Healing with Amulets and Antibiotics

Although Gabriele Alex and Vibha Joshi belong to different departments at the Max Planck Institute for the Study of Religious and Ethnic Diversity in Göttingen, both scientists are studying the wide range of healing methods used and traditions followed in Indian society. Here they show from different perspectives how the supposed contradictions aren’t really all that incompatible in practice.

TEXT BIRGIT FENZEL

In India, those who fall ill can choose between Western biomedicine and a vast array of indigenous healing methods. They can ease their pain with Ayurvedic oils, nasal douches or enemas, or try their luck with conventional homeopathic granules or naturopathic plant salves. They can also realign their body’s unbalanced energies with the help of a therapy prescribed by a Siddha doctor, involving vomiting, purging or hot compresses.

Patients can also consult a Unani specialist working according to the Greek four humor principles to restore the correct balance of blood, phlegm, and black and yellow bile. In particularly acute cases, specialists even offer services that stray into the realms of metaphysics.

According to Gabriele Alex’s observations, whether a patient with a broken leg consults a surgeon or relies on the exorcism skills of a spiritual healer very much depends on the presumed cause of the illness, the distance from the patient’s home to the health services available and, above all, his or her socioeconomic status. “It’s basically the same as it is for us – we try to cure certain ailments using home remedies and visit the doctor only for more serious illnesses.”
In India, people who fall ill can choose from a vast array of therapies, trusting the skills of a qualified doctor or a healer.
Anthropologist Vibha Joshi has carried out research into the flexibility with which many Indians combine elements from different religions with modern and traditional medicine to treat illnesses, based on her study of the Angami in Northeast India. According to local custom, they mix Christian, animistic and other religious elements when treating illness. Unlike Gabriele Alex, who, as a member of Steven Vertovec’s team, is concerned mainly with sociocultural diversity, Joshi belongs to Peter van de Veer’s department, which focuses on aspects of religious diversity.

**STUDYING CAUSES THROUGH DREAMS AND TRANCES**

In her recently completed book *Christianity and Healing: the Angami Naga of Northeast India*, Joshi describes the relationship between Christian belief and healing among the Angami Naga in Nagaland, more than 85 percent of whom are converts to Baptism, Catholicism or other Christian denominations. “In some cases going back three generations,” says the Max Planck researcher.

Although Christianity is a long-established religion in this region, it has not totally superseded the indigenous spiritual world of the Angami. Even today, they still have mediums and shamans who are reputedly able to make contact with the ancient guardian spir-
The Christian churches in the federal province of Nagaland still foster the culture of prayer and healing, and belief in miracle cures is widespread.

The family received a second diagnosis from another preacher, who attributed the girl’s fits of rage to a sin committed by her great-grandfather. A third theory, finally, explained her condition as the result of the patient’s refusal to accept a divine gift when she was a child. The Angami believe that shamans and spiritual healers are called by dreams and visions to use their powers to help people. Refusing such a call puts both body and soul in jeopardy.

**BIBLE QUOTATIONS HELP THE TREATMENT**

At the time of the researcher’s visit, the girl was still not cured despite all the therapies that had been tried. The anthropologist, however, was not interested in the success or failure of the different treatment methods. To her, this patient history was a clear example of the undogmatic flexibility of the Angami’s attitude to the broad spectrum of secular and spiritual medicine and treatment traditions. It is by no means exceptional for priests to be consulted on health problems. Joshi believes that this close link between Christian belief and healing has to do with the history of the mission in Nagaland.

The first Christian missionaries who arrived in the region at the end of the 19th century tried to spread their message among Angami society through education and medical assistance. ‘At that time, it was common for treatment to be linked to bible quotations, in order to bring the compassionate side of the Christian God closer to the people,’ says Joshi. And this is still the case, as she discovered during her field research in Nagaland. “In some primary health clinics, I saw bible verses hanging over the entrance or in the treatment rooms.” In addition, the Christian churches in the region still foster the culture of prayer and healing, and belief in miracle cures is widespread. As an example of these Christian establishments whose treatment methods follow in the footsteps of the Lord, she names the Revival Church of Nagaland, whose specialties include healing through the laying on of hands, and which runs healing camps specifically for this purpose.

The healing offered by other churches concentrates more on the power of prayer. “These are mainly groups of women and people who are believed to...”

**FOCUS India**

Photo: MPI for the Study of Religious and Ethnic Diversity – Gabriele Alexer

A selection of drugs is available at a primary health care center, which includes a consulting room and a pharmacy.
These improvements in the biomedical services available even in rural areas have come about on the back of the Indian government’s development programs.

... have unusual powers, who say special prayers for the sick,” explains Joshi. Her observations confirm the link that still exists between Christianity and medicine. “Now the church’s role is to reconcile the various warring factions of the Naga nationalists and thereby heal the Naga community.”

Joshi’s colleague, ethnologist Gabrielle Alex, also came across images with Christian overtones while conducting research in the folk-medicine-based healer shops of the Vagri in Tamil Nadu. The Vagri are one of the three population groups chosen by Alex for her study on healing systems and traditions in Tamil Nadu. “I was particularly interested in how low-status castes perceive medical therapies and what methods they use to treat illnesses,” she said as she talked about her project.

In fact, the inhabitants of India’s most southerly federal province have access to a wide choice of healthcare systems. For one, there is traditional folk medicine with its extremely comprehensive and varied arsenal of remedies and prescriptions against illnesses of all kinds. “These include grandma’s household remedies based on healing herb teas, root mixtures and soups, and professional healers who run their own practices or even clinics and treat broken bones, animal bites and skin diseases,” says Gabriele Alex, enumerating some of the specialties of the nattu maruntu tradition.

The common factor in all these treatments is that they stem from knowledge of medicinal recipes and healing plants from the local natural environment, handed down from one generation to the next. The tradition clearly includes an ideological element. “This type of medicine is strongly associated with India’s romantic past and an image of nature and naturalness that is at odds with the modern world,” says Alex. For another, the people living in rural areas also now have access to basic biomedical services. Like everywhere else in India, the range of public healthcare services in Tamil Nadu has been visibly improved by the introduction of basic healthcare establishments.

HEALTH IS LINKED TO PROGRESS

“Besides this, the Indian government has also integrated traditional medical traditions and knowledge systems into governmental health policy,” says the ethnologist. As a result, Ayurveda, Yoga, Unani, Siddha, homeopathy and natural healing have been standardized and incorporated into government training, research and healthcare provision. According to Gabriele Alex, “There are also more private doctors than there used to be 20 years ago. When I began my initial research in 1998 in Madukottai, only one doctor was based there – and he wasn’t a real doctor, just a quack who had worked as an assistant to a biomedical doctor for many years before eventually setting up on his own.”

Eleven years later, the village boasted three private doctors, a government health center where a doctor, a nurse and a laboratory assistant were available on weekday mornings, and a primary health subcenter with a pharmacist, birthing room and consulting room.

These improvements in biomedical services, available even in rural areas, have come about on the back of the Indian government’s development programs. “Health is a major theme in this discourse, and is directly linked to economic growth and progress,” says the researcher. As part of her study, she wanted to find out whether improved access to public biomedical clinics is actually displacing traditional healing systems. The fact that no or only very low costs are charged for the government service would seem to support this.

“But despite government interest in the topic of healthcare provision, hardly any studies have been conducted on this,” says Alex. “It is still assumed that providing a good service means that people will use it.” In addition to the Vagri, she also chose for her study the Mutturaja and the Paraiyar, who represent the traditional lower castes, both of which live from agriculture. The Vagri, in contrast, who do not practice as peripatetic healers or run healer shops but sometimes offer treatment from their homes, are traveling salesmen like their forefathers, selling cosmetics at the roadside. Others live from hunting and setting traps for small animals.

“Vagri healers are known for their special folk medicine and miracle cures against aging, impotence and infertility,” says Alex. Their medical repertoire includes oils for external application, as well as powders and pastes, for which the healing plants used are...
above: Modern medical services play an increasingly important role in India – as here in a clinic, where mothers wait with their children for vaccinations.
below: Explanations are a key element in the modern Indian health system, as these posters directed at young mothers show.
which animals are sacrificed and that project a certain wildness and danger, such as Kaliamman and Karuppa, as well as Muni, who is both a deity and a spirit,” Alex explains. These beings are apparently responsible both for causing illnesses and for healing them. The ritual specialists of the Paraiyar thus also play a healing role.

**WOMEN PREFER GIVING BIRTH IN THE HOSPITAL**

So, when they fall ill, how do these people choose from the many treatments on offer, ranging from folk healing traditions to biomedical institutions? This was one of the core questions in Gabriele Alex’s study. To find the answers, she worked in the field using qualitative and quantitative methods for collecting ethnological data. She recorded the medical histories of people and observed how they treated their illnesses. On her visits to healer shops, she also saw how these folk medicine practitioners stir and pulverize very special ingredients in pots and pans. “But they also use animal fats, snakes and meat as ingredients in medicine, and this differentiates them from the other folk medicine healers.” Other Vagri specialties include fortune telling and protective medicine, for which unusual items are sometimes used. “For instance, they buy amulets containing fox horn,” explains the scientist, describing another specialism of the healer’s art. “This small horn supposedly comes from the skull of the fox and transfers the animal’s potency and strength to its wearer.”

Among the Hindu Paraiyar in Madukottai, too, the cami (lords) are responsible for ritual healing. “The members of this caste worship mainly deities to which animals are sacrificed and that project a certain wildness and danger, such as Kaliamman and Karuppa, as well as Muni, who is both a deity and a spirit,” Alex explains. These beings are apparently responsible both for causing illnesses and for healing them. The ritual specialists of the Paraiyar thus also play a healing role.

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Photos: MPI for the Study of Religious and Ethnic Diversity – Gabriele Alex (d)

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The discrimination experienced by the members of low-status groups in public hospitals.

The researcher finds it particularly interesting that, when asked for suggestions on how to improve the healthcare system, most of the participants in her study cited optimization of nutrition as the most important measure, and especially improved protein intake. “All the government programs are aimed at expanding the healthcare system – yet the people in the countryside see malnutrition as their biggest health problem.”

patients seeking a cure combine the various treatment methods or alternate biomedical methods with home remedies or traditional healing arts.

MALNUTRITION IS THE BIGGEST PROBLEM

A key factor in the choice of therapy direction is the assumed root cause of the patient’s ailment. “People have a clearly differentiated concept of the causes of illness,” says Alex, “they distinguish between natural and supernatural causes.” Biomedical doctors are competent to deal with the former, spiritual specialists with the latter.

As the scientist also discovered, the castes differ in their preferences for certain healthcare institutions. Paraiyar and Mutturaja clearly prefer government doctors and clinics or go to pharmacies and medical shops, which Gabriele Alex attributes to the socioeconomic status of these castes. “These people are day laborers and simply cannot afford hospital visits, because that would mean losing a day’s work,” she says. “Medical advice from pharmacies is normally free of charge and vaccinations cost just five to ten rupees.”

On analyzing her questionnaires, Alex also discovered an interesting paradox: of all people, the Vagri, whose response to public healthcare institutions was the most positive in the questionnaires, use them the least of the three groups. “They feel private hospitals provide better and more effective treatment. This has to do with the discrimination experienced by the members of low-status groups in public hospitals.”

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GLOSSARY

Siddha
Scholastic medicine tradition developed in southern Asia. The main Siddha influences are rooted in yoga philosophy, Tantric theories and practices, and alchemical and Ayurvedic concepts.

Unani
Scholastic medicine tradition, originating in Greece and further developed in the Arab region. The current form incorporates traditional healing arts from Egypt, Syria, Iraq, Iran, India, China and the Middle East. Unani probably reached India in the 12th century.

Nattu Maruntu
“Folk medicine,” a collective term embracing countless healing and folk medicine practices, refers to medical healing traditions that are based on drugs of plant and animal origin and that cannot be ascribed to the scholastic traditions (Siddha, Ayurveda).