

Mental Health Care of Tribal Communities in Odisha: A Scoping Review of Challenges, Opportunities, and Cultural Adaptation Strategies

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ABSTRACT

The mental health care needs of tribal communities in Odisha remain a largely neglected area despite their growing importance in public health discourse. These communities face a unique set of challenges that include geographical isolation, socio-economic disadvantages, cultural differences and limited access to formal healthcare systems. This paper aims to explore the challenges, opportunities, and culturally appropriate adaptation strategies for mental health care in tribal areas of Odisha. The goal of this scoping review is to thoroughly examine and consolidate existing research on mental health care for tribal communities in Odisha. It seeks to identify key challenges, potential improvements, and culturally appropriate strategies within mental health programs. The study reviews secondary sources, including government reports, statistical data, academic studies, and NGO findings, to identify barriers to mental health services and explore cultural influences. This review focuses on studies published between 2010 to 2025, highlighting the recent developments, innovations, and gaps in the current body knowledge regarding mental health care delivery in these marginalized communities. The findings reveal that mental health conditions, such as depression, anxiety, and substance abuse, are prevalent among tribal populations in Odisha. However, these issues often go unrecognized and untreated due to stigma, traditional beliefs, and limited healthcare infrastructure. The preference for traditional healing practices over formal psychiatric treatments further complicates efforts to integrate modern mental health services. However, community-based initiatives offer promise in improving mental health outcomes, emphasizing the importance of culturally sensitive and community-centric approaches.

Keywords: Tribal mental health status, Cultural adaptation strategies, Mental health care, Odisha

INTRODUCTION

Mental health issues in India, particularly among marginalised groups, have been gaining attention in recent years, with a growing recognition of the unique challenges faced by tribal communities. Odisha, a state in eastern India, is home to several tribal groups, including the Santals, Saora, Kondh, Bhumji, Juang, Bonda, Gond, Ho, among others. Despite the rich cultural diversity, these communities face substantial barriers in accessing quality mental health care. Mental health has been neglected in these regions due to cultural, socio-economic, and geographic factors. There is a lack

of extensive research on mental health among tribal populations in India, especially when it comes to Odisha, where tribal communities constitute approximately 22% of the state's population (Census of India, 2011).

According to Census of India, "India's tribal population, which constitutes approximately 8.6% of the total national population, is widely distributed across various states, with Odisha being one of the states with the largest tribal communities, accounting for about 22% of its population (Census of India, 2011)." These tribal communities, characterized by unique cultural practices, traditional knowledge system, often resulting in higher

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susceptibility to mental disorders, distinct languages, compounded by limited access to formal healthcare systems and the persistence of stigma surrounding mental illness and have historically been marginalized and face socio-economic disadvantages. Despite the cultural richness, these communities are particularly vulnerable to a variety of health challenges, including mental health disorders, which remain largely under-recognised and undertreated. Mental health problems in tribal communities are complex due to the interplay of traditional belief, economic hardship, stigma, and inadequate healthcare infrastructure. While mental health care is increasingly prioritized in urban areas, rural tribal areas still face considerable challenges.

This scoping review explores the current landscape of mental health care for tribal communities in Odisha. It identifies the major challenges faced by these communities, explores opportunities to improve mental health care, and evaluates strategies for cultural adaptation in mental health interventions. In this comprehensive review of existing literature from 2010 to 2025 that explores the challenges, opportunities, and culturally adapted strategies for mental health care among tribal populations in Odisha.

This research investigation focuses on the following areas of inquiry:

1. To examine the current landscape of mental health care among tribal populations in Odisha.
2. To identify the challenges, opportunities and cultural adaptation strategy these communities face in accessing mental health care.
3. To highlight the research gaps in understanding mental health issues in these populations.

METHODOLOGY

This study employs a scoping review of methodology, is particularly effective for outlining the current literature, pinpointing research gaps, and offering a broad summary of research on a specific subject. This review is based on secondary data collection method. Further documentation was compiled from government publications, non-governmental organization (NGO) reports, and media outlets. A Systematic literature search was conducted across various databases, including Google Scholar, PubMed, JSTOR, and Scopus, and Methodology for literature search is described in Fig. 1, Using keywords such as “mental health care”, “tribal communities”,

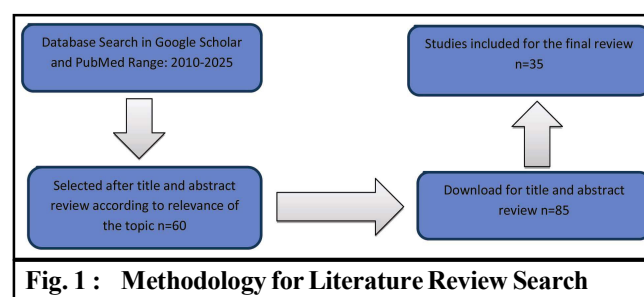
“Odisha”, “challenges”, “opportunities”, and “cultural adaptation”. Studies published from 2010 to 2025 were included in the (Table 1).

Inclusion Criteria/ Exclusion Criteria:

This Scoping review focusing on mental health in tribal populations in Odisha. Peer-reviewed articles, government reports, and policy documents. Further, Studies examining mental disorders among the ST population, published between 2010 to 2025, were included in the analysis. The review considered both qualitative and quantitative studies that focused exclusively on this population. This review studies focus specifically on Odisha or tribal communities. This article concentrates solely on physical health without addressing mental health issues. Further, Studies of lacking primary data, as well as overview and commentary articles, were excluded from the analysis. Additionally, studies not specifically focused on the Scheduled Tribe population were also excluded.

Data Extraction and Analysis:

The relevant information from selected studies was extracted including challenges, opportunities, cultural adaptation strategies, and gaps. We conducted a manual search and included articles from local journals such as *Adivasi*, published offline by the Scheduled Castes and Scheduled Tribes Research and Training Institute (SCSTRTI) in Bhubaneswar, Odisha, and *Man in Society*, published by the P.G. Department of Anthropology at Utkal University, Bhubaneswar, Odisha. Additionally, we explored websites of Indian government agencies like the Ministry of Tribal Affairs, SCSTRTI, and the Indian Council of Medical Research (ICMR).



RESULTS AND DISCUSSION

The results from the reviewed existing literature studies underscore the significant mental health challenges faced by tribal communities in Odisha, revealing a complex

combination of socio-economic, cultural, and healthcare-related elements. Mental health is a global issue that can impact any community, regardless of its location or background. A 2021 study conducted on the Juang tribe in Odisha found that 35.20% of participants had moderate depression, while 8.00% experienced severe depression (Panda *et al.*, 2021). Mental health issues, particularly depression, are prevalent in these communities, with studies consistently reporting high rates of depression, often categorized as moderate to severe. Alcohol use disorder is also a common concern, along with other mental health issues like anxiety and suicidal tendencies. However, these conditions are largely under-recognized and under-reported, often due to the stigma associated with mental illness in these communities. This under-reporting is compounded by the cultural and societal challenges that prevent individuals from seeking formal psychiatric care.

Access to mental health services in Odisha's tribal areas remains a significant challenge. There are various problems such as, Geographic isolation, lack of trained mental health professionals, and limited healthcare infrastructures are key barriers to adequate mental healthcare. The absence of sufficient mental health professionals in these remote areas further complicates the situation, as does the community's preference for traditional healing practices over formal medical treatment. Many tribal individuals rely on local healers, who may offer culturally familiar but less effective treatments for mental health conditions. Additionally, socio-economic factors such as poverty, low literacy levels, and poor living conditions exacerbate the mental health problems faced by these communities, as they contribute to heightened stress and limited access to healthcare services.

Government interventions, such as the District Mental Health Programme (DMHP) and Public-Private Partnerships (PPPs), offer some potential for improving access to mental healthcare, although their reach remains limited due to on-going infrastructure challenges. The National Health Mission (NHM) has made strides in integrating mental health services into general healthcare initiatives, but progress is slow, and there are still considerable gaps in the system. Despite these challenges, there are opportunities for enhancing mental health care in Odisha's tribal areas, particularly through the incorporation of culturally sensitive approaches. For instance, involving tribal elders and traditional healers in

mental health care programs could help bridge the gap between modern psychiatric care and the community's traditional practices. Such culturally adapted interventions could improve the acceptance and effectiveness of mental health services, thereby addressing the stigma associated with seeking formal mental health care.

Overall, the results highlight that while the burden of mental health issues in Odisha's tribal communities is significant, the path forward lies in addressing the cultural, socio-economic, and infrastructural barriers to care. Expanding government initiatives, integrating culturally sensitive strategies, and enhancing healthcare infrastructure are essential steps towards improving mental health care for these marginalized populations.

In the (Table 1), summarizes the key findings from a comprehensive literature review, synthesizing the results of numerous studies conducted by various researchers from 2010 to 2025. This study underscores the grave concern of the findings from the reviewed literature reveal a significant and growing recognition of the mental health issues faced by tribal populations in Odisha.

The findings of this study provide valuable insights into the mental and physical health challenges faced by tribal communities in Odisha. Notably, the research underscores the high dependence on traditional healing practices, which presents both a challenge and an opportunity for integrating culturally sensitive mental health care. The study emphasizes that a significant portion of the tribal population, particularly among the Ho and Santal tribes, initially seeks care from traditional healers due to cultural acceptance and beliefs in supernatural causes of illness. Tribal communities often favour indigenous practices over modern medicine due to a lack of trust in formal healthcare systems and limited accessibility (Moharana, 2023).

The need for integrating indigenous healing practices with modern healthcare approaches is a central theme in the study. This approach could potentially bridge the gap between traditional beliefs and modern treatment, making mental health care more acceptable and effective. The integration of traditional practices with evidence-based mental health interventions could help reduce the social stigma surrounding mental health and improve community engagement in seeking help. Another key finding is, "the high prevalence of mental health disorders, particularly depression and anxiety, among tribal women and adolescents (Verma *et al.*, 2022)." The study highlights that older, illiterate women in joint families are particularly

Table 1 : characteristics of the studies

Authors	Study Area	Objectives	Study Design/Method	Results
Kuttiatt <i>et al.</i> (2025)	India	The main objective of this is to critically analyze how the caste system contributes to health inequity, exploring its historical context and current implications	-	The article highlights caste-based exclusion in health, recommending enhanced primary care, improved access, and medical education reforms for equity.
Behera <i>et al.</i> (2024)	Odisha	This systematic review aims to explore research studies focused on the physical and mental health of tribal communities in Odisha, offering a comprehensive assessment of their overall health status.	Systematic literature review	The study found tribal communities in Odisha face physical health issues, use traditional remedies, and suffer from mental health challenges.
Moharana (2023)	Odisha	The primary objective is to explore the experience of ontological insecurity among the Ho tribe, particularly in relation to their understanding of disease and suffering amid the influence of modern medicine and industrialization.	Ethnographic fieldwork/ participant observation, interviews, and case studies.	The study highlights conflicts between modern medicine and Ho tribe's beliefs, emphasizing the need for culturally sensitive mental health interventions.
Verma <i>et al.</i> (2022)	India	The aim of this study is to conduct a systematic review of community-based research on mental health issues in India's tribal populations, to assess the prevalence and types of mental health conditions.	primary community-based quantitative observational studies/ PRISMA guidelines	Of 935 articles, 11 studies were analyzed, highlighting alcohol use disorder (40%), suicidal attempts, anxiety, depression, and other issues.
Panda <i>et al.</i> (2021),	Keonjhar, Odisha	The aim of the study is to assess the prevalence rate of depression among Juang adults	Beck Depression Inventory (BDI-II) as a tool, primary data, structured interview schedule	The study found higher depression rates among older, illiterate females in joint families, emphasizing the need for targeted interventions.
Devarapalli <i>et al.</i> (2020)	India	The objective of this study was to identify and review mental health research studies on ST populations in India	Cross-sectional studies and Critical Appraisal	The review of 32 studies highlighted sociocultural factors, alcohol/substance use, mental disorders, and access to mental health services.
Kumar <i>et al.</i> (2020)	India	The aim of the study is to evaluate the current health status of tribal communities and provide recommendations to improve healthcare access and delivery	-	The study emphasizes the need for a parallel health system focusing on governance, trained personnel, and community-based solutions, alongside addressing health-seeking behavior and healthcare delivery gaps.
Subudhi <i>et al.</i> (2020)	Odisha	The objective is to understand the healing preferences of tribal patients with mental illness and the role of traditional healers in their treatment.	Descriptive Study/ purposive sampling and an interview schedule.	The study found 64% of tribal patients didn't consult medical professionals initially. Traditional healers remain the primary choice due to cultural acceptance and perceived supernatural causes. Top of Form
Balagopal <i>et al.</i> (2019)	India	To address high suicide rates among the tribal population by integrating mental health with general health services	-	The program increased awareness and ensured continuity of mental health care while respecting traditional tribal healing practices.

Table 1 contd....

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Maulik <i>et al.</i> (2018)	Andhra Pradesh, India	Implement mental health care in rural India using technology, anti-stigma campaigns, and task-sharing strategies.	Pre-post mixed methods	Feasible, acceptable, improved access, reduced depression/anxiety symptoms.
Nayak and Naik (2017)	Mayurbhanj, Odisha.	Study indigenous medicinal practices, disease classification, and health perception of the Santal community	Diagnostic and treatment methods/ interviews and observations.	Documented indigenous knowledge on disease treatment, plant use, and Santal community's health perceptions and practices.
Ali and Eqbal (2016)	Ranchi, Jharkhand	Assess mental health status of school-going tribal adolescents, focusing on emotional, conduct, and social behaviors.	Cross-sectional study/ random sampling.	It reveals that emotional symptoms, conduct issues, hyperactivity, and peer problems in male students.
Kandamuthan and Madhireddi (2016)	Odisha	the effectiveness of Public-Private Partnerships (PPPs) in improving healthcare accessibility and outcomes for tribal populations	primary and secondary data collection methods	The Results indicated improved healthcare accessibility, increased institutional deliveries, and better maternal health outcomes.
Ozer <i>et al.</i> (2015)	Ladakh, India	Assess impact of acculturation on mental health of Ladakhi college students.	Mixed Methods	Less acculturation linked to impaired mental health; bicultural orientation common; agency and cultural identity crucial.
Islary (2014)	India	Explore health conceptualization, issues, and health-seeking behavior among tribal communities.	Review of secondary literature	Developed model of health-seeking behavior among tribes.
Das (2014)	Mayurbhanj, Odisha	Examine health infrastructure, access, disease profile, and attitudes of Munda tribal women towards healthcare	Empirical study	Gaps in health infrastructure and accessibility; tribal women viewed as productive capital, requiring better healthcare services.
Brooks <i>et al.</i> (2013)	Rural American Indian Veterans.	Adapt remote monitoring for rural populations with PTSD, focusing on cultural relevance and feasibility.	Community meetings, patient interviews, provider feedback.	High acceptability and feasibility of culturally adapted remote monitoring program.
Gone and Trimble (2012)	American Indian and Alaska Native communities.	Investigate mental health disparities, treatment efficacy, and culturally appropriate approaches in AI/AN communities.	-	Identified mental health issues and gaps in treatment, with emphasis on culturally tailored approaches.
Kishore <i>et al.</i> (2011)	Delhi, India	To assess myths, beliefs, and health-seeking behavior regarding mental disorders in the general population and medical professionals in India.	Cross-sectional study/ pre-tested questionnaire	Beliefs about mental disorders include causes like loss of semen, sin punishment, and polluted air. Many perceive mental illnesses as untreatable and avoid psychiatrists.
Tripathy <i>et al.</i> (2010)	Jharkhand and Orissa	Assess impact of participatory women's groups on maternal and neonatal health in rural, tribal populations of eastern India.	Clusters/ stratified randomisation	32% lower neonatal mortality in intervention clusters; 57% reduction in moderate maternal depression in year 3.

vulnerable to depression, which aligns with other studies that indicate the significant impact of socio-cultural factors on mental health outcomes in rural and tribal populations (Panda *et al.*, 2021). Gender inequality, limited education, and rigid family structures often exacerbate mental health issues, leaving women more susceptible to psychological distress. This study reflects broader trends observed in

existing literature, which underscores the importance of gender-sensitive mental health interventions. Previous studies have pointed out that mental health care in tribal communities often overlooks gender disparities and the unique challenges faced by women. This review is call for targeted interventions addressing the socio-cultural determinants of health, including gender, family dynamics,

and literacy, is crucial to ensuring that mental health services reach those most in need.

Additionally, the study also highlights the positive impact of community mobilization through participatory women's groups in improving awareness and reducing depression and anxiety symptoms. These groups provide a platform for women to discuss mental health issues in a supportive environment, making mental health care more accessible and less stigmatized. The research's emphasis on community-based interventions reinforces the need for culturally adapted strategies that empower communities to address their own mental health needs.

However, despite the promising results of the intervention, the study also identifies several gaps that require further exploration. The focus on maternal health and limited exploration of other mental health disorders, such as substance abuse and schizophrenia, is a significant limitation. Mental health issues like alcohol use disorder, which is prevalent in many tribal populations, were not sufficiently addressed, even though they are critical to understanding the broader mental health landscape in these communities. While it suggests a potential for integration, a more in-depth examination of the practical challenges and benefits of such integration is necessary.

This review points to significant gaps in healthcare infrastructure and service delivery, which are major barriers to access for tribal populations. The findings echo concerns raised by previous studies regarding the inadequate availability of healthcare facilities, trained personnel, and culturally competent services in remote areas. These systemic challenges hinder the provision of quality care and contribute to the on-going health disparities in tribal regions. Addressing these issues requires long-term policy reforms that prioritize the health needs of tribal populations, particularly mental health care.

Conclusion:

This current review emphasizes the importance of adopting a holistic approach to mental health care in tribal communities in Odisha. The results highlight the need to combine traditional healing methods with modern healthcare services, promote community-based mental health interventions, and create gender-sensitive, culturally appropriate strategies. By acknowledging the unique mental health challenges faced by tribal communities, more effective and sustainable solutions can be developed. These insights are crucial for designing

culturally adapted strategies that overcome barriers to mental health care and ensure fair access to services for marginalized tribal groups in Odisha.

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