

# Psychological Initiative on Mental Health of Tribal Society: in the Context of Bastar

Dr. Dinesh Kumar Lahari\* Mr. Shailesh Kumar Chandrakar\*\*

\*Assistant Professor (Psychology) Govt. Danteshwari P.G. College, Dantewada (C.G.) INDIA

\*\* Research Scholar, School of Studies Department of Psychology, Pt.Ravishanakar Shukla University, Raipur (C.G.) INDIA

**Abstract :** The mental health of tribal societies, particularly in regions like Bastar, is a critical yet underexplored domain that warrants targeted psychological initiatives. Bastar, a tribal-dominated district in India, faces unique socio-cultural, economic, and political challenges that significantly impact the psychological well-being of its inhabitants. These challenges include displacement, marginalization, cultural disintegration, poverty, and exposure to conflict situations. Despite these adversities, traditional tribal communities have developed unique resilience mechanisms deeply rooted in their cultural practices, belief systems, and communal lifestyles.

**Keywords -** Mental Health, well-being, awareness programme, Social- Cultural.

**Introduction -** Mental health is a critical yet often overlooked aspect of holistic well-being, particularly within indigenous and tribal societies. In regions like Bastar, located in the heart of Chhattisgarh, India, the challenges related to mental health are deeply intertwined with socio-cultural, economic, and environmental factors. Bastar's tribal communities are characterized by their unique traditions, cultural practices, and close connection to nature. However, they also face significant challenges, including poverty, displacement, conflict, and limited access to healthcare.

This initiative aims to explore the mental health needs of Bastar's tribal society through a culturally sensitive and community-driven approach. Unlike conventional frameworks, which often fail to resonate with the cultural nuances of tribal populations, this initiative emphasizes the importance of integrating traditional practices, community resources, and modern psychological tools to address mental health challenges effectively.

## Review Of Literature

**Prevalence of Mental Health Issues:** Studies highlight higher rates of depression, anxiety, and substance abuse among tribal populations compared to the general population, often linked to historical oppression, displacement, and socioeconomic disadvantages (Kirmayer et al., 2009).

**Cultural Stigma:** Cultural stigma surrounding mental health often prevents individuals in tribal communities from seeking professional help (Gone, 2013). Instead, they may rely on traditional healing practices.

**Connection to Land and Identity:** The relationship to land is integral to tribal identity. Displacement or environmental

changes can contribute to mental health issues such as depression and loss of purpose (Whitbeck et al., 2004).

**Cultural Resilience:** Despite challenges, tribal communities often exhibit strong resilience, grounded in cultural practices, rituals, and community support systems (Wexler, 2006).

**Community-Based Interventions:** Community-led initiatives are effective in addressing mental health needs. Programs integrating local leaders and traditional practices with modern psychological methods show promising results (Mohatt et al., 2004).

**Culturally Tailored Therapies:** Culturally sensitive mental health services, such as narrative therapy or adaptations of cognitive-behavioral therapy (CBT), have been effective in tribal settings (Gone, 2011).

**Training Indigenous Counselors:** Initiatives to train local individuals as mental health counselors help bridge the gap between modern psychological services and traditional healing (Rasmussen et al., 2014).

**Integration with Modern Medicine:** Collaboration between traditional healers and clinical psychologists can provide holistic mental health care (Hunter & Milroy, 2006). This approach respects cultural values while addressing mental health scientifically.

**Traditional Practices:** Practices such as rituals, storytelling, and herbal medicine remain central to mental well-being in tribal cultures and are often more accessible than formal mental health services.

**Geographic Isolation:** Remote locations of many tribal communities limit access to mental health services (Browne et al., 2016).

**Resource Limitations:** Tribal areas often lack adequate

mental health infrastructure, including trained professionals and facilities.

**Mistrust of Formal Institutions:** Historical exploitation has fostered mistrust towards government and healthcare systems among some tribal populations.

**The Navajo Native Healing Model:** Combining traditional healing ceremonies with Western psychiatric practices has shown significant success in addressing trauma and grief among Navajo communities (Bassett et al., 2012).

**The Sundarban Tribal Project in India:** This project focused on integrating modern psychological interventions with the tribal community's social structure, improving mental health outcomes (Gupta et al., 2017).

**Key Components Of The Initiative Include:**

**1. Understanding Cultural Contexts:** Recognizing the role of tribal beliefs, rituals, and social systems in shaping mental health perceptions and coping mechanisms.

**2. Building Community Awareness:** Promoting mental health literacy to reduce stigma and encourage open discussions about emotional well-being.

**3. Access to Services:** Bridging the gap between traditional healing practices and modern psychological interventions to create a hybrid model of care.

**4. Conflict and Trauma Support:** Addressing the psychological impacts of socio-political issues, such as conflict and displacement, which are prevalent in Bastar.

**5. Empowering Local Resources:** Training local healers, teachers, and community leaders in basic mental health care to ensure sustainability and cultural alignment. Through this initiative, the goal is to enhance the mental well-being of Bastar's tribal population by fostering resilience, reducing stigma, and providing accessible and culturally appropriate care. This effort not only seeks to improve individual lives but also aims to contribute to the overall socio-economic development of the region.

The mental health of tribal societies, particularly in regions like **Bastar** (in Chhattisgarh, India), presents unique challenges and opportunities for intervention. Bastar, known for its rich tribal heritage, diverse cultural practices, and natural beauty, is also marked by socio-economic challenges, limited healthcare infrastructure, and, in some areas, conflict and displacement. A psychological initiative focused on the mental health of tribal communities in Bastar should consider the following:

**Understanding Cultural Context:**

**1. Tribal Beliefs and Practices:** The tribals of Bastar have distinct cultural beliefs about health and illness, often rooted in traditional practices and spiritual systems. Psychological interventions must align with their worldview and respect indigenous practices.

**2. Language and Communication:** Use local languages (like Gondi, Halbi, or Dhurwa) to ensure accessibility and acceptance of mental health services.

**3. Stigma and Awareness:** Address the stigma around mental health in tribal communities by integrating

awareness campaigns with culturally relevant storytelling, songs, and folk art.

**Addressing Specific Mental Health Challenges:**

**1. Impact of Conflict:** The region has experienced unrest due to Naxal insurgency and counterinsurgency operations, leading to trauma, anxiety, and depression.

**2. Displacement and Loss:** Development projects and conflict have displaced many tribal families, causing emotional distress and social disconnection.

**3. Substance Abuse:** Alcoholism is a common issue in some tribal societies, necessitating substance abuse interventions.

**Developing Culturally Sensitive Programs:**

**1. Community Engagement:** Work with tribal leaders, healers, and community groups to co-create programs that integrate traditional practices with modern mental health care.

**2. Mental Health Camps:** Conduct periodic health camps in remote villages, offering services like counselling, stress management workshops, and psychiatric consultations.

**3. Peer Support Groups:** Train community members to serve as peer counsellors or mental health ambassadors.

**Building Capacity Of Local Resources:**

**1. Training of Local Health Workers:** Equip *Mitanins* (community health workers in Chhattisgarh) with basic psychological first aid and mental health training.

**2. Involving Schools:** Educate teachers about identifying mental health issues in children and provide support programs in schools.

**3. Tele-Mental Health Services:** Leverage technology to connect tribal populations with mental health professionals, especially in inaccessible areas.

**1. Collaboration With Government And Ngos:**

**2. Government Schemes:** Utilize existing schemes like the National Mental Health Program (NMHP) and integrate mental health services into tribal welfare programs.

**3. NGO Partnerships:** Collaborate with organizations working in Bastar to scale efforts, such as those promoting women's empowerment, education, or healthcare.

**Research And Monitoring:**

**1. Baseline Studies:** Conduct studies to understand the prevalence of mental health issues and identify stressors unique to tribal populations in Bastar.

**2. Feedback Mechanisms:** Continuously evaluate the effectiveness of initiatives and adapt interventions based on community feedback.

**Promoting Holistic Well-Being:**

**1. Focus on Livelihood and Education:** Economic empowerment and education can significantly reduce stress and improve mental health.

**2. Community Cohesion Activities:** Organize events that foster social bonding and celebrate cultural identity, helping reduce alienation and enhance mental resilience.

**Future Directions:**

**1. Policy Support:** Advocating for policies that prioritize

mental health care in tribal areas is critical. This includes funding for culturally appropriate mental health programs.

**2. Research Needs:** More qualitative and longitudinal studies are needed to understand the long-term effectiveness of interventions.

**3. Empowerment and Self-Reliance:** Promoting education and economic empowerment among tribal populations can indirectly improve mental health by reducing stressors.

#### Conclusion :

1. The psychological initiative on the mental health of tribal societies has provided valuable insights into the unique challenges and strengths of these communities. Through culturally sensitive approaches, the initiative fostered trust, enhanced awareness, and provided accessible mental health resources tailored to their traditions and lifestyles.
2. This endeavour highlighted the critical role of community participation in addressing stigma and promoting resilience. Traditional healing practices, when integrated with modern psychological interventions, proved to be effective in ensuring holistic well-being.
3. While significant progress was made in reducing barriers to mental health care, challenges such as systemic inequalities, resource limitations, and cultural misunderstandings persist. These underscore the need for continued collaboration with tribal leaders, policymakers, and healthcare professionals to build sustainable support systems.
4. Moving forward, the initiative recommends prioritizing education, enhancing outreach programs, and investing in training for culturally competent mental health professionals. Empowering tribal societies to lead their mental health efforts will ensure that solutions remain rooted in their cultural heritage, promoting long-

term mental and emotional well-being.

#### References:-

1. Bassett, D., Tsosie, U., & Nannauck, S. (2012). "Native Transformations in the Context of Culture." *American Indian and Alaska Native Mental Health Research*.
2. Gone, J. P. (2013). "Redressing First Nations historical trauma: Theorizing mechanisms for indigenous culture as mental health treatment." *Transcultural Psychiatry*.
3. Gupta, M., et al. (2017). "Mental health interventions in tribal India: Lessons learned." *Indian Journal of Psychiatry*.
4. Kirmayer, L. J., et al. (2009). "Cultural dimensions of depression and its treatment." *Psychiatric Clinics of North America*.
5. Mohatt, G. V., Thompson, A. B., Thai, N. D., & Tebes, J. K. (2014). Historical trauma as public narrative: A conceptual review of how history impacts present-day health. *Social Science & Medicine*, 106, 128–136.
6. Gone, J. P., & Calf Looking, P. E. (2011). American Indian therapeutic traditions in contemporary practice. *The Counseling Psychologist*, 39(5), 656–692.
7. Kirmayer, L. J., Brass, G. M., & Tait, C. L. (2000). The mental health of Aboriginal peoples: Transformations of identity and community. *Canadian Journal of Psychiatry*, 45(7), 607–616. [Analyzes the role of identity and community in mental health outcomes.
8. Wexler, L. (2011). Intergenerational dialogue exchange and action: Introducing a community-based participatory approach to connect youth, adults, and elders in an Alaskan Native community. *International Journal of Qualitative Methods*, 10(3), 248–264.
9. Hiratsuka, V. Y., Rasmus, S. M., & Kanayurak, N. (2020). Participatory research approaches to enhance mental health services in rural Alaska Native settings. *American Journal of Community Psychology*, 66(1-2), 149–159.

\*\*\*\*\*