

Culturally Sensitive Development: Bridging Policies, Cultural Preservation and Tribal Identity with an Emphasis on Maternal-Child Health in Wayanad, Kerala

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ABSTRACT

This study examines culturally sensitive development among tribal communities in Wayanad, Kerala, with particular emphasis on maternal and child health, tribal identity, traditional knowledge, and state-led welfare interventions. Despite Kerala's relatively favourable health indicators, tribal communities in Wayanad continue to experience substantial challenges related to child malnutrition, infant mortality, maternal health, and access to healthcare. The study investigates whether existing policies and legal frameworks adequately recognise tribal identities, customary practices, and traditional knowledge systems, or primarily follow a top-down integration approach. Particular attention is given to early marriage, living arrangements, dietary practices, traditional healthcare knowledge, and their implications for maternal and child health. A mixed-methods approach is proposed, combining structured surveys, semi-structured interviews, focus group discussions, and documentary analysis of government policies and relevant legal frameworks. The study seeks to identify gaps between policy implementation, cultural practices, and community needs and proposes a balanced approach integrating recognition with redistribution.

Keywords: Tribal Identity, Maternal-Child Health, Traditional Knowledge, Infant Mortality, Culturally Sensitive Development.

STATEMENT OF PROBLEM

A critical analysis of the tribal communities in Kerala, particularly in Wayanad, from the multifaceted perspective of culture, health, and law reveals a complex scenario. The tribal communities, comprising more than one per cent of the state's population and 37 diverse tribes, Wayanad, home to a significant portion of Kerala's tribal population (151,443

people), and seven scheduled tribes residing, experience disproportionately high rates of child malnutrition and mortality compared to the state and national levels. Even though Kerala has a higher nutritional standard and lower infant mortality rate than other states, the condition is not similar in tribal areas. The most populated tribal area district, Wayanadu, has shown 22.5% underweight, 31.3% stunting, and 16.1% wasting among under five years tribal children.

Child malnutrition and infant mortality emerge as significant concerns, posing threats to future generations and underscoring the profound disconnection between traditional ways of life and modern legal and political structures. Many tribal populations still inhabit forested areas and adhere to traditional customs and knowledge systems.

The state has implemented welfare policies and laws to integrate tribal communities into the societal mainstream. However, these initiatives have predominantly employed a top-down approach, neglecting tribal people's identity, culture, and traditions. This lack of alignment between government integration efforts and tribal identity has resulted in problematic tribal integration.

The issue of infant mortality in tribal communities exemplifies this problematic integration. While the state has primarily focused on nutritional schemes to address infant mortality, such initiatives have not substantially reduced mortality rates. Furthermore, the correlation between maternal and child health has sometimes been overlooked. Unhealthy mothers can contribute to the vulnerability of their offspring, yet the state has failed to consider this connection in its policies. Factors such as early marriage, cohabitation, and polygamous unions, prevalent in tribal communities, impact maternal and child health but remain inadequately regulated by existing laws.

The development and implementation of tribal health policies require reassessment to address tensions between tribal knowledge, traditional practices, health interventions, and legal frameworks such as the POCSO Act and the Prohibition of Child Marriage Act. While culturally significant, practices like early marriage and polygamy have detrimental effects on maternal and child health, necessitating careful consideration in policy formulation.

It is essential to analyse the role of the state in tribal integration, with a focus on recognising tribal identity rather than merely redistributing resources. Researchers should evaluate whether state policies and legal frameworks addressing infant mortality are based on recognition or redistribution theories and strive to balance these theories in formulating policies and schemes.

RELEVANCE OF RESEARCH

This study is significant in the field of knowledge as it focuses on the customary, cultural, and traditional practices of tribal communities in Wayanadu. It particularly examines the conflicts arising from state-sponsored development policies, legal frameworks, and tribal communities' traditional knowledge systems.

While previous studies have delved into the root causes of increased child mortality rates, they have primarily focused on issues related to implementing state-sponsored development policies. However, there remains a gap in the literature regarding the relationship between infant mortality and the traditional practices prevalent in tribal areas, such as early marriage, living arrangements, traditional knowledge, and dietary habits. These traditional practices and knowledge systems may either positively or negatively influence infant mortality rates. All the studies related to tribal integration have biased the Western ideas of colonization of tribal areas and the application of Western epistemology in the integration process. The Western epistemology has wholly overlooked the traditional knowledge system of tribal communities and artificially formulated top-to-bottom level policies for tribal integration. This study has not focused on redistribution since the redistribution policies are fundamentally economic; here, the researcher will focus on theories of “recognition” and a balanced approach to recognition and redistribution to address the problem of child mortality in tribal areas.

This study examines the root causes of infant mortality through the lens of traditional practices and state-led policies and regulations. Additionally, it seeks to analyse the legal framework concerning early marriage and minor sexual relationships, exploring their conflicts with customary practices and their impact on child mortality.

By addressing these gaps, the study aims to provide valuable insights into the complexities surrounding infant mortality in tribal communities, shedding light on the intersections between traditional practices, legal frameworks, and state-led policies.

LITERATURE SURVEY

Marriage and Family among the Tribals of Kerala: A Study of the Mannans of Idukki District

The study delves into marriage practices and familial structures within the Mannan tribal community of the Idukki district. It examines the dynamics of marital relationships and the influence of various marriage forms on tribal settlements. Notably, the Mannan community adheres to monogamy, mirroring non-tribal societal norms and eschewing practices such as living relationships and polygamy. State-led interventions and reformative initiatives have significantly altered traditional marriage patterns within Mannan settlements.

However, the study’s methodology reflects a Western-centric perspective on tribal communities, viewing them solely as passive recipients without significant contributions to tribal conceptualisation. It overlooks the richness of cultural practices and the intrinsic tribal identity, instead peripherally highlighting state intervention. Furthermore, the study fails to analyze the institution of marriage and family structures in relation to infant mortality rates, thus neglecting a crucial aspect of tribal health and well-being.

Prevalence of Malnutrition in under Five Age Group of the Tribals in Wayanad District of Kerala, South India: A Community-based Cross-sectional Study

This cross-sectional study was conducted within tribal communities in Wayanad. It identified a higher susceptibility to malnutrition and mortality among children under the age of five. However, the research did not delve into the underlying causes of malnutrition and infant mortality. Furthermore, it failed to analyse the impact of state policies and legislation on child health and infant mortality rates.

Prevalence of Undernutrition among Tribal Preschool Children in Wayanad District of Kerala

The study briefly touches upon cultural practices like breastfeeding and weaning foods. Still, a more in-depth exploration of how these practices influence nutritional status could offer valuable insights. Investigating traditional food preparation methods, cultural beliefs surrounding certain foods, and their impact on child nutrition could provide a deeper understanding of nutritional patterns within tribal communities.

Additionally, given the significant role of cultural factors in shaping health outcomes, research on culturally sensitive healthcare delivery models tailored to tribal communities could be fruitful. Assessing the acceptability and effectiveness of culturally adapted interventions to improve nutrition and health outcomes could pave the way for more effective healthcare delivery in these communities.

Exploring Maternal and Child Health Among Tribal Communities in India: A Life Course Perspective

This study constitutes a cross-sectional examination of maternal and child health within a Madia Gond tribal community in Maharashtra. It acknowledges the inherent limitation that each tribe may harbour distinct reservations and concerns regarding maternal and child health. However, the research overlooks the impact of government policies and regulations to reduce infant mortality rates. Additionally, while the study explores nutritional deficiencies among tribal communities and the benefits of government-implemented policies, it fails to adequately substantiate why significant maternal and child health improvements have not been realized despite several government initiatives.

Furthermore, the study neglects to consider the importance of traditional practices within the tribe in relation to nutritional benefits. Moreover, it does not delve into the mental health of mothers and its potential impact on child health outcomes. Additionally, there is a gap in analysing the intervention of various statutes and policies regarding access to healthcare, prevention of regressive practices, and the overall enhancement of maternal and child health.

Future research endeavours should aim to examine the collaborative efforts between government agencies, non-governmental organisations, and community stakeholders in bolstering maternal and child health outcomes within tribal communities. Such exploration could offer valuable insights into practical strategies for addressing the multifaceted challenges faced by these communities and ultimately contribute to improved health outcomes for mothers and children.

RESEARCH QUESTIONS

1. Why did the state-sponsored development activities fail to reduce the infant mortality rate?
2. Whether the state-sponsored welfare policies and legal framework had recognized the traditional knowledge system and tribal identity regarding the concerns of infant mortality
2. Whether early marriage, child marriage and living relationships among tribal communities in Wayanad impact the health outcomes of adolescent mothers and their children, thereby contributing to child mortality rates within these communities?
3. What legal and policy interventions are in place to address the concerns of maternal health and child mortality within tribal communities in Wayanad, and how effective are these interventions in protecting the rights and health of mothers and children?
4. How does the lack of recognition of tribal identity and their traditional knowledge contribute to infant mortality?
5. How do factors such as lack of education, resources, and livelihood contribute to the infant mortality rate?

RESEARCH HYPOTHESIS

Hypothesis 1: Traditional practices such as early marriage, polygamous practices and living relationships within tribal communities contribute significantly to the increase in infant mortality rates.

Hypothesis 2: The absence of recognition and integration of tribal identity and traditional knowledge systems correlates with higher infant mortality rates within tribal communities.

RESEARCH METHODOLOGY

Study Design

This research will use a mixed-methods approach, combining qualitative and quantitative techniques to comprehensively investigate the multifaceted dynamics influencing maternal-child health outcomes among tribal communities in Wayanad.

The quantitative part will be a structured survey conducted among tribal people in selected areas of Wayanad to collect quantitative data on maternal age during marriage, prevalence of early marriages, maternal health indicators, child mortality rates, socioeconomic status and access to healthcare services, etc. and Qualitative part will be a Semi-structured interviews will be conducted with crucial focus groups including tribal community leaders, healthcare providers and government officials to gain insights into the cultural practices, traditional knowledge systems and perceptions regarding maternal-child health.

Focus Group Discussions

Focus group discussions will be organised with community members to explore cultural beliefs, attitudes, and practices related to childbirth, infant care, and maternal health-seeking behaviours.

Documentary Analysis: Government reports, policy documents, and legal frameworks related to tribal welfare, maternal-child health programs, and laws such as the POCSO Act and the prohibition of Child Marriage Act, 2006, will be analysed to understand the regulatory landscape and its implications for tribal communities.

- Sampling Strategy (Purposive sampling method)-Tribal communities will be purposively selected based on their geographic distribution and representation of various cultural practices.
- Sample Size Determination- This will be based on the population size of the particular tribal communities and the chosen level of precision for statistical analysis.

Tentative Chapterization

1. Introduction
2. Analysing the Root Causes of Infant Mortality Among Various Tribal Communities
3. Conceptualising Traditional Knowledge Systems in Various Tribal Communities in Wayanad Related to Maternal and Child Health
4. Traditional Cultural Practices Prevalent Among Tribal Communities Related to Marriage, Sexual Relationships, and Family Dynamics
5. Intervention of State-Sponsored Welfare Activities and Legal Frameworks in Tribal Communities in Relation to Maternal Health and Child Mortality
6. Findings, Suggestions, and Conclusion

REFERENCES

- Population statistics 2011 census | Scheduled Tribes Development Department (kerala.gov.in)
- International Journal of Community Medicine and Public. Health Krishna A et al. Int J Community Med Public Health. 2022 Oct;9(10):3811-3815 <http://www.ijcmph.com> pISSN 2394-6032 | eISSN 2394-6040
- National Family Health Survey-5 Wayanad. Factsheet: 2019-2021.

The Problematics of Tribal Integration Voices from India's Alternative Centers, ISBN 978-81-929930-3-4 . The Shared Mirror Publishing House, Hyderabad SR Bodhi, Bipin Jojo

JACOB JOHN KATTAKAYAM, Journal of Comparative Family Studies , AUTUMN 1996, Vol. 27, No. 3

Arun Krishna S. R.*, Parameswari Srijayanth ,International Journal of Community Medicine and Public Health.

International Journal of Advanced Medical and Health Research · January 2015 DOI: 10.4103/2349-4220.159135.

Glob J Health Sci. Author manuscript; available in PMC 2024 Jan 17,