

Inordinate Alcohol Consumption is a Social Problem: A Study among the Lodha Tribal Population

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Abstract: Consumption of locally brewed alcoholic beverages is considered a customary practice by the indigenous communities in India. However, unrestrained alcohol use by members of the tribal communities in India has been widely reported. While most studies focus on the cultural and economic significance of ethnic beverages, lesser number of studies focuses on the impact of alcohol consumption on these populations. There is a further dearth of systematic study on the adverse social impact of alcohol consumption on the tribal communities. The present study attempts to determine the prevalence of alcohol consumption and its social impact from some identified Lodha tribal villages of Paschim Medinipur district of West Bengal. Data for the study was collected through in-depth interviews and focus group discussion. The theoretical framework of thematic analysis has been used for data analysis. With the application of the framework three adverse social impact of inordinate alcohol consumption were identified namely domestic abuse, child care negligence and impaired work productivity.

Keywords: unrestrained alcohol consumption, social problem, Lodha tribe, Paschim Medinipur

Background

The indigenous population of India notified as Scheduled Tribes (STs) constitutes 8.6 per cent of the total population of the country (Census of India, 2011). They have a distinct history and consequentially a habitat. Often or not their habitat is geographically isolated. The most distinct characteristic of the tribal population of the country lies in

their socio-cultural practices. One such prevalent practice among the tribal population is the consumption of alcoholic beverages, especially in-house prepared alcoholic beverages. It is widely recognised that alcohol, in the tribal society has a traditional and ritual importance and is consumed on various social, cultural and religious occasions. However, the issue of unrestrained alcohol use within the indigenous communities in India has been a growing concern (Ho & Mishra, 2017). A study from Madhya Pradesh showed that consumption of alcohol among the tribal population was more than double than the corresponding non-tribal population (Kumar & Tiwari, 2016). Another study (Chaturvedi et al., 2019) among some tribal communities of Arunachal Pradesh found high prevalence of alcohol use among tribal males (49.3 per cent) and females (27.9 per cent). Again, a study conducted among tribal men in Wayanad, Kerala identified social conditioning and early financial autonomy as the reason behind the initiation of alcohol consumption at a young age in the study population (Sadath et al., 2019).

The tribal communities in India are among the weakest sections of the population with regard to their socio-economic condition. Persistent poverty and marginalization has made the population extremely vulnerable. Alcohol misuse and its consequences significantly exacerbate the vulnerability. The pernicious consequences of excess alcohol consumption are mostly seen in terms of health impacts such as liver disease and mental health issues. However, its socio-economic impacts such as strained familial relationships and reduced productivity at work are equally perilous (Chowdhury et al., 2006) but are less frequently addressed. All these impacts have long term repercussions that make it difficult for individuals and families to escape the predicament thus reinforcing their vulnerability. Inordinate alcohol consumption within the tribal communities therefore should not only be treated as a public health concern but as a social problem too.

There are numerous studies on the issue of alcohol consumption in tribal communities across India. The subject matter of these concerned studies has a wide range. While many studies focus on the preparation (Dhal et al., 2010; Kumar & Rao, 2007), diversity and health benefits of ethnic beverages (Rawat et al., 2021), some also discuss the cultural and economic significance of ethnic beverages (Saha et al., 2015). Comparative studies of alcohol use between tribal and non-tribal population, region specific (Ray et al., 2018), and tribe specific (De & Kundu, 2015; Sandesh & Annapurna, 2014) studies also contribute to the literature. When it comes to assessing the impact of alcohol consumption a greater number of studies were concerned with its effect on psychiatric morbidity (War et al., 2020). However, there is a dearth of systematic study on the adverse social impact of alcohol consumption in the tribal communities. Still less discuss the impact of inordinate alcohol consumption on families in the tribal communities. The present study attempts

to determine the prevalence of alcohol consumption and its social impact from some identified Lodha tribal villages of Paschim Medinipur district of West Bengal.

Methods

Study setting

The study is part of a larger project on the Lodha tribal population of Paschim Medinipur and Jhargram district of West Bengal, supported by the Indian Council of Social Science Research and has been approved by the Ethics Committee of the West Bengal State University. The present study was conducted in three villages (majorly inhabited by the Lodha tribe) under Kharagpur I block of Paschim Medinipur district. According to a recent survey conducted by the block office, the Kharagpur I block has approximately 1906 Lodha families. The block has 7 Gram Panchayats and the Lodha tribe, one of the PVTGs (Particularly Vulnerable Tribal Groups), resides in the far flung villages of all the panchayats. The above mentioned three villages are also remotely located and were selected considering reported use of excessive alcohol. However, in keeping with the clause of confidentiality the name of the three villages has been anonymised.

Study Design and Study Participants

A qualitative approach was adopted for the study. Excessive consumption of alcohol and its consequences entails varied incidents, the understanding of which necessitates engaging a qualitative study design, since it focuses on people's behaviour, interactions, beliefs and experiences thus providing a deeper insight into the problem. The present study includes data from twenty in-depth interviews with men and women of the Lodha tribal population of three villages under Kharagpur I block of Paschim Medinipur district. Five formal interviews with other stakeholders (two primary school teachers, one Anganwadi worker, a block level official and a key informant) were also conducted. Participants and stakeholders were selected purposively. Only those wilful participants who identified themselves as Lodha were included in the study.

Instrument and Data Collection

The data was collected throughout the year in 2023. The rationale behind collecting the data throughout the year was primarily to observe year-long socio-religious events, since alcohol consumption is highest on these days. Further, not many individuals were wilful to participate in the interviews concerning the issue of alcohol consumption. A semi-structured interview guide was used to conduct the in-depth interviews. Separate interview guides were prepared for the two primary school teachers, one Anganwadi worker, a block level official and the key informant. The interview guides used for the study was validated in Bengali language. Informed consent was obtained from the

participants before conducting the interview. Since majority of the participants were unable to read or write, the purpose of the study and the terms of confidentiality of the data were explained to the participants in the language they could understand, that is Bengali. If only the respondents understood the purpose of the study and agreed to participate in the study, they were asked to put signature or thumb impression on the consent form. Each interview lasted up to thirty to forty minutes. Apart from the interviews, one focus group discussion (FGD) with 8 participants was also carried out. The FGD was moderated to collect data regarding the participants' perception about alcohol consumption and its adverse effects. Along with the interviews, field notes were also documented. The responses received during the interviews were carefully translated back from Bengali to English. The translations were checked to ensure that the original responses were not lost in the translation. In keeping with the cause of confidentiality, the names of the respondents and their villages are anonymised.

Data Analysis

The theoretical framework of thematic analysis has been used to closely examine the data collected for the study. Thematic analysis is a widely used data analysis method in qualitative studies (Crowe et al., 2015). To sort the data into an organized format, the interviews were first read and re-read thoroughly to get familiar with the data. Next, relevant and potential phrases and sentences were highlighted and codes were generated to collate them. The codes helped to obtain a condensed overview and to categorize the data further under themes. The themes emerged from the narratives and patterns (that came up repeatedly in the data), through an inductive approach. After a thorough review of the themes, they were illustrated with quotes and presented to communicate coherently with the research problem and the literature.

Results

All the respondents belonged from the earlier mentioned three villages under Kharagpur I block of Paschim Medinipur district (Table 1). The three villages were majorly inhabited by the Lodha tribe. There were around 328 households in total of which only 3 households were from different caste (general caste). Out of the 20 respondents 9 were male and 11 were female. All the respondents were in the age group of 20-40 years. Only 8 respondents out of the 20 individuals who were interviewed had documents of identity, namely Aadhar card (proof of identity) and caste certificate (legal document that certifies the ethnic group of a person belonging to a particular caste). The educational status of the respondents was very low while three respondents had attended school upto class 4, only one had attended school up to class 9. All the other respondents did not have any formal education.

Village	No.of respondents
S	8
K	7
P	5

Table 1: No. of respondents from each of the three villages

With the application of the thematic framework analysis three adverse social impact of inordinate alcohol consumption were identified: A. Domestic abuse; B. Child care negligence; and C. Impaired work productivity.

A. Domestic abuse

The issue of domestic abuse emerged out of almost all the interviews. While most men and women interviewed reported of altercations over money for drinking, incidents of physical assault were no less.

Last year, an intoxicated man burned down his own house during a fight with his wife. He

was demanding more money for buying drink and playing 'tash'(cards).

- Key informant

Reportedly, every next household experience domestic abuse arising out of drunken brawl. Interestingly, such abuses were often gender neutral. While unmarried girls did not consume alcohol, married girls and women were habitual drinkers.

I don't drink, but I do indulge in playing 'tash'(cards). My wife drinks profusely and fights

with the neighbours. I have to beat her up with a 'danda' (stick) to stop her. We too fight

almost everyday over money. I need money to play 'tash'(cards).

-Mr.X8, 38 years

Death due to jaundice and untreated diseases of habitual drinkers were quite a few. Incidents of death, murder and suicide in intoxicated condition were also reported. However, the population of the three villages still seems to overindulge in 'Mahua' (indigenous alcohol made from Mahua flower).

My husband was a heavy drinker. He used to start drinking as soon as he was out from his

last hangover. He had developed some mental illness due to excessive alcohol consumption. He went missing one day and was later found at the Keshiary hospital.

All

this happened a year before he died. Later, when he fell ill again, we could not understand

his illness initially, on admitting him to the hospital the doctors informed us that he had

jaundice. He passed away three years ago. I have two sons and both are married, the younger one also drinks profusely like his father. I live alone and earn by making 'Mahua' (locally brewed alcohol made from Mahua flower) and selling forest produce.

-Mrs.X17, 40 years

B. Child care negligence

Alcohol dependence of parents negatively influences family functioning which result in weaker family ties and poor childcare practices. Children in such families lead a very vulnerable life and are left to fend for themselves. The present study recorded at least eight such cases.

I don't work, my wife runs the house. She works in the fields and collects forest produce.

At times she is so drunk that she cannot go to work. We have two sons, an 11 years old

and another 13 years old, they cook for us some times.

- Mr.X12, 36 years

My husband left me and got married again. He used to beat me up after drinking. I have

two daughters but they don't live with me, they live with their father. I now earn by selling forest produce. I need at least Rs 30 everyday to buy myself a bottle of 'Mahua'(locally brewed alcohol made from Mahua flower). I live with my friend, he

owns

a 'bhati' (local brewery).

- Mrs.X4, 27 years

Children growing up in an environment where they are exposed to alcohol from a very young age, eventually normalise drinking. This is precisely one of the reasons behind the early age of alcohol initiation among the tribal communities.

Often children are sent by their parents to refill the bottles from the 'bhati' (local brewery). If and when I get to see such things, I rebuke and send them back home.

- Anganwadi worker

Again, the Anganwadi workers mentioned facing immense difficulties in convincing parents of children to attend health programmes and immunization camps.

We constantly pester them to follow proper health and hygiene practices but they don't

pay heed to any of our advices. They consume 'go shap' (monitor lizard) and have chicken with 'deshi mod' (locally brewed strong spirit) almost everyday.

- Anganwadi worker

The teachers of the primary school too highlighted the issue of negligence in child care by the Lodha parents.

We have to go out looking for the child in the village if a child is absent for days in

school. As parents they take little or no interest in their children's education. They are engrossed in their daily life and habits.

- Primary school teacher

C. Impaired work productivity

The impoverished condition of the three villages was conspicuous. The participants of the study broadly attributed high level of unemployment as the reason behind the poor socio-economic condition of the three villages. Apart from finding works as agricultural labourer, the population majorly depends on collection and sale of forest produce. The business of making 'Mahua' or 'Mahul' (indigenous alcohol made from Mahua flower) engages a good number of households in the villages. The business requires little

investment and space and is lucrative. There is a stable flow of customer within the village itself, in addition to infrequent customers from outside the villages.

They obtain 'Bakhar'(fermenting agent) and 'Mahua'(flower) from the forest, 'gur' (jaggery) from the market and 'yeast' from the bread making factory. All of these do not cost them much in comparison to the amount of sale they have per day. A big 'hari' (pot) can fill at least 50 bottles. A 600 ml bottle cost Rs 30/-. The increasing number of 'bhati' (brewery) in the village is because of this profit. The people engaged in this have learned the process from each other.

-Key informant

A small gathering of men at the local brewery or at a distant barren field at almost any hour of the day is a common sight in the three villages. These gathering are mostly to enjoy a drink or so. The participants of these gatherings are generally not engaged in any regular employment. They either work as labourers in the field or collect forest produce both of which they can engage in at their own discretion. Only a few men from the villages are engaged in regular paid jobs.

Ask them why they are not at work, they will say they do not have any work. Even when they are employed in some work, they don't turn up regularly. They find it easy to earn a little amount of money by selling forest produce and use up the money for drinking and other addictions.

-Block official

The indifferent attitude of the men in the village force women from the households to toil harder in looking after the family and also earn some money by collecting fire wood for sale or by making brooms. We have a difficult life. It is not easy to work in the forest. We indulge in drinking or addiction for some relaxation.

- Mrs.X16, 32 years

Discussion

The above mentioned problems of domestic abuse, child care negligence and impaired work productivity as a result of alcohol misuse are deeply interconnected. Alcohol-dependent individuals are more likely to engage in aggressive behavior, particularly in stressful situations. This is primarily because excess alcohol consumption impairs cognitive functions (Heinz et al., 2011) leading to poor decision making and reduced inhibitions. This increased likelihood of violent behavior is often directed towards family members, particularly intimate partners. The impact of domestic abuse due to alcoholism is profound. It does not only affect the physical and mental health of the victim but it disrupts the family dynamics and fosters an environment of fear and instability. Children growing up amidst such an environment often suffer from trauma, which can lead to behavioral issues, academic difficulties and psychological problems. These children are also at a higher risk of entering into abusive relationships themselves, either as victims or perpetrators. Parents preoccupied with alcohol consumption or dealing with the aftermath of domestic violence fail to take care of their children properly. Neglected children often miss out on education and are more likely to grow up amidst lack of proper nutrition and healthcare. This lack of proper care and support hinders the overall growth and development of children, perpetuating cycles of deprivation (Kaur & Ajinkya, 2014).

Alcohol misuse severely impacts work productivity as well. Individuals with unhealthy drinking habits are prone to missing work due to hangovers, illness or injuries. These frequent and unplanned absences disrupt workflows and damage credibility. Additionally, alcohol addiction heightens the risk of accidents and injuries, particularly for those involved in manual labor or machinery operation. All these factors often make it difficult for addicted daily wage earners to secure employment (Srinath & Sendilvelan, 2017). The economic strain from reduced work productivity exacerbates family tensions, leading to a vicious cycle of abuse and neglect. The real world impact of inordinate alcohol consumption thus reaches far beyond the well-documented health risks. Its pervasive impact on the society warrants recognition as a significant social problem (Rose et al., 2021).

In tribal communities, the issue is more complex. Alcohol consumption in the tribal communities is recognised as a customary practice, which normalizes drinking as a part of everyday life (Pati et al., 2018). This widespread acceptance does not only complicate the ability of a fairly backward tribal population to acknowledge and tackle the consequences of excessive drinking but also perpetuates negative stereotypes about the population. The stigma tarnishes the tribal society's image, hindering efforts for community development thereby exacerbating existing social and economic challenges.

As mentioned earlier, one can easily spot intoxicated individuals in the three villages at any time of the day. This overindulgence in alcohol was dismissed by some respondents as an infamous cultural practice or as a coping mechanism for an adversity-laden life. However, the apparent reason behind the overindulgence is the unrestricted availability of alcohol. Approximately, 28 'bhati' (local breweries) actively cater to the population of these villages. Traditional brewing methods of 'Mahua' (indigenous alcohol made from Mahua flower) lead to the production of strong spirits. The strength of these spirits depends upon factors such as the type of ingredients used, skill of the local brewer and especially on the emphasis of achieving a potent final product. There is a cogent preference for 'Mahua' over 'Handia'. 'Mahua' is preferred for its potency over 'Handia' (rice beer) which is a milder alcoholic beverage.

Considering the complex dynamics of alcohol engraved in the community's customs and traditions, it is a significant challenge to regulate brewing of alcohol in the villages. Occasional police raids temporarily deter this practice by disrupting operations and instilling fear among illegal brewers, causing them to cease activities. However, because these raids are infrequent, the fear quickly dissipates and individuals return to brewing. Thus, while these sporadic raids can momentarily reduce the production of alcohol, sustained and consistent enforcement is essential for long-term success.

Conclusion

The problem of alcohol dependence in a population needs responses which are both preventive and curative. Thus, comprehensive initiatives which includes both awareness programmes and screening and treating of alcohol dependent individuals can have far reaching effects. As for the Lodhas, of the study area effectively addressing the alcohol-related problems of the population poses a significant challenge. This is because the practice of alcohol consumption is deeply intertwined with their cultural norms and traditions, making it difficult to implement standard interventions. Therefore, any effort to address these problems must take into account the cultural context and be designed in a way that respects and aligns with their traditions and values. This approach ensures that the interventions are not only relevant and acceptable to the community but also more likely to succeed in bringing about meaningful change. The role of the local administration specifically, at the block and district level is of utmost importance here. By identifying alcohol dependent populations and conducting appropriate programmes, the local government bodies can help in giving out bonafide message. Incorporating alcohol risk communication into all the existing health and community engagement programs can be effective. Raising awareness across all age groups, with a particular focus on

children, is crucial to empower them to make informed and healthy choices. Additionally, creating economic opportunities to reduce economic stress and dependence on alcohol sales can help break the cycle of abuse and neglect and pave the way for a healthier and more productive community. Finally, consistent monitoring combined with stringent action on unlawful activities such as the brewing of strong spirits should be prioritised.

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