ranges of Nilambur Valley of Malappuram District. Among the Scheduled Tribes of Kerala, Cholanaickan has a unique position in the sense that they are the only community who depend solely on non-timber forest produces for their consumption and for exchange or sale and are also referred as cave dwelling population. There are 101 Cholanaickan families with the population of 409 and all are settled in 3 Grama Panchayats, namely; Amarambalam, Karulai and Vazhikkadavu in Malappuram District. The family size of Cholanaickan community is 4.05. The population include 223 males and 186 females. The sex ratio of Cholanaickan works out as 1000:834 which is lowest among the Schedule Tribe communities. Their literacy rate is 39.6 per cent.

Objectives of the Study

The first objective of the study is to see the effect of substance abuse among the Koraga tribe in Kasaragod, Kerala, second objective is to assess the socio-economic conditions of the Koraga hamlet of Badiyadukka in Kasaragod with special reference to the livelihood activities the tribal population is involved in.

METHODOLOGY

The population of Koraga in Kerala are majorly concentrated in Kasargod, who are spread in two taluks of Kasaragod district in Kerala namely Manjeshwar and Kasaragod where they are seen in scattered habitations in the form of hamlets provided by the government with the housing scheme endowed under IAY Indira Awas Yojana, methodology adopted for the study in terms of design is descriptive in nature and the approach employed is mixed method with quantitative and qualitative data keeping in track with the help of Amartya Sen's Capabilities theory in the assessment of livelihood and the effect of alcoholism among the tribal population. It is an in-depth study of ten families from the hamlet of Badiyadukka in Kasaragod Taluk and Kedumbadi in Manjeshwaram Taluk with the total population of 60 and 140 respectively, with the help of semi structured interview schedule, key informant interview and participant observation of the hamlets and Koraga homes.

FINDINGS AND RESULTS OF THE STUDY

There are more than 40 hamlets in Kasaragod for Koraga tribal population in the size of small and large in the taluks of Manjeshwaram and Kasaragod. The district is home for second largest tribal population in Kerala next only to Wayanad district. Koragas, who are enumerated to be 1803 in total numbers with 530 families are the only PVTG in the district of Kasaragod with large number of schools dropouts and various health issues with rampant cases of substance abuse among their youth and others alike.

The family of Rema (name changed) is a single parent with 3 children who works as construction worker MNGREGA worker and also sometimes makes baskets has the harrowing story of separation from her drinking husband, who now lives away alone from her with no family, without any contact with his wife and children. it is only Rama who has brought up her kids and imparted them with school education as her elder daughter works at some shopping market in Kannur where she possess a degree in education and somehow adds

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to the home's expenditure Rema has other two boys one has left his plus two education in midway and do some odd jobs other is studying in upper primary class at nearby school.

Rema's family's maintenance is by her meagre earnings from the diversified works she takes up in the hamlet and outside of it. Her husband has deserted her in the youthful days of hers as she is still 46 years old, when asked about the reasons she cites about the binge alcoholism he was involved into which made him to resort into silence and never take care of the house needs and sleep at other places at night without any communication with family. This in the case of Rama who happened to work as the secretary for the Koraga Welfare Front with local name as she is only among few with cooking gas with the proper utensils and comparatively good latrines.

It has been observed from the study that in Badiyadukka hamlet majority of the youth 80 per cent and old are into the alcoholism in the hamlet where they get into the home with inebriated conditions. This amounts to the problems of exploitation from the outsiders who lure the koraga youth to work at their place for a substandard quality of local alcohol instead of the pay required. More than half of the youth responded that they more than half of their income toward the alcohol and other drugs.

The lower age for the alcoholism starts from 16 years as the youngsters see the relatively adults among their hamlets in the forms of fathers, brothers and uncles into the drinking and gradually they too take up this and becomes addicted to it where they spend a larger chunk of amount of day's labour to purchase the locally available liquors from some vendors from Karnataka and or bordering panchayats.

During the study there was an instance of suicide committed by a man with whom the researcher had a detailed talk and conversation earlier days with regard to their basket making occupation, where the man detailed out their occupation and its marketing process with clear voices and seemed very much occupied with his basket making process. It was really hard times for his wife and her father to believe and come into the terms, they were married before 3 years and were not having any kids, though the man was into alcoholism but was okay with the fact even they had a new house constructed nearby their current one with the funds from IAY, his wife is still in dark with a pall looming future to look forward in askance why at all he did commit such an act.

It was observed from the study that youth in the age group of 16 – 29 are reluctant to admit that they are into the dependence of alcoholism as they spend a larger amount of their money for the substance. Even there are elder population among males and females who are very much addicted to the alcohol where they get it from their small revenues generated by the basket making. The older population are suffering from many health issues from Cancer to TB, the head of the hamlet is one affected with TB and other many diseases.

The situation is comparatively quite better off in the hamlets of Kedumbadi which has more than 140 families in Manjeshwaram Taluk, where the majority of the Koraga there are Christian convert who keep a close contact with their local church built seven decades earlier. The alcoholism does exist among few households, but it is not prevalent among the youth as the case is from Badiyadukka. The youth from this hamlet work in different areas in service sector to basket making whereas the younger among them also do attend the schools nearby the church and undergo the training programmes in different ITIs and other vocational

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education centres. The researcher could encounter few of the youth who are into the alcoholism with a smaller number of working days from the relatively poor families.

Majority of the Koraga youth in Badiyadukka hamlet in Kasaragod taluk are not bothered about their future, the dropout rates are much higher among the students of Koraga as this is evident in the recently initiated ashram school in Kundamkuzhy for Koragas where there had been staggering amount of drop outs of Koragas where in which the school was later put into the form of accommodation to the non Koaga other tribal population. Though the hamlet has a single teacher school functioning but the Koraga youth have less idea about the activities going on there.

The health issues are common among the youth and old population alike due to the dependence of alcoholism prevalent among them. Their intake of fruits or other vegetables and meats are very minimal whereas they prefer one type of meal or the unhealthy unsuitable food for their breakfast and lunch like the condiments from bakers or confectioners. This shows their uncaring attitude or moreover the lack of awareness towards the ill effects of these intake into their major mealtime depriving them of the much-needed nutritional intakes or minimum proteins.

DISCUSSION

Widespread presence of nutritional and infectious diseases, social and economic deprivation, hazardous and accident prone environment and lack of organized system are some of the major reasons in the literature given the higher prevalence alcohol intake among tribals, this is what the study from IIPS Indian Institute of Population Studies in 2008 states along with the various health issues and various environmental conditions. This can be very vividly seen among the tribal population of Koraga in Kasaragod. There are many studies which suggest that in national and international levels that instances of alcoholism is relatively high among the tribes (Subrahmanian ;2006).

As this is a culturally embedded behaviour, social environment could be a main reason in the likes of low self-esteem. Perhaps, the severity of the dependence may be a direct consequence of the attitude and belief of the person toward alcohol intake, even the leisure activity turns out to be the most dangerous tendency which takes the shape of addiction, it is in the occasion of consuming alcohol to have a good times with friends, peer pressure or to identify oneself in a group, many times it also is resorted to cope up with the distress emotional stage in terms of less income and livelihood depletion. Here, the social influence is more vital one aspect to see the effect as the case with the Koraga population mainly among the young males and older males and females.

Here in the case of Koraga youth any strong mechanism of deterrence from the family and peers is negligent or nonexistent as this is seen in a nonchalant normalcy at the hamlets. Against which the reaction simply becomes the helplessness shown in the facial expression or the least consideration and concerns shown by the elders who themselves are addicted to the alcohol intake when they are being enquired about the interference. Somehow concerned are the women of the hamlets who are in a way disturbed by this attitude of their young boys and men but have less voice to oppose or somehow get conditioned towards the social pressure and silent normalcy.

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many households the young boys who earn are not accountable to the home as they spend the money what they get from the works or other in alcohol, pans tobaccos and other varieties of drugs which they decline to name. Koragas traditional occupation of basket making is in the stage of decline as majority of the household complain about the less tree barks and creepers from the forests or the harassment of the authorities towards their access to the forests and the larger expense involved in carrying the creepers from distant places even from the neighbouring districts of other Karnataka or quiet often to fetch those by walking kilometers in search of the raw materials. In short, the younger generations are losing interest in the basket making and elders complain about the depleting resources as this population have less involvement in the other occupations and diversified other works.

CONCLUSION AND SUGGESTIONS

Educating and awareness creation along with the immediate remedial care for those who are in the dangerous positions of profound addiction can be a major reform media for an individual to shape a generation with the larger aspiration and ambition which proves as the most influential intervention for a state in determining the uplift a society. Thus the investment in the education and awareness could lead to better harvest in the benefits for an overall welfare of a nation where a creation of individual with the sound mind health and soul creates the conducive atmosphere to his/her environs wherein which this proves as a greater deterrence of the major of the social evils and well adherence towards the best practices for the sustainable lifestyle. Even we talk about the good share of our GDP towards the education the tribal picture in the educational attainment remains in tatters, there are problems of the low enrolments, high dropout rates, and lack of awareness among the parents, low quality infrastructures and systems in place.

There should be the involvement of a task team, civil society, counsellors and moreover the concerns of the authorities to address this issue and make the people aware about the ill practices of the substance abuse, not only this there can be an overhaul of their livelihood programmes with the best use of Ashram schools in the hamlets run by the educated and qualified hands of the tribal population giving the due attention towards the general population in the hamlets in terms of the capabilities approach proposed by Amartya Sen in 1. increasing of their working days at least 200 days in a year as what (Lipton 1991;1993) opines, with due care given towards the income, production and recognition, 2 poverty reduction by increased attention towards education, health care and other social services.

Increasing the capabilities for the diversification, making them resilient toward the vulnerabilities of livelihood adaption, training programmes on the income generation activities especially among woman by forming SHGs and intensifying the Kudumbashree activities and also the natural based resource sustainability (NBRIS) to face the stresses and shocks in the lives with due importance given towards the assets and capitals of livelihood. to orient them towards the more responsible activities focusing upon the best health practices along with the intellectual growth and welfares sustenance conscious about the harms and ill practices in future thus to contribute better to his/her family's subsequently community's welfare and prosperity which eventually will be for the nation's.

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Conflict of Interest

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