

Research Paper

The Impact of Urbanization on the Mental World of Indigenous Communities in Birbhum District

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ABSTRACT

Birbhum district, located in the Rarh region of West Bengal, is home to a significant indigenous population, primarily comprising the Santhal, Kol, Munda, Oraon, and other tribal groups. These communities have historically maintained a deep, nature-dependent lifestyle rooted in agriculture, forest resources, and communal traditions. Rapid urbanization—driven by industrialization, mining activities, improved transportation, education expansion, mass media, and digital technologies—has profoundly influenced their cognitive and emotional landscapes. While urbanization offers access to modern education, economic opportunities, rights awareness, and healthcare, it simultaneously exerts pressure on traditional languages, collective values, cultural practices, and spiritual connections to nature. This often results in heightened stress-related disorders, identity crises, depression, anxiety, and substance abuse, despite overall mental morbidity rates remaining relatively stable in some studies. This paper examines the multifaceted causes, empirical findings from relevant research, consequences, and potential solutions—including culturally sensitive interventions—to safeguard the mental health of these communities amid ongoing urbanization.

Keywords: *Indigenous communities, Santhal tribe, modernity, Birbhum district, mental health, urbanization, cultural erosion, stress disorders*

India's indigenous or tribal populations, including those in West Bengal, have long thrived in harmony with nature, relying on forests, rivers, and seasonal agriculture for sustenance and spiritual fulfillment. In Birbhum district, indigenous groups such as the Santhals (the largest tribe), Kols, Mundas, and Oraons form a vital part of the cultural fabric. According to the 2011 Census, Scheduled Tribes constitute about 6.74% of Birbhum's population, with higher concentrations in rural blocks like Rampurhat, Suri, and Illambazar. These communities are custodians of unique traditions, including nature worship, communal festivals like Sohrai (harvest) and Baha (flower), folk music, dance (e.g., Sohrai paintings and Jhumar dance), and a collective ethos emphasizing harmony with the environment.

Urbanization, however, is a complex, multidimensional process that reshapes not only physical landscapes but also psychological and social worlds. Post-independence industrialization, particularly mining (e.g., basalt quarrying in northern Birbhum) and urban expansion, has accelerated since the 1990s. This has led to land acquisition for industries, displacement, migration to urban fringes, and exposure to mainstream consumer culture.

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Historical traumas—colonial exploitation, post-independence displacement policies, and ongoing land alienation—compound these changes. The result is a profound shift in livelihood patterns, social structures, and mental well-being. While some gain from education and jobs, many experience alienation, loss of identity, and increased psychological distress. This paper explores these dynamics, drawing on empirical evidence to highlight dual impacts and propose balanced interventions.

Impact of Urbanization: Key Causes

Urbanization generates multiple pressures on the indigenous mental world through interconnected socio-economic, cultural, and environmental channels.

Land and Occupational Crisis

In Birbhum, mining projects and industrial development have led to widespread land acquisition, eroding traditional forest- and agriculture-based livelihoods. Santhals, historically dependent on shifting cultivation and forest produce, now face economic marginalization. Quarrying in areas like Rampurhat-I block has transformed resource bases, pushing many into daily wage labor with low pay (often Rs. 60–80 per day historically, insufficient for family needs). This results in chronic poverty, unemployment, debt, and family instability—key triggers for mental stress. Land loss also fosters identity crises, as land is not merely economic but tied to ancestral spirits and communal belonging.

Cultural Disconnection and Erosion

Urban environments accelerate the decline of traditional practices. Festivals like Sohrai (wall paintings depicting nature) and Baha are less observed in urban fringes due to space constraints and modern influences. Santhali language use diminishes among youth exposed to Bengali/Hindi media and education. Spirituality—animistic and nature-centric—clashes with urban materialism, leading to spiritual voids. Studies note that modernization erodes weaving, folk arts, and communal rituals, fostering feelings of cultural loss, alienation, and depression. In Birbhum's Santhal communities, shifts to asbestos-roofed, brick houses replace traditional mud huts with artistic expressions, symbolizing broader devaluation of heritage.

Socio-Economic Inequality and Health Disparities

Urbanization amplifies inequalities: limited access to quality education, healthcare, and jobs perpetuates poverty cycles. Among West Bengal's tribes, alcohol use is alarmingly high (40.7%–72.4% in various studies), often as a coping mechanism for urban stress. Recent meta-analyses indicate depression prevalence around 14% and anxiety at 3% among India's tribes, with higher risks in transitioning areas. In urbanized settings, dual healthcare systems emerge—blending traditional Ojha healers with modern services—but stigma and inaccessibility persist. Adolescents face emotional problems (e.g., 5.12% in some Santhal samples) and conduct issues (9.61%), exacerbated by migration and family disruptions.

Environmental Degradation and Lifestyle Changes

Mining-induced pollution, deforestation, and distance from nature disrupt the symbiotic relationship indigenous people have with their environment. Suicide attempt rates (14–22% in broader tribal studies) link to such stressors. Digital media introduces new anxieties (e.g.,

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social comparison), while urban noise and crowding heighten neurotic disorders. Historical traumas like colonialism and forced displacements amplify vulnerability, making indigenous groups more susceptible to urbanization's psychological toll.

RESEARCH FINDINGS

Empirical studies confirm urbanization's nuanced effects. Nandi et al. (1992) compared rural and urban Santhals in West Bengal, finding similar overall mental morbidity but significantly higher stress-dependent disorders (e.g., neurotic conditions) in urban groups. This pattern holds in later reviews: while total morbidity may not spike dramatically, stress-related issues rise.

A 2021 systematic review on Scheduled Tribes reported alcohol use disorders at 40%, suicide attempts 14–22%, common mental disorders 27%, anxiety 6.4%, and depression 8.3%. In West Bengal-specific contexts, Santhal adolescents show elevated emotional and behavioral problems. A 2025 meta-analysis estimated depression at 14% and anxiety at 3% among Indian tribes, with urbanization as a key modifier.

Ethnographic work in nearby districts (e.g., North 24 Parganas) reveals mental health intertwined with spiritual beliefs (e.g., spirit possession as explanatory models), which intensify under urban stress. Recent Birbhum-focused studies on non-communicable diseases highlight rapid socio-economic transitions increasing risks like hypertension, indirectly linked to mental strain. Overall, urbanization exacerbates stress, addiction, and identity-related disorders without proportionally raising total morbidity.

Solutions and Recommendations

Addressing these challenges requires integrated, culturally attuned approaches:

Culturally Sensitive Mental Healthcare — Blend traditional practices (Ojha healing, herbal remedies, community rituals) with modern psychiatry. Train indigenous counselors and establish community clinics respecting animistic beliefs.

Awareness and Education Initiatives — Run stigma-reduction workshops via schools, ICDS centers, and NGOs. Promote life skills and resilience programs, as seen in Purulia interventions enhancing self-determination.

Policy Interventions — Strengthen land rights under PESA/FRA acts, create tribal employment quotas in local industries, and allocate dedicated mental health budgets. Integrate tribes into the National Mental Health Programme with localized adaptations.

Community-Led Preservation — Support cultural revival through festivals, language education, and eco-tourism. Monitor via Birbhum-specific longitudinal studies using culturally validated tools.

Broader Support — Collaborate with NGOs for livelihood diversification (e.g., sustainable farming) and digital literacy to mitigate negative media influences.

These steps can mitigate negative impacts while harnessing urbanization's benefits.

CONCLUSION

Urbanization in Birbhum exerts a dual influence on indigenous mental worlds: opening doors to education and economic mobility while eroding cultural anchors, fostering stress, depression, addiction, and identity loss. Empirical evidence underscores higher stress disorders among urban tribes, rooted in land alienation, cultural disconnection, and inequality. Preserving traditional elements—through sensitive policies and community empowerment—is essential for enabling these groups to thrive amid change. Urgent, proactive measures will ensure indigenous communities in Birbhum enjoy development's fruits without sacrificing mental well-being or heritage.

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Conflict of Interest

The author(s) declared no conflict of interest.

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