In Nepal, people are increasingly using the western, allopathic system of medicine. In a recent study, 86 out of 120 respondents (71.7%) had used modern, allopathic medicines. But complementary and alternative medicines (CAM) accounted for 28% of visits to health care practitioners. CAM practitioners could either be faith healers or traditional medical providers. Pandit, lama, gubhaju (priests of the different ethnic and religious groups), dhami, jhankri and jyotishi (astrologer) are the common faith healers in Nepal. Baidhyas (Ayurvedic medical practitioners) and herbalists are the traditional medical providers. Homeopathy is also becoming popular. The hill people have always turned to their faith healers for most of their health needs. Faith healers are accepted in their community and this is something which new health posts, doctors and health workers find hard to duplicate.

Faith Healers and Healing Practices

My (Giri BR) childhood was spent in a remote village in Nepal, where I was exposed to many cases of witchcraft and told by my elders about their ‘experiences’. My mother says that when I was 6 months old I became hopelessly ill. A ‘lama’ (priest and witch doctor) transferred the evil being in me into a cock and I survived. I am not sure what happened to the cock!

Recently we (students of Manipal College of Medical Sciences) visited Naudanda, a hill village about half an hour drive from Pokhara city, western Nepal. Dr. Ravi Shankar had divided the students into batches and each batch had to survey 4 to 5 houses. In one of the houses we witnessed a faith healing session during a visit to a hill village. Neurological and psychiatric illness may be considered by lay people to be due to possession by spirits. Shamans are effective as a psychotherapist to treat illness caused by social conflict. The opinion of the scientific community regarding faith healing is divided. Shamans are accepted in the village community. A trained and motivated shaman aware of his role and limitations can serve as an important agent of change in rural Nepal.

Key Words: Complementary and alternative medicine, faith healing, neurological illness, shamans, social conflict
In many cases, illnesses are ascribed to an ‘evil eye’. The ‘evil eye’ is cast by someone who is envious of the family. An old lady in the neighborhood is often made the scapegoat. The accused is beaten badly, made to eat human faeces and often excommunicated.

It may be interesting to note that there are three ways of becoming a witch doctor or a ‘shaman’. One may get the spiritual power spontaneously; in some cases after being taken by a spiritual being known as ‘jhankri’. The second is by hereditary transmission from father to son. The third is by personal choice and quest.6

Science of Faith Healing

Neurological illnesses like epilepsy and many psychiatric illnesses may be considered by lay people to be due to possession by spirits. Village people are likely to have tried faith healing practices before they bring the patient to a neurologist or psychiatrist.

Witch craft may have a psychological effect on the patients who have belief in it. Shamans (witch doctors) are effective in treating illnesses caused by ‘social deprivations’. The shamans’ role as a psychotherapist centers on his ability to treat social conflict.3 A witch doctor calls upon the good spirits to check the evil ones or sends back the evil spirits to the ‘supernatural’ world.

When mental health professionals first described shamanic behavior they often used psychopathological descriptions. The American psychologist, Silverman had postulated that shamanism is a form of acute schizophrenia because the two conditions share ‘grossly non-reality-oriented ideation, abnormal perceptual experiences, profound emotional upheavals, and bizarre mannerisms.5 The difference according to him lies in the cultural acceptance of the individual’s psychological resolution of a life crisis.5

However, Roger Walsh concluded that shamanic phenomenology is clearly distinct from schizophrenic states.7 The differences centre on awareness of the environment, concentration, control, sense of identity, arousal, affect and mental imagery. In 2002, van Ommeren and coworkers surveyed a community of 616 male Bhutanese refugees in Nepal. Of the refugees, 42 claimed to be shamans. The shamans’ general profile of mental disorders did not differ significantly from nonshamans.1

Prospect

Can we use the witch doctors to spread modern medical practices like immunization among the rural masses? The witch doctors occupy a gainful position in the village community. They can be educated about modern medical practices and the need to refer seriously ill patients for modern medical care.6 The witch doctors are present in remote and inaccessible areas and can be used to deliver basic health care. A trained and motivated ‘witchdoctor’ aware of his role and his limitations may well serve as an agent of change in rural Nepal.

References