

Marunnum Mantravum –
An ethnographic enquiry into the patterns of
affliction and therapeutics in a traditional healing practice
in Malabar, north Kerala

by Hari Kumar Bhaskaran Nair



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and therapeutics in a traditional healing practice in
Malabar, north Kerala**

Master Thesis

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DECLARATION

For submission to the Examination Committee

Regarding my Master's Thesis with the title

"*Marunnum Mantravum* – An ethnographic enquiry into the patterns of affliction and therapeutics in a traditional healing practice in Malabar, north Kerala"

I declare that

1. It is the result of independent investigation
2. It has not been currently nor previously submitted for any other degree
3. I haven't used other sources as the ones mentioned in the bibliography. Where my work is indebted to the work of others, I have made acknowledgement.

Heidelberg, 26.02.2010

Hari Kumar Bhaskaran Nair

Signature of candidate

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Summary

The relevance of traditional healing systems in understanding, expressing, finding a meaning and treating human suffering and misfortune has been one of the focuses in medical anthropology. Among the three main sectors of health care delivery in all complex societies, namely the popular, the folk and the professional, the folk healing represents the intermediate position consisting of sacred or secular healers or a mixture of the two. By doing field work in a seemingly sacred folk healing practice in north Kerala, namely Poonkutilmana, and engaging participant observation and non-structured open ended interviews as methods, I have attempted to throw light on the broader aspects of folk healing existing in this part of India. Poonkutilmana is a high caste Nambudiri Brahman family situated in Malappuram a district in Kerala with a predominantly Muslim population. The male members of this family practice the traditional art of healing which they do only inside their old *mana*, the traditional family house. This house also holds temples for the deities, *Devi* the Goddess and *Ganapathi* the elephant headed God, the destroyer of obstacles which they worship. Their clients are mostly from the same district but they also receive clients from far off places these days due to the publicity gained through the print media and internet. The clientele consists of a sizable number of Muslims and the healers declare their openness showing the open gate, which according to them is never closed. They have a specific healing tradition which combines Ayurveda, the Indian system of medicine with *mantravada* (translated often as sorcery or witchcraft but literally the use of mantras). They practice a non-institutionalized form of Ayurveda, because they are trained at their homes by apprenticeship and have not gained qualifications from any teaching institutions.

The field work revealed that there are a multitude of afflictions present at this healing practice. The most important of them was *Brahmaraksas* which has been classically mentioned in Ayurveda as a malevolent *graham* or possessing agent which could be identified by spontaneous interest in learning Sanskrit scriptures and worshipping. But this affliction is identified today as the spirit of a dead Brahman dwelling on lands causing ill health first to the cattle and poultry and then to the humans, if not contained annually by worship. The other predominant afflictions were *petiyilpetuka* to get trapped in an insidious fear followed by a visual experience, *sathru dosam* the wrong doings of an enemy which indicated sorcery and alternately mentioned as *kaivisham* or hand poison, and *sthala virodham* a spatial incompatibility. Though spirit possessions (*ettukutal*) were

not suggested or promoted by the healers, few clients, especially women identified themselves as possessed. Both possession and the wrong doings from an enemy were found to be mediated by astrologers. Another important feature of this healing practice was the presence of a large number of pregnant women and infants for the healing ritual as they were vulnerable and thus to be protected. The healing consisted of the ritual called *uzhinjumattal*, literally to remove by rotating around, chanting of mantras and giving a sacred thread or amulet with holy ash. The ritual treatment was combined with homemade medicines such as handmade pills, ghee for internal use and oil for application on the head and the prescription of certain Ayurvedic formulations including patented capsules. The rituals and the medical work occurred in tandem with their `good words` full of empathy and motivation. Though this traditional healing practice could be shown as a model of sacred folk healing practice, it has its own secular elements. It does not completely fit into the theoretical framework of Ayurveda, or *mantaravada* or astrology, but still remains popular. They have adapted their own methods of healing which are unique and indigenous. The possibility of multiple idioms of expressing the illness and multiple therapeutic options in the same practice provide the clients with different meanings for their sufferings and different methods of dealing with them.

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1. Introduction

Advancements in the field of medical anthropology have contributed towards a better understanding of the social and cultural aspects of health care pluralism in the last decades. This has also led to the acknowledgement of pluralistic systems in health care. As Kleinman et al. (1978: 141) point out “Medical anthropologic studies show that traditional healing in developing societies and popular health care in our own are principally concerned with illness, that is, with treating human experience of sickness”. The relevance of traditional healing systems in understanding, expressing and finding the meaning of human suffering and misfortune has been one of the major focuses of the study of medical pluralism. According to these studies, the health care sector in any complex society consists of three main sectors namely “the popular sector, the folk sector and the professional sector”, though they are often “overlapping and interconnected” (Helman 1994:64). The folk sector constitutes “an intermediate position between the popular and professional sectors” and consists of individuals who “specialize in forms of healing which are either *sacred* or *secular*, or a mixture of the two” (Helman 1994: 67). They are considered to be a truly heterogeneous group with a wide range of variations. Sacred folk healers are said to be predominant in societies where illness and misfortunes are attributed to social causes such as sorcery or witchcraft and supernatural causes such as gods, ghosts and ancestral spirits. My field work was focusing mainly on such a traditional and folk healing practice in Kerala, south India.

Kerala is a state in India with the highest rate of literacy and highest density of population (Tarabout 2003: 221). Kerala is also considered as a land of magic and sorcery, as Tarabout observes “a reputation firmly established over southern India and Sri Lanka” (Tarabout2003: 219). A detailed account of the witchcraft and sorcery in south Kerala is available in the article of Tarabout on “Magical non violence and violence in Kerala” (Tarabout 2003). But the more recent researches by Halliburton in Kerala show how the decline in the rate as well as gravity of spirit possession relates to the rise of “psychological idioms” such as depression and tension (Halliburton 2005). He argues that the disappearing spirit names indicate an ascendance of modernity which leads to an erosion of context. But drawing on his ethnography Halliburton also states that the reappearance of possession in new secular contexts shows that the spirit possessions here have not been completely erased. These findings point towards the importance of research in a folk healing practice in Kerala where such expressions may be prevalent.

At Poonkutilmana in north Kerala, my field site, I worked with a high caste Brahman family, a traditional healing practice fitting to the descriptions of a sacred folk practice described by Helman (Helman1994:69). They practice a rather traditional and non institutional version of Ayurveda (traditional Indian medicine) and *mantravada* (translated by Tarabout as magic, sorcery or witchcraft (Tarabout 1999) but involves ritual healing). The male members of the family do the practice and their apprenticeship goes on with the upbringing in the household. Though they belong to the high caste and are well respected even among the surrounding Muslim community for their tradition through hundreds of years of practice, they remain open to all castes. The big open gate at the entrance symbolizes this together with their proud announcement of the willingness to serve those who need help. Their history and power sources are claimed to be unique as much as their practice is, as Tarabout notes "...according to a medical tradition which, though largely grounded in Ayurveda is claimed to be unique in Kerala and in the whole of India" (Tarabout1999: 137).

Smith (2006: 548) in his recent work on the possession and exorcism in contemporary Ayurveda mentions this practice, though he has not conducted an in depth study on it. He has also conducted an enquiry into the textuality and intertextuality of three domains of traditional practices in north Kerala such as Ayurveda, *mantavada* and *jyotisha* (astrology) (Smith 2006: 544). According to him the textual contents and the ritual apparatus has been freely exchanged in between the practitioners of these three systems. The system of cross references existing in between them is also still intact as per Smith. For him the present practice in Kerala was not derived from a single textual source such as the *Isanagurudevapadhathi* a 12th century Sanskrit text on *tantra* (a traditional stream of knowledge in India) said to have been formulated in Kerala, but from a "complex heritage of texts and practices that gave rise" to it (Smith 2006:544). Thus the practice of folk healing at Poonkutilmana is relevant with respect its unique textual tradition, system of cross references and the practice of two among the three predominant "complex and integrated healing traditions" (Smith 2006:545).

I have conducted a field work at Poonkutilmana from 19th July till 4th November 2009. The following work is a completely descriptive ethnography of this healing practice. The location as well as the history of this place are unique and have been instrumental in shaping its practice in the present form, which is dealt with in the remaining part of my introduction as separate sub sections. My methodology was mostly participant observation

and non-structured and open-ended interviews. But there were certain practical issues of doing anthropology at home. There were also some specific difficulties in gaining confidence and trust from the healers due to my own professional background as an Ayurveda practitioner. The sub section on methodology discusses them in detail.

This family based practice is not totally new to Anthropology as Smith and Tarabout have published apparently small accounts on their practice (Smith 2006: 548, Tarabout 1999:137). Unnikrishnan has also published an article in an Indian journal which is mentioned later by Smith as a point of reference regarding this practice (Unnikrishnan 1998:18, Smith 2006:577). All authors who have visited this healing practice have noticed the apparently strong clientele of Poonkutilmana. Smith speaks about them as a” burgeoning practice” which is “limited to the treatment of mental disorders” and having a good number of Muslim clients (Smith 2006: 577). Tarabout mentioned about the inpatient facility they were having during his visit and say that “Inmates number between 15 to 40 and their average stay is 15 days” (Tarabout 1999: 137). Unnikrishnan who had written an exclusive article on the *mana* says that “There are approximately 80-100 patients coming every day as outpatients.” (Unnikrishnan1998: 18). He had also mentioned about the inpatient facility with a maximum intake of 40 patients at a time. The reason for such a clientele for a traditional healing family which is following a folk model is a point of enquiry as Kerala is also the place in India where Psychology and Psychiatry also have their own predominance. The acceptance and popularity of these aspects of modern ways of health care and their promotion by the press in Kerala were noticed by Halliburton as he said “ Not only is information about Psychology and Psychiatry broadly disseminated, it is also popularly consumed” (Halliburton 2005:141). The popularity of such a healing practice irrespective of the dissemination and consumption of psychology is my first point of enquiry. I will answer this question by giving an account of their major sources of power in my second chapter. They share the lineage of the mythical and archetypal Kerala mad man namely *Naranath Bhrantan* who was mentioned by Tarabout as a” puzzling self-willing Sisyphus” (Tarabout 1999:137). The traditional Brahman house *mana* where they do the worships and healing is another source for their power as the healers perform their work only within its basement. The divine sources of power namely *Devi* the Goddess and *Ganapathi* the elephant headed God are very important for their healing. The debated presence of a deity of blood *Rakteswari* in the central courtyard of the *mana* is also

discussed as a possible source of power in dealing with the removed spirits. I will also add an account on how their family tradition as healers attribute towards their healing powers.

Though Tarabout and Smith have mentioned Poonkutilama, the natures of afflictions are not available in their accounts. Based on my participant observation and interviews with clients, I will be giving an account on the various major afflictions for which this practice is resorted to in my second chapter. *Brahmaraksas* the wandering spirit of a dead Brahman mentioned as one of the possessing spirits is found to be the major affliction which the *mana* is famous for. But the study reveals that the local perception of this spirit has been changed over time. This spirit is considered to be dwelling on land and causing afflictions to cattle and poultry in the beginning and later to family members if not contained by an annual worship. Though it gives such afflictions, a protective function is also attributed to it. Another predominant affliction is getting trapped in fear referred as *petyilpetuka*. This is often a fear of insidious onset followed by a visual experience. This has fading margins with spirit possessions in explanations, though is palpable by its own weight. The wrong doings or wrath of an enemy *Sathru dosham* and the hand poison or *kaivisham* are also afflictions which are common at this practice. Though these views are not promoted by the healers, the reference of astrologers in this regard are accepted at face value without much interference. Many clients also are afflicted by the spatial incompatibility namely *sthala virodham*. These are arising out of the violation of architectural principles like a wrongly placed toilet in the corner of the house, which is intended for worship. Spirit possession was another affliction which appeared at the *mana* though it was rare. This was mediated by the astrologers and treated ritually and with medicines by the healers. The ambivalence of this with mental illness in the narratives of clients are also discussed. The final affliction is the protection of pregnant mothers and infants as they are considered vulnerable to the attacks of spirits.

My fourth chapter is an account of the therapeutic approaches of this healing practice. In this section the practice of *mantravada* literally the use of mantras but often referred by the terms magic, sorcery or witchcraft (Tarabout 2003:152) in this practice. According to Smith it is textually similar to *tantra* and constitutes one among the three main traditional streams of knowledge dealing with the contemporary management of possession in Kerala (Smith 2006: 544). The practice of Ayurveda here also sparks interest as it is a non institutional form and carried out in tandem with rituals and empowered with *mantras* as noted by Tarabout and Smith (Tarabout 1999:140, Smith 2006: 548). The therapeutic

approach also consisted of ‘good words’ which came out of a complete acceptance of the suffering and narratives of the clients. There were recent attempts in media to demonstrate this in psychological idioms such as counseling though the healers never subscribed to this view. Followed by this I will be drawing my conclusions on this practice on its sense and meaning for the clients and to the society.

1.1. Location

This Nambudiri Brahman family is located in the Malappuram district in Kerala. The *mana* is situated in the village called Vallikapatta and the nearest town is Manjeri. This location has been marked by Tarabout as “...situated in the southern part of the former Malabar district” (Tarabout 1999:137). Smith mentions that they are “fifty difficult kilometers away” from the Kattumatam mana from where he had visited them during his field work (Smith 2006:548). But the roads connecting the village to the nearby towns are not that difficult now. There are frequent bus connections between Manjeri the nearest town and Perinthalmanna almost 20 kilometers far. Most of the clients make use of this bus connection to reach this place though I have seen many getting down a stop ahead and walking to the *mana*, possibly to avoid the gaze of fellow travelers. Other means of transport like an auto rickshaw or a car are also common. The bus stop in front of the *mana* is called *Poonkalappati* or the step in front of *Poonkala*. The word *Poonkala* literally means a floral arrangement on the floor, but it is the local name in which the *mana* is known in the village. The shrilling noise of the buses when their brakes are applied, the metallic rattling of their doors and clings always add on the cacophony of the practice characterized by crying babies, murmuring crowd of clients and the three healers continuously engaged in hearing stories and performing their healing. Beside the bus stop is the arched open gate of the *mana*, which the family is proud of and sees as the icon of their openness. The younger brother among the healers, Mr.Narayanan Nambudiri told me a story about him appearing as a witness in the magistrate court in Manjeri. The magistrate asked him about his authority to practice and he firmly told the court that there is no gate in front of his house and so people come and stand there in the morning asking for help. As long as that happens he can only follow his tradition. Thus the always welcoming open gate is a statement of openness to the society and the community surrounding them, irrespective of their high class Brahman status.

This place is surrounded by a garden with trees and medicinal herbs and there are paddy fields on the opposite side beyond the road. The field just opposite to the *mana* is owned by the family and they regularly cultivate paddy. The harvest is brought inside the compound for drying and I witnessed this during my stay. There are two shops selling the plastic jars for dispensing medicines beside the bus stop. Both these shops are being run by Muslims and one of them also has a small size restaurant selling coffee, tea and local delicacies. This shop also sold coconuts and cotton clothes needed for the rituals and was almost the only one nearby where one could eat some food in between the long waiting hours on a busy day. The beautiful main central building of the *mana* is a *nalukettu* (a traditional construction) built with four interconnected parts around a central courtyard. There are three other buildings in the same compound which housed the inpatients once. There are two apparently new buildings behind the *mana* where the practitioners now live, while the main building houses the temple and all healing activities.

Malappuram is a district in Kerala, India with 68 % of Muslim population as per 1991 census (Smith 2006: 577) which has gone up by 0.5 % by 2001 (Census of India: 2001). While analyzing the saint-martyr worship among the Muslims of Kerala, Dale and Menon (1978: 523) speak about this district as follows: “This Muslim - majority district was established in 1969 to include most of the historically important centers of Muslim settlement outside the city of Calicut.” A good number of their clients are also Muslims and they are found welcomed in the *mana* and its practice. The long history of the association of this family with the surrounding Muslim community is evident and is discussed in the section on history. This family is said to have been relocated from the neighboring Palakkad district a few hundred years back. But their present location in a village deep in the Muslim predominant district shaped their clientele and the image as a traditional abode of healing.

1.2. History

The history of this family is mentioned by Tarabout as follows: “The house is said to have originated two hundred years ago as an offshoot of Narayana Mangalam House being allotted the division of `*mantra* and *chikitsa`* (i.e. the practice of medicine as well as of mantras)” (Tarabout 1999: 137). Here he mentions the division of the family trade of Narayanamangalath mana. Poonkutilmana is said to be one of the three offshoots of the

Narayanamangalath mana, the other two being Narasmana and Kallilmana. The word *mana* is translated by Tarabout literally as a house though here it refers to a traditional Nambudiri house hold in Malabar. In the division of family trade the practice of *mantravada* and Ayurveda was allotted to Poonkutilmana, *tantram* to Narasmana and *Chathirangam* to Kallilmana (Unnikrishnan 1998: 19). The present members of other two *manas* also acknowledge their relation and this theory of division. According to Damodaran Nambudiri, the *tantri* of Narasmana this division of family trade was following the attack of Tipu Sultan on Malabar. When he was asked about the division of traditional knowledge in Nambudiri families, he was of the opinion that it was more due to political reasons than anything else, see as follows:

Interviewer: Even in your family, there was this division that one is the *tantri*, one is the *mantravadin* and the third one is having a performance tradition. Even there you have a kind of division within the family on the forms of knowledge. Similarly was it common that one brother is a *jyotish* and another one a *vaidya*?

DN: Not that. Earlier these were taught together, *jyotish*, *matravada*, *tantrik* and all that. But other things were together. There is a funny story. When Tipu Sultan attacked Samorin one person from Narasmana, our household did not go away. Others ran to the south. He thought, now Tipu Sultan will win and the Samorin will be thrown out. So it will be better to stay here and protect my property. In fact Tipu Sultan did not come and disturb these people. But he and the other relative stayed here. Others ran and the English men came and joined Samorin and defeated Tipu. Then the English claimed that Malabar is ours, but the social powers will be given to Samorin. The administrative powers were of the Englishmen. So they thought these people have supported Tipu. The people who ran away also took revenge. So they were downgraded. We never used to take water from them. When they come here also we had to keep this. But in our family when we kept out some one we had to give them a means of life. So *tantram* was kept and *mantravadam* was what you can give. So that was also the reason for the division.

Interviewer: So you say that this division was after the time of Tipu?

DN: Yes.

Interviewer: So before that everything was dealt with together?

DN: Yes, you can reconfirm it. You can ask them about that.

Interviewer: So these people in Poonkutilmana, did they go to the south when Tipu attacked?

DN: No, they did not. So they had *brishtu* (Outcasting), so they had to have some profession for subsistence of their livelihood. So they were told by the other family members that they could take *chikitsa* (Aurveda treatment) and *mantravada*.

Interviewer: So they did not go to the south and so they were outlasted?

DN: Yes, because unsanctified food was eaten by them. That was the pretext, as the reason was political.

For Damodaran Nambuthiri the division of the family trade was a compensation for keeping some one out of the family and downgrading them. This was of the intension of providing them a means of life. This was also confirmed by the present day members of Kallilmana who also said of their broken relation with Poonkutilmana after the attack of Tipu Sultan.

The attack on Malabar by Haidar Ali and his son Tipu Sultan, the rulers of Mysore is dated back between 1766 CE and 1792CE (Menon 1999: 1995). In my interview with the young astrologer who was just 28 years old, he reported that his 85 year old grandfather remember being told about the *mana* by his grandfather and hence it will be definitely 200 or more years old. Unnikrishnan in his account of this practice opines that even though there is no clear evidence to say when this practice was started, this tradition is considered to be more than 600 years old (Unnikrishnan1998: 19). In the opinion of Smith, the textual sources of similar practices in Kerala could not be specified ,though they are either derivatives of the 12th century Sanskrit text *Isanagurudevapadhathi* or a product of the heritage which gave rise to it (Smith 2006: 544).The ethnographic details and the history

point towards a common possibility that this family is in existence in the present location for around 200 years as mentioned by Tarabout though the tradition which may have lead to this could be even older. Direct evidence is unavailable in this regard. They were downgraded because of not fleeing the Muslim conquest. Damodaran Nambudiri told that eating unsanctified food during the time of this attack was the pretext for this downgrading though the actual reason was political. The downgrading from their own family members and the profession of *mantravada* (ritual healing) and *vaidya* (traditional medicine) has made them more open towards the Muslim society which forms the majority of their clientele. I have also heard stories about this long term affiliation with the Muslim community in my discussions with the healers. They have told me about the Muslim community around them providing protection during communal conflicts.

Another interesting epoch regarding the history of Poonkutilmana is related to the myth of Naranath Bhranthan, the wise but mad man. I will be discussing about him at length in a later chapter.

1.3. Methodology

The theoretical challenges in organizing and conducting field work were that of doing anthropology at home. As noted by Peirano, “There are many meanings to the expression "anthropology at home," the most obvious of which refers to the kind of inquiry developed in the study of one's own society, where "others" are both ourselves and those relatively different from us, whom we see as part of the same collectivity” (Peirano 1998: 122). The apparently absent exoticism and the coherence of conceptual frames with that of the matter of my study were adding on to these difficulties. But there was a conscious attempt to overcome it with radical empiricism and literally following every single word of the narratives and exchanges.

The most important problem faced in the research was in the initial phase concerning access to do the research at such a family practice. I did an exploratory visit to my field in February 2009 and discuss in detail regarding the Masters research with the main healer. A letter was send from the office of my supervisor to the family requesting them to support me in my study. I did contact them as soon as I arrived in Kerala in July and asked about starting the field work. The elder brother invited me to visit them, but was not so sure

about the field work. I was a bit under pressure and contacted a class mate of mine. She gave an introduction through one of her relatives married to the *mana*. After this introduction things were easy though there was a certain level of tension existing in the beginning which I felt was due to their professional secrecy. As Smith has pointed out in his account about their *mantras*, the combinations of medicines were also protected secrets of their family tradition (Smith 2006: 548). Another factor was my professional training and background as a registered Ayurveda practitioner in Kerala. When I sensed this uneasiness, I kept myself far from enquiries regarding their medicines or their combinations. I did assure them regarding my role as an ethnographer and not as a practitioner of Ayurveda at their premises. This did help and I could conduct my studies further with the whole hearted support of the healers.

I lived in a rented building two kilometers far from the *mana* and commuted that distance with local buses. The daily bus trip to the *mana* and back did help me in understanding the land and its people better. There were specific gazes when I got down in front of the arched gate of the *mana* in the beginning. But later most of the staff and many of the travelers were familiar faces. When I approached the owner of my rented house in the field, he exclaimed that I looked not so ill to stay and visit *Poonkala* on a daily basis. I explained him about my research and still he was suspicious for a few days. During my stay in the tea stall talks all were very curious of what I was doing in the village. Whenever I told that I do study at *Poonkala*, no one was ever unfamiliar and I have always seen a certain reaction and a smile in their faces. The verbal reactions were also in agreement to the tradition and practice of the *mana* though some had the opinion that their practice was not as active as before, due to the closing down of the inpatient facility. The villagers were always helpful, especially in feeding me during the time of Ramadan, when most of the shops and restaurants were closed.

I started my field work from 19th July and this continued until 4th November. The weekends and holidays were excluded as I found time to travel back home on such occasions. The main methodology involved in my work was participant observation. I assumed a position near the main healer in the roofed extension while he was sitting inside the *poomukham* (the place where visitors are received, which serves as the healing space here) on a folding chair and talking to a client. I could also observe the rituals performed from that position when he moved and sat down on the floor inviting the client inside the *poomukham* and asking them to sit on the mat in front of a burning oil lamp. On the other

side of the *poomukham* were the two younger healers talking with their clients at the same time and a small crowd assembled around them. I had to assume the position close enough to the main healer and to stand there from the morning without losing that position on crowded days as many patients were almost just murmuring their problems to him. But it was still possible to hear them and make notes of the proceedings. I did take down the details of their discussions on my note book though only on very few days I could discuss anything about individual clients with the healer. My major strength was the knowledge of Malayalam, the language of discussion though a regional slang was often used by the clients. It was not difficult to follow these after a while as I was living in the same village. The language used by the healers was not difficult anyhow. The interactions in between the clients were very low or near to nil. They stood there in the crowd waiting for their turn or sat down on one of the wooden benches, metal chairs or steps of the roofed extension. They rarely spoke in between other than to their own family members and thus gathering much from their interaction was not feasible. These observations were innumerable as there were roughly 30-50 clients visiting the place on a day, which even went up to a hundred on a couple of occasions. I am using all the knowledge gathered through by observations in this work though I am using only 15 transcribed files in this study.

I have conducted open ended non structured interviews with 14 clients and their relatives. The method used was convenient sampling and the length of these interviews varied from 15 minutes to 45 minutes. The clients in many cases were accompanied by one or more members of the family and rarely by friends. Thus the answers were mostly from the accompanying relative, though I tried hard to get responses also from the clients as much as possible. The interviews were conducted in the premises of the *mana*, often in a corner of the roofed extension where other clients were waiting. The clients were also waiting for their medicines, amulets or rituals during this time. It was hard to convince some one for a interview after finishing the whole procedure at the *mana*, as they rushed home after a long period of waiting. I was introduced and endorsed by the healers a few times for conducting interviews. For this I was introduced as a doctor doing a study there which always put the clients at ease. Most of the clients during these interviews were very particular to know where I come from and where I lived and for how long I am there. I did assure all of them anonymity and confidentiality regarding the personal data though I felt they were more comfortable to know that I am from a far off place in South Kerala. There were some instances of resistance from clients to admit an interview, often due to personal reasons of

anonymity and confidentiality. One of the most touching experiences in my field work was when I tried to get my very first interview. Karunakaran a 42 year old Hindu man came with his sister that morning, told the healer about his deep sadness, difficulty to go for work and severe head ache and tiredness. After performing the ritual he was asked to wait for his medicines. He sat on the step nearby and leaned against the wall. After a precise introduction about my work I asked what was troubling him. The answer was a deep sigh and he immersed his face on the step and lay down. He looked up at me after a while and said 'I am not in a state to answer your questions now. Not because I don't want, but I cannot!'. This did perplex me a bit though I did ease him off and talked to his sister about his problems and told him I will talk to him once he come back the next time, though it did not happen. This incident also made me aware that many of the clients there were not always fit for an interview.

My dialogue with the healers, their family members and the few staff went on for the whole period of my stay. I also had in depth interviews with the main healer regarding their concepts of healing. I also had interviews with a *tantri* (one who does rituals in temples) who belongs to another related house nearby who explained at length the details regarding the family history and reflected on the existing practice. My interview with the sculptor of the statue of Naranath Bhranthan and the field trip with him provided an insight into the myth of the madly wise man. The interview with the astrologer, a young man who practices in the same village was helpful in understanding the local concepts regarding afflictions and their management as well as the role of astrology in understanding them.

2. Sources of Power

In the section on spiritual power and qualifications of a *mantravadi*, Tarabout points out that they need to have an extra ordinary mental power. This according to him is due to the convergence of several factors such as a line of transmission of knowledge, training with a guru, exertion and personal courage (Tarabout 2003: 232). The line of transmission meant that one has to be born in a family where it is a part of a hereditary tradition. Regarding the importance of apprenticeship he states that only *mantravadis* of evil design can learn it from books and a direct guidance is inevitable. With the use of mantras and meditation and assuming an ascetic vigor through them over a long period helped them to compel the deities they worship and to make them obey their orders. Though these were applicable to

south Kerala and to a non Brahman background, there are certain common premises which these descriptions share with Poonkutilmana. The main factor we could see here is the relevance of such a source of power for the healer and his art to be helpful. Helman (1994:71) in his account of folk healing also mentions about “inborn or acquired ‘healing power’” and lists the number of ways to be folk healers. In this context we shall discuss the main sources of power of this healing practice.

2.1. Naranath Bhrantan – archetype and lineage

The major power source of this healing practice is related to the myth of the wise mad man Naranath Bhrantan. This association has been mentioned already in articles written on this practice. The popular notion that this tradition originated with this legendary man is mentioned by Unnikrishnan as follows: “This tradition is supposed have been originated from a person named Naranath Bhrantan who was an insane person and a legendary personality belonging to Parayipetta Panthirukulam (group of 12 genius personalities)” (Unnikrishnan 1998: 19). Here the reference is made to the myth of *Parayipetta Panthirukulam*, the 12 *kulas* (castes or clans) born to the learned Sanskrit scholar Vararuchi and the Pariah woman. Naranath Bhrantan was one among those 12 legendary personalities. This myth and the stories related to it were explained at length on a field trip by Mr.Surendra Krishnan the sculptor who made the statue of Naranath Bhrantan on the Rayiranallor hill. According to him these 12 legendary characters were Agnihotri, Pananar, Pakkanar, Vallon, Perumthachan, Vatuthala Nayar, Rajakan, Akavoor Chathan, Karakkal mata, Uppu Kootan, Naranath Bhrantan and Vayilla Kunnilappan. The legend says that after their marriage the learned Sanskrit scholar, one of the nine gems of the court of Vikramaditya went for a long trip with his wife. The wife conceived and gave birth 12 times during this travel. Each time when she delivers a child the husband asked her whether the child has a mouth. When she replied yes, the scholar told her that if the God has given a mouth, then the child will be fed. Thus they continued their travel leaving behind the new born and those children were taken care by different families in different castes. The myth also say that when the 12th son was born, the wife lied and then the child’s mouth disappeared and he was later worshiped as the deity Vayilla kunnilappan.

The sculptor opined that this myth and these characters were overlooking the traditional norms of caste in the Kerala society and were pro active in this regard. He cited the story

of Perumthachan the great carpenter who was one among the twelve. This master craftsman once made a wooden doll and fixed it on the wooden bridge across the river. This bridge was often used both by Brahmans and other castes. The wooden doll was fitted in such a way that it moves up the bridge with a mouth full of water as any one walks on and spit it on the face of the pedestrian when one reaches the midway of the bridge. According to the sculptor, this doll did spit on the face of the caste based social system. Another story was that of the wife of Agnihotri the only Brahman among the twelve. When all the 12 sibilings assembled at Agnihotri's house for doing the annual death rituals for their parents, his wife was unhappy of the lower caste members accommodated and fed at her home. Understanding her uneasiness, Agnihotri took her where each one of them were sleeping and asked her look at them while holding his arm. On doing so, she saw God Vishnu lying on the serpent Ananta in each one's place and realized their divinity irrespective of castes. The sculptor was confident that the descendents of all these 12 characters are traceable till today. It was the all time dream of Surendra Krishnan (the sculptor) to give a form to this legend by his work which he had only partly accomplished with the work of Naranath Bhrantan.

The reference on the archetype of this legendary mad man was made by Tarabout in his account on Poonkutilamana.

"The reference to Narayana Mangalam House is not fortuitous, for there the legendary archetypal Kerala 'madman' (bhrantan), Naranath Bhrantan is supposed to have been brought up. Bhrantan was no ordinary fool and his was a metaphysical madness: every morning before going for his begging tour, he used to roll a big stone up to the summit of a big hill (there is one in Palghat district known by his name) before, with a big laugh, letting it roll down freely—a puzzling self-willing Sisyphus. Another well known tale shows him in a cremation ground asking Goddess Kali, when she pestered him till he would accept a boon to shift the filaria affecting his left foot to the right one. Fool or sage, Naranath Bhrantan could not be but the ultimate reference for the treatment of mental illness" (Tarabout 1999: 137).

Here Tarabout had caught rightly that this legendary man was supposed to be brought up at the Narayana mangalath mana. In his article Unnikrishnan also points out that the origin of the healing tradition is from Naranath Bhratan. But whether it was a kinship is a point of debate. Damodaran Nambudiri, the *tantri* of Naras mana had his opinion about this matter.

According to him, the relation between the Bhrantan and the Narayana mangalath mana is only an intellectual one and not a kinship. The most relevant excerpts of this interview is as follows:

Interviewer: What were the important things you adapted from him?

DN: Mainly it is *kundalini prabodhanam*. For that you have to sit and do a lot of penance.

There is a story that when our people were fixing an idol, it did not get fixed. Then that person came and chewed beetle and spit it and he said `keep it now`. It was properly fixed then. What is the principle behind it? I have to explain a bit about it, if you don't mind. Beetle leaf is nature, all *saktis* and all *devis* are in it. It is green in color; it represents nature. And white lime is added. White always signifies water in *tantra*. Then the betel nut is *beeja* the seed. If you chew them together then there will be red color which signifies *agni* the fire. *Agnibeeja* or *beejamaantra* of *agni* is *ram*. So by chewing the betel and spitting it, he was saying don't do it simply, work it up, and then make the energy here to do it, then it will get fixed. Not that he literally spit. It is a certain coded language. When these people did it accordingly, it got fixed.

Interviewer: So the *kundalini prabodhanam* came from Naranath Bhranthan?

DN: Not came from him, it was advised by him. He said don't ignore it. For that you have to adept and work it up. It is not a job. It is the part of a permanent life style which has to be built up. That was the message.

For the *tantri*, Naranath Bhrantan was a wandering tantric who had different ways of worship from that of the Nambudidri Brahmans, but had the knowledge and powers which were acceptable. Bhrantan's metaphysical madness is further exemplified by his spitting on the idol of a deity, an unthinkable and polluting act which signified the extremely important factor for the performance of temple rituals namely *kundalini prabodhanam*-waking up or elevating the *kundalini*. According to the *tantri* this act of chewing the betel leaf had a metaphysical message to carry. The green betel leaf signified nature, the white colored slaked lime signified water and the betel nut signified *beeja* or the sperm which in turn signified the use of *beejamantras* or basic phonetic representations of elements. The

red colored spit signified fire principle. Thus by chewing the betel leaf together with slaked lime and betel nut and spitting the red colored spit, Bhrantan was hinting the tantric rites which should predispose the installation of the idol. Thus he was a guru and an intellectual guide and not a kin. The *tantri* also requested me to clarify this with the healers. Even if he agreed about the family relationship with Poonkutilmana, he had difference of opinion of accepting Naranath Bhranthan as a kin. But the healers at Poonkutilmana considered themselves to be the descendents of Naranath Bhrantan though they made it clear that he was adopted and brought up at the Narayana mangalath mana. This is also in agreement to the myth of the 12 children born to Vararuchi and the Pariah woman as all of them were adopted and brought up in different families belonging to different castes.

In a field trip to the Rayiranallor hill and the Narayana mangalath mana situated around 40 kilometers far from the Poonkutilmana, we were guided by Mr.Surendra Krishnan a self taught sculptor. This was the hill that Naranath Bhrantan was thought to have rolled up the heavy stone. The hike was clearly exhausting for us even without a stone to roll up. The top of the hill is a plateau on which the Devi temple is located, where the Devi the Goddess is supposed to have given her audience to the legendary mad man. It is on the opposite side of the plateau overlooking the vast valley of the hill Mr.Surendra Krishnan had made the 18 feet high sculpture of Bhrantan. He took almost 16 months to complete the statue in 1995. The work involved was painstaking as all the material had to be brought up the hill from the valley which he did almost alone. He was considered mad by the villagers because this enormous effort was meaningless to most of them and they identified him with his sculpture. He approached Poonkutilmana to reconfirm his sanity after this and the healers helped him giving a reassurance. Surendra Krishnan also had some financial losses at the end as it was his solitary effort. He told us that he prospered well after the work but had again another major financial crisis recently, as per him was due to a banking fraud in which he was cheated. He was equating his life with the sculpture he made and said he had also rolled up the stone and pushed it down. One sees here the archetype of a Kerala mad man in Naranath Bhrantan with which people like Surendra Krishnan could identify. Madness is thus always not bad, and madness could also be a sign of genius. It could be an attribute for those who violate the norm of a given society. The discussions of adoption or kinship are of no matter here, but the lineage of the legendary wise mad man is a perfect fit for Poonkutilamana's healing powers.

2.2. Mana as a healing space

On my first visit to the *mana*, passing the open gate and walking through the pathway I noticed a herd of sandals kept outside the low brick wall encircling the compound. In the *poomukham* (which serves as the visitors place in similar traditional houses, but as the consultation and healing space in Poonkutilmana) an oil lamp was lighted in front of the brass plate with a human image and a coconut was kept near it over a heap of rice on a banana leaf. All around that were other paraphernalia needed for a ritual worship like flowers in a plastic basin, water in a bronze vessel and a conch shell, another plate with ashes mixed with rice and a fire torch over a bowl of *guruti* (a red colored liquid made by mixing slaked lime and turmeric, which resembles blood). The healers were not present though a few clients were waiting. Across the passage, I could also see an idol of the God Krishna possibly made of Plaster of Paris. Even if I was a bit perplexed by the Plaster of Paris idol, the rest of the situation closely resembled a Hindu temple in the morning time. Later I also understood that the Plaster of Paris idol of the God was just an ornamental presence and the *mana* contained separate worship places for the Goddess and Ganapati the destroyer of obstacles.

The *mana* is built in a traditional Kerala style with tiled slanting roof and the particular construction is called a *nalukettu* - a house having four parts around a central courtyard. The verandahs of the four parts are usually identical in such buildings, but in Poonkutilmana all of them have different dimensions. I was told by the healers that the sanctum of the Goddess in the north east part (having no idol but just the presence) was the first construction and the other parts of the house were added on later. The small temple for Ganapathi is in the south east part of the house. In the central courtyard which brings plenty of ventilation in the house, one can see an Ixora plant twined up with a jasmine and a few other potted plants. The central court yard had floral arrangements with the earthen idol at the time of Onam the local festival. The healers always sat on the wooden beam of the *poomukham* while the elder one often sat down on a folding chair inside that space. All of them sat down on the floor in front of the lighted lamp during the rituals. They sat down inside the wooden door on the pavements of the worship place of the Goddess, while preparing the threads or a talisman out of a copper sheet by drawing or writing on it. Some patients, often Hindus and more often those coming with infants or children were asked to go inside and make a visit of the worship place of the Goddess. Any how the *mana* had

the charms of a harmonious space, well ventilated, with non painted wooden pillars and a divine overtone with the worship places contained in it.

At the beginning of my field work, I was told by the young healers that even violent clients turned calm when they enter the premises of the *mana* and especially when they were asked to sit down for the ritual. This was almost confirmed during my stay as I witnessed in at least four different situations (all concerned clients were female) in which the violent clients were silenced by the main healer and he was successful in conducting his rituals for them. Arya, the Nambudiri woman was crying loud, shouting and trembling while she approached the main healer. But he was successful in silencing her immediately and keeping her calm throughout the ritual. During my field work of 3 months, a ritual was never stopped due to the lack of compliance. Tarabout while speaking about the religious prestige and power of Poonkutil mentions about the importance of the space in their healing as follows: “For Poonkutil’ this is due to the blessing of the place, the blessing of our Goddess’. The members of the house consider themselves to be only instrumental in the cure - which in fact does involve rituals” (Tarabout 1999: 140). The family always consider the space of the *mana*, especially within its basement as a healing space and did their practice only being in touch with that space. This was the case in all instances of healing which happened there. I never saw them handing over anything to the clients outside the basement. In my interviews the *tantri*, Damodaran Nambudiri referred to this as follows:

DN: Another thing I have noted is that they give medicines sitting in that basement only.

Interviewer: Do you mean only in that *mandapam*?

DN: Yes, they don’t give medicines leaving the floor of their house. They always need to have a connection with the basement when they give medicines. Either they sit on the floor, on that wooden plank on the verandah, or through the door. They will not give the medicines even standing a yard outside their basement. And people also believe in it. That is why I said, this is more a concept.

This was true as I witnessed the day today procedures of the *mana*. During my interview Mr. Vishnu Panickar, the astrologer also referred to the allegation that one of the staff who

functions as the *karyasthan* (care taker) at the *mana* was accused of selling the medicines outside claiming himself to be a Brahman. He pointed this out to be a violation of the tradition of the *mana*. According to Moerman “Healing is a ritual process“ likened to a spiritual osmosis in which the evil in man and the good of the deity penetrate the ceremonial membrane in both directions, the former being neutralized by the latter” (Moerman 1976: 60). The premises of the *mana* provide a space, with the atmosphere of a temple, that of a family and a traditional house which brings in nature to its centre. This space strongly resembles a Hindu temple, but it is not one in the strict sense and it is not just a traditional house hold either. This reminds of what Kakar noticed about the room of the Pir of the Patteshah Dargah in Delhi “the combination of the strange and the familiar locating the room therapeutically between “this” and “another” world.” (Kakar1982: 17).

2.3. Devi or Rakeswari, the divine sources

The main deity of the *mana* is the Devi, the goddess. She is the presiding deity also in their rituals and daily worship is being offered to her by a male member of the family. I have also witnessed *puja* (ritual worship) in which she was worshipped on special days with the drums and many Brahmans attending. In an article written on their practice by Unnikrishnan, he points out their *paradevatha* or family deity is considered by them as one of the quadrants of their treatments. “The physicians here say that sneha (love), Oushadha (medicine), paradevata (family deity), samuham (society) are the four essentials for the treatment parallel to the Catuspada (4 essentials in Ayurveda)” (Unnikrishnan 1998: 19). While explaining their therapeutic management he opines “Treatment in this centre is of very particular nature. Daily special pujas for the family deities Ganapathy and Bhagavathy, mantras along with suggestions, treatment methods like snehapana (uncting), virecana (purgation)...” (Unnikrishnan1998:18). Here we see that the healers considered the family deities as their main source of power and their worship as a methodology of treatment for their patients equivalent or more important than applying oil or administering purgation. A similar note was made by Tarabout that “... Poonkutil doesn`t itself consider its method as merely `medical`. Nothing can be done without the House Goddess`s power and protection” (Tarabout1999: 139).

The divine sources and their importance at this family practice are further substantiated by the ritual divination of their medicines. The medicines prepared in their premises were said

to be ritually divinized with *mantras* before they were dispensed though I could not witness this due to the secrecy of the preparation. But I have seen them being dispensed to almost every client, especially the ghee preparation in a small plastic jar which was advised to be smelled, tasted and to be applied on the joints. Similar situations are reported by Smith in his observations at the practice of two other similar Nambudiri families in Malabar.

”They manufacture their ghee based medicines themselves and subsequently potentiate them by offering them to their deities, Bhagavati (Durga) and Ganapati, with mantras known only to them. Only then are they dispensed into their clients. In fact irrespective of whatever reutilization they might enact on the patient, their main form of *mantavidya* is empowering these medicines with mantras” (Smith 2006:548).

I have also noticed that the healers always handed over the medicines themselves to their clients, even if their staff or other family members carried it sometimes from the storage place to the *poomukham* where they sat. But the healers carefully handed over them with instructions together with threads, amulets and the holy ash.

During my field work there were instances when women brought a *thali* (a flake of gold in the form of a small leaf attached as a locket to the *mangalya sutra* tied by the groom on the brides neck in Hindu marriages in Kerala) to present to the Goddess as directed by astrologers as an offering. This was later explained by the astrologer and the *tantri* during interviews as a ritual cure for the *duritas* or sufferings due to *Sakti* the mother Goddess. This was put on the deity as an ornament around her neck, together with many similar ornaments possibly brought by clients. A good number of clients at this practice were those who come with infants after *annaprasana* (feeding rites) to show them to the Goddess and seek her blessings. In a couple of occasions grown up children were ritually fed by the healer repeating their feeding rite at the *mana* as the parents failed to bring the child as an infant. During the ritual performed in the 7th month of pregnancy for protection, the mothers are asked to pray and give a word to bring back the child and worship the mother goddess there. Thus the Goddess as a source of power acts as a protector of kinship and the destroyer of sufferings at the *mana*.

In one of the casual discussions one of the younger healers mentioned the *Rakteswari*, (the goddess of blood) who is believed to be housed in the central courtyard. He also mentioned that the *guruti* (the red colored water resembling blood used in the ritual) was being poured in the central courtyard in the evening. This liquid which is supposed to absorb the bad influences and afflicting agents in the rituals were taken inside to the central courtyard in *Poonkutil* than it is taken away and dispersed somewhere else. He also told a story in this regard. Once a baby elephant was brought to the *mana* and the senior healer at present who was a young boy at that time was playing with this elephant baby. He took the baby elephant inside the house and then it jumped into the central courtyard. But once there, it was struck by a fear and jumped up and immersed its face on the wall and wanted to escape. It was difficult to take this baby pachyderm out through the main entrance again and they had to open another door near where it stood to push it out. This story for him showed that there is a fearsome presence in the central courtyard which was propitiated by offering the *guruti*. But the presence of *Rakteswari* or her worship was not accepted by the main healer on enquiry. He reiterated that it is only the Goddess which they worship and she is the protecting and presiding deity. But in the interview with the *tantri*, he answered this question differently. The relevant part of the interview with the *tantri* is as follows:

Interviewer: You know about temples, is there any temple nearby having idols or worships of *rakteswari*?

DN: In every house hold there will be a *Rakteswari* group of deities. Every house hold has a group of *dhramadevatas*. In that group *Rakteswari ganam* is a *ganam* or group, like *Rakteswari, Manikandhan, Balasasthavu*, such a group. In traditional houses in Malabar, this *rakteswari ganam* is a main one. But there is no consecration, or a visible symbol, yearly a *puja* will be offered, that's all.

Interviewer: It is in my common sense, not at the intellectual level, when these afflictions are into the *guruti* and that is poured in the central courtyard, is it being offered to her? Or else, where do they go?

DN: The concept could be that *Rakteswari* will be helpful to alleviate whatever power is exorcised.

Interviewer: Eat them?

DN: Eat them or digest them or whatever it could be.

Thus according to him *Rakteswari* presides over a group of subordinate deities propitiated traditionally in Malabar by offering an annual ritual, but there are no visible symbols of this Goddess worshipped anywhere. He also mentioned that in Poonkutilmana this deity may be the subordinate one for the Devi digesting the afflicting spirits. But for Devan Nambudiri the main healer, he did not agree at all to the involvement of *Rakteswari* or any such deities in healing and insisted on the unique role of Devi, the mother Goddess as the source of power. This divine source and the rituals and ritualization of medicines attributed to her, which mark the difference in Poonkutilmana 's healing traditions.

2.4. Tradition as a source of power

I am not getting into the discussions on the binary of tradition and modernity here neither evaluating their weight as valid categories. But when one considers the practice of Poonkutilmana, tradition and continuity are palpable things which could not be ignored. In her work on cultural loss and remembrance in Ayurvedic medical practice in contemporary India, Tirodkar (2008: 230) tries to present the caricature of a 'traditional practitioner' as "an old physician, sitting cross-legged or on a low stool on the floor of a mud hut with a thatch roof." She continues this characterization "The people who come to him for help would be, perhaps by default, lower income, lesser educated villagers because, again, the image of the traditional practitioner is one who lives in a rural area, in the forest, on the edge of civilization" (Tirodkar 2008: 230). Though Poonkutilmana is not a mud house nor the practitioners are that old and sitting cross legged all the time, the traditional architecture of the *mana* and the healing rituals they practice with their clients and medicines somehow fit to this category. Majority of their clients are also poor rural villagers though there are some highly educated and rich clients coming from far off places such as neighboring districts and even from other states. She adds on with the aspects of training "Another persistent stereotype of the traditional practitioner is that he is the successor to the generations of Ayurvedic knowledge" (Tirodkar 2008: 231). This aspect of tradition also holds true for the *mana* as they follow a non institutional mode of training

and an oral tradition of knowledge transfer through generations. But the tradition of Poonkutilmana has other aspects than only their medical practice.

The main difference is their long standing tradition in religious and ritual power which Smith mentions as *mantravidya* (Smith 2006: 545). Some of these aspects are revealed in my interview with Damodaran Nambudiri which is as follows:

DN: If you observe carefully, the effect of their treatment or whatever it is because of their life style more than anything else. Not because of the medicine they do, not because of the *karma* what they do, more than that it is a concept that is deeply marked among the people who are residing in a large area. I am not saying against it, even in my profession, I am a *tantri*, I do only that much. I don't claim any miracles. I don't also believe in miracles. I am a very basic land and foot man. So this is because so many people have a belief of that, trust that and have a respect for that because of their life style. That is *sadhana*.

Interviewer: What are the characteristics of such a life style?

DN: It is a natural, *satwik* life style. It is taking bath every day, and doing the daily rites, that regularity.

Here the *tantri* attributes the *mana's* healing power to their life style which is a part of their family tradition. He equates this ascribed status to his own, as a *tantri* and opines that neither he nor the healers perform any miracles. The efficacies of both their practices are based on the faith of the people living in that region which have been earned through their regular *sadhana*, their respective rites and rituals. Another exposition regarding this came from the astrologer when he mentioned the practice. The excerpts of the interview is as follows:

Interviewer: What do you think is the basis of their success? Is it their medicines; is it their *mantras* or something else?

VP: Definitely medicines, *mantras* may also be there behind it. It is an ancestral brilliance (*poorveekamaya chaithanyam*) which they have

got. There is definitely an importance for tradition. Even if there are no benefits for the medicines or the *mantras*, the tradition definitely has a value. You are a doctor and if your son is also a doctor, your son will be known by your name. If your son just gives any medicine to someone, if you are a famous person, that illness gets well quickly.

While the *tantri* was focussing on their *sadhana* and life style which initiates belief and trust among people living in a large area, the astrologer finds their inheritance as the aspect which is important. Their medicines and mantras are traditional and inherited. But the name and the fame due to the `ancestral brilliance`, ascribed status and their tradition forms a set of related factors which inspires faith. Both of them also finds this faith as the factor behind the healing but finds their tradition as the reason behind that faith people have on them. “Inheritance – being born into a ‘healing family’” is cited as one of the ways in which people become folk healers according to Helman (1994: 71). An article in a monthly health journal on Poonkutilmana published recently, stated in its opening note that when the descendents of Naranath Bhrantan treat the mind, the medicine is their heritage (Sreekanth 2009: 90). The inheritance and the tradition of Poonkutilmana through a few hundred years have thus not only made them healers, but have also shaped their practice.

3. Patterns of affliction

In the following chapter, I will list the most important afflictions dealt with in this traditional healing practice. The multitude of afflictions is important as a culturally acceptable way of expressing human experience regarding illness. Though other authors have done work on this healing practice before, I could not find an exclusive account of afflictions.

3.1. Brahmaraksas

From the first day of my field work I noticed several Muslim men and women come to the *mana*, receive only a small packet and hand over ten rupees twenty five paisa to the healer and leave. There were no medicines given or visible rituals performed for them, but the

healer opened a specific diary, asked their name, the name of the *parambu* or the piece of land they resided on and recorded it. Sometimes those clients also carried a letter head of the *mana* on which the date of their last visit was noted with the above details. In my close observation, I found that there were also some Hindus with the same pattern of visit. When I asked the healer about them the answer was precise, they come for *atakkamvaypu* or containment of the *raksas*.

This term was familiar to me because of the reference in Astanga Hridaya which stated “One who is fond of humor and dance, self injuring, shouting for help, hates Gods and Brahmans, interested in the study of sciences and Vedas spontaneously is to be understood as possessed by *brahmaraksasa graham*” (Murthy 2005:42). In addition to the Ayurvedic literature, Smith (2006: 510) in his commentary on the 12th century Sanskrit text *Isanagurudevapadhati* which according to him was “quite popular in certain circles of medical and tantric practices in Kerala” mentions 18 different *grahas* - afflictions or possessions. *Raksas* is one among them. As per the translations of this text provided by Smith, these *grahas* reside in empty places, lakes, wells, mountains, gardens, rivers, individual trees in cremation grounds and in Buddhist or Hindu temples. They afflict people (*pidayanti*) who are vulnerable in several respects like who are angry, excited, laughing, afraid, alone at night or in a state of impurity. Among them “A *brahmaraksasa* is a *graha* that constantly offers sacrifice to the Gods and Brahmans [*Vipran*] reciting the Vedas and placing *kusa* grass [on an altar] while performing rituals of the twice born” (Smith 2006: 513). This explanation of the *brahmaraksasa graha* contradicts with that of Astanga Hridaya which says the possessed one hates Gods and Brahmans. Later in his text when he mentions the ethnography of Sukla on eleven kinds of *pisaca* responsible for different illnesses in Varanasi, *brahma* is mentioned as one of those malevolent *bhutas*. Smith explains this *graha* as “a brahma or spirit of a Brahman who dies an unnatural or untimely death (*akalamrtyu*)” (Smith 2006: 522). Thus from the textual sources one can gather that *raksas* or *brahmaraksasa graha* is one among the many afflicting spirits known to Kerala for long since both these texts were predominantly influencing the practice of Ayurveda and *tantra* in Kerala as opined by Smith.

But during my field work I heard different opinions about this affliction although I saw that an approximate number of ten to twenty people who came every day to the *mana* for containing the *raksas*. Here I am presenting three different interviews which provide us contemporary understandings of this spirit. The excerpts of the interviews are as follows:

1. Damodaran Nambudiri – (the *tantri*, a well educated Brahman man in his early fifties)

Interviewer: What about the main thing bothering them which is *brahmarakshas*, what is it?

DN: When the brahmans are dead...., it is not the `*brahmaraakshas`*, it is *rakshas*. *Raksha* means protection. It is a dead *brahman*, may be. But it has a protection function. Otherwise you will not say *rakshas*. *Rakshasan* is different. Unfortunately some people say so. There is a protective function there. Not a `*raakshas`*.

Interviewer: These people are afflicted; they are coming there with their problems.

DN: If there is something done against nature, this *rakshas* will get angry, because it has to protect. This protection is troubled by doing *adharma*. Therefore they prevent it. It is told as *brahmarakshas* and not as `*raakshas`*, no?

Interviewer: Does it explain why the Muslims are affected by the *brahmarakshas*? Is it because they are against *prakriti*?

DN: Something done against *prakriti*, they cannot protect, so they will defend it. Or they will attack the people who are making the trouble.

Interviewer: Are there other places in the neighborhood where people go for protection from *brahmarakshas*?

DN: We could also do that. But we believe that if you take such things, you will have the consequences. So we are not doing it and we will not do it. There are certain people who are looking for money who will do it.

Interviewer: What are the consequences of doing that?

DN: Each action has a reaction, when some bad things are taken; ultimately it has to affect the person, no? So normally, *satwik* people will not do it.

2. Ahammed, a 69 year old Muslim man, a client at Poonkutilamana

Interviewer: What did you say? Why are you making this offering?

Ahammed: It is called *rassas* (but he means *raksas*). It is related to the land.

Interviewer: What trouble does it give?

Ahammed: It creates certain disturbances, like the children getting sick. If you have cattle, they get sick. Like that, also for poultry, and cattle. We could also get head spins and fading of vision (*thala chuttalum kannu mangalum*). It does not push you down. But it is a disturbance.

Interviewer: Is it visible?

Ahammed: It is impossible to see! Could we see evil spirits (*pisachu*)? It is not human. It is an imp dwelling on land (*Bhumiyil nadakunna chekuthan alle!*). It will be in the temple and other places. But we may need a belief. But for those who don't have belief, it is not there. Those *jamayathi*s (a fraction of the local Muslims who are members of Jamayathe Islami) are there. They don't believe in it.

Interviewer: Why don't they believe in it?

Ahammed: They believe only in God. So they don't believe. In our things it said that there is *jinn* and *Saitan*.

Interviewer: Are you a Sunni or Shiya?

Ahammed: I belong to Sunni. We have Jamayathe people near us now. There are many such parties now! It is not the old times. Think you are a

markkist (Marxist), there are a hundred different ones now! Like CPI, the other one... CPM, ... all belong to that group.

Interviewer: What do they do here at the *mana*?

Ahammed: They do *mantravada* and give you some *bhasmam* (ashes). If that ash is sprinkled there, it has results. We believe that. They also give a thread. That could be tied on those who are sick. It is like that. What is your name?

Interviewer: I am Hari. How long you have been coming here?

Ahammed: You need to give it once in a year only.

Interviewer: Do you know how long you do that?

Ahammed: I cannot say that, it was given also from the time of my father.

Interviewer: How is it after the offering?

Ahammed: There will be no head spin!

Interviewer: What will happen if you are delayed in making the offering?

Ahammed: Now I have delayed, and now my poultry is not well. That is the difficulty of being late. If I come punctually there will be no such difficulties. Otherwise such illness occurs to the poultry and cattle.

3: Vishnu panicker the astrologer, a 28 year old Hindu man

Interviewer: What do you think of *brahmarakshas*? Are they protecting spirits or demons?

VP: When there is something wrong with a land then we look if there is the disturbance or *rakshas*. When there are discomforts in a house and if there are no structural problems we look for it.

Interviewer: Are there any particular planetary positions indicating *brahmarakshas*?

VP: When *vyazham* (Jupiter) is the head of the affecting house (*badhakadhipan*) and stand with other sinful planets (*papagrahas*) or *Sukran* (Venus) is the head of the affecting house and standing with sinful planets, that indicates *rakshas*. Or the head of the affecting house comes at the fourth square (*nalam bhavathil vannal*). One can also say about *brahmarakshas* if cattle get affected. Here in this village in the home of Govindan Nair, they used to offer the worship for *rakshas* every year. But for the last 15 years they did not do. They had a lot of healthy cattle. There were no problems for the first 3 years. But after that whenever there was a cub, it died or the cow got sick and died while carrying and this went on repeating for several years. He came here and found out the problem offered *payasam* for the *rakshas* and also did some compensation, now there are no more troubles, and there is plenty of milk.

Interviewer: What about temples having worships of *rakshas*?

VP: There are a few such temples in this locality. It is especially common in the *siva* temples.

Interviewer: Why *brahmarakshas* is such an important affliction here?

VP: Here, in this area most of the land belonged to the Brahmins. A Brahmin soul after death is called *brahmarakshas*. The land belonging to others like Muslims or Nairs originally is very rare. These rituals are to avoid their *sapa* (curse).

The *tantri* mentions about the origin of *raksas* as the spirit of a dead Brahmin, which sounds similar to the ethnographic finding in Varanasi mentioned by Smith. But he was arguing that the *raksas* is a protective spirit in nature which protects nature and human beings. When there are attacks on nature and thereby transgressions of *dharma*, they can no more protect and hence they defend such attacks. He also made it clear that even if this is a protective spirit his family and the other *satwik* Brahmins do not do the rituals for

containing the *brahmaraksas* as there could be a reaction and it draws in some of the bad things. Thus his rhetoric is showing the two sides of *brahmaraksas*, on one hand as the protecting spirit of nature, but on the other hand as a misfit to the *satwik* worship or ritual containment possibly because of malevolence.

According to the clients whom I met, this spirit dwells on land and is malevolent if not worshiped or contained annually with a ritual. The affliction could be identified by the illness of poultry and cattle and later by human illness. The interview with Ahammed, a 69 year old Muslim man reveals some of the contemporary and popular understandings about this affliction. This interview also reveals the trajectory of *brahmaraksasa graha* from the classical Sanskrit sources to the present day village life of a Muslim in Malabar. This is also a possible example of spirits acquiring newer identities over time in specific contexts. Smith (2006: 513) mentions that all *grahas* were nature bound and they occupy empty places, lakes, wells, mountains, gardens, rivers, individual trees in cremation grounds and so on. For Ahammed, *raksas* is a spirit dwelling on land and the land should be protected from this Brahman spirit by an offering at Poonkutilmana. He brings out a few popular spirit names, like *pisachu* (sounding similar to *pisaca graha* mentioned in *Isanagurudevapadhathi* the 12th century Sanskrit text and mentioned by Smith), *Chekuthan* a mischievous imp, together with *Saitan* and *Jinn* which he acknowledges as belonging to his religious texts. But it is mandatory to have belief in it to be afflicted or to be protected and he refers to the prolific fractions of religious organizations like the Jamayathes having no faith in *raksas*. The *mantravadam* done at the *mana*, the thread and the ashes given are protecting the cattle, poultry and humans according to him and one sees immediate and visible results such as the head spins getting cured. The astrologer also mentions the connection of the *raksas* with the land, and domestic animals. He had his own explanation about the astrological theory of finding out *brahmaraksas*. His example of the story of the villager's cow and milk further exemplifies the affliction of this spirit with domestic animals. I could also observe that most of those who came for the protection from *raksas* were rearing cattle, poultry and other domestic animals. I heard a client say 'I have not come for a long period as we did not have cattle'. The astrologer also unravels a relevant social fact or belief that most of the land belonged to the Brahmans in the past. The offerings to the *brahmaraksas* are to protect the land people and cattle from the curse of the spirits of former land owners.

There are two most important findings which one can make out here. The first one is that *Raksas* or *brahmaraksasa graha* in contemporary practice is a spirit related to a particular land. In the present day scenario this affliction is said to give a first sign by affecting the cattle and poultry. Later it may also afflict family members with signs such as head spins or unrest if not taken care of. But the classical symptoms of possession of the *brahmaraksasa graha* such as offering sacrifice to the Gods and Brahmans (or hating them as per Astanga Hridaya) and start reading the Sanskrit scriptures loudly are not so common though the astrologer told such a story of possession which I will be discussing later. The second one is the particular situation in Malabar regarding the former land ownership of Brahmans. Most of the land is said to have belonged to the Brahmans and the new owners are wary of their curses, especially their non liberated souls dwelling on the land. The *tantri* also mentioned about the contemporary phenomenon in which the Muslims who bought lands and houses belonging to the Brahmans face troubles living there. They are approaching astrologers for a solution who often refer them to places such as Poonkutilmana. The question is whether the malevolence of the former land owning high caste Brahman spirits are the only reason for such a predominant affliction.

Kakar in his account on the possessions at the Balaji temple notes that the majority of the Hindu clients were possessed by a Muslim spirit. Commenting on this phenomenon he says “The fact that fifteen out of twenty-eight patients were possessed by a Muslim spirit indicates the extent of this projection in the sense that the Muslim seems to be symbolic representation of the alien in the Hindu unconscious.” (Kakar1982: 87). If we subscribe to Kakar`s psychological idiom, we could argue that the Brahman could represent similarly the alien in the Muslim unconsciousness. But here the possessions are rare and the visible signs are those in cattle, poultry or illness of the family members. But *brahmaraksas* still dwells on the lands in Malabar, may be as an affliction as for Ahammed, or may be as a protection as mentioned by the *tantri*. For Devan Nambudiri, the main healer both *brahmaraksas* and `brahmaraksas` were the same, as protection could turn to affliction with the transgression of moral codes of nature.

3.2 Petiyil petuka – Getting trapped in fear

It was on a morning in September I saw Sumesh carried by his father and uncle in their arms out of an auto rickshaw to one of the benches in the roofed extension at

Poonkutilmana. He was 13 years although he was not a small boy for that age and the difficulty of carrying him was visible. But he could not make a single step. It was a busy day; the relatives of Sumesh made the first contact with the main healer and were waiting while he lied down on the wooden bench. He looked almost lost and his eyes were rolled up a bit and sleepy. His voice was low and he was always trembling. He was waiting for the call to the healer while I made the interview. As soon as I asked what happened to him, his father said, `*petiyil pettatha`*- that he was caught trapped in a fear. His uncle also confirmed it and said it was after seeing something at night 3 days back.

Interviewer: Are you going to school? In which class are you now?

Sumesh: I am in the seventh standard. (His speech was not very clear).

Interviewer: What happened to you?

Sumesh: I saw a vessel at home.

Interviewer: Then what happened?

Sumesh: I thought (*Vicharichu*) there was a snake inside that vessel and I fainted and fell down.

Interviewer: Was there really a snake?

Sumesh: I don't know that. But I felt (*thonni*) there was a snake inside.

Interviewer: When was it?

Sumesh: At night. I was alone.

Interviewer: How did you feel after that?

Sumesh: I feel like losing strength.

Interviewer: What else? Does he have convulsions?

Sumesh's father: Not that. But he has got a weakness in his legs. He cannot walk now.

Interviewer: How is your sleep?

Sumesh: I sleep less.

Interviewer: Is his speech affected?

Father: Speech is not clear always. He says the tongue is sluggish (*naku kuzhachil*). His problem was very severe before we came here. It is a little bit better already since we arrived. At home he was even bad. But he was calm when he was told about being taken to a temple.

Sumesh's uncle: Even before he is very happy to go to temples. He came with us to Sabarimala. He is very active in such things.

Interviewer: Does he study well?

Father: He has a bit of difficulty with his studies. But he is going to school and is really interested in playing. He says he get a vomiting sensation when he smells fish.

Interviewer: Is he talking about something else? Do you notice anything other than his speech problem?

Father: We don't completely comprehend what he is speaking. It is there for two or three days now. He is talking about devotional things more now (*bhakti paramaya karyangal*). He is speaking about *swamis* (spiritual gurus).

Interviewer: Do you see *swamis*?

Sumesh: Yes, inside the box, *Sivan*, *sreekrishnan*, *kotungalloramma* all are there.

Interviewer: Where are they?

Suresh: Their photos are in our house. The photos of *sivan* and *sreekrishnan* are in my box also.

Father: He is speaking about his instrument box used for Geometry.

Interviewer: What is your fear?

Father: When he sees his sister, he cries saying he don't want to see her.

Sumesh: When she is coming near me, I feel like something has bitten me. There is something moving.

Interviewer: Since when is he like this?

Father: Since the day when he is said to have seen the snake and was afraid, only three days now.

Interviewer: Did you give any other medicines?

Father: Yesterday we took him to a *panicker* and did *uzhinj mattal* (a ritual like what the healers are performing) at *pampumaekavu* (one of the famous temples of the snake Gods). He came back happily from there smiling. Today morning he was smelling fish in the kitchen and then fell ill again.

Interviewer: Why did not you like the smell of fish?

Sumesh: I cached a fish and it was dead in my hands.

Father: That was some time before.

Interviewer: What else do you feel?

Sumesh: I hear the hissing sound of snake in my ears.

Father: Have you been afraid of snakes before?

Sumesh: I did throw a stone on a snake once, I am not sure it was hit or not. It was many days back.

Interviewer: After that you are afraid?

Sumesh: Yes, grand mother told, the snake will follow if you have thrown stones at it.

Father: Yes, he and his brother threw stones at a snake once.

The explanation of the parents of Sumesh was similar to many other ones which I heard at Poonkutilmana about getting trapped in fear. This phenomenon was almost always referred as '*enthenkilum kandu petikkuka*' - to see something and get fear. I have heard this as a question being raised to many clients by the healers, whether they have seen something and got a fear. Sumesh was a thirteen year old, school going and cheerful boy, but when he saw a vessel at night near the water tap, while he was alone, he saw a snake inside the vessel and fainted. From that point, his speech slurred, he could not walk and he had less sleep. He started speaking more about devotional matters, Gods and gurus and heard snakes hissing. He started disliking his sister and felt something biting him when he saw her. He also strongly disliked fish and the smell of fish gave him nausea. But as soon as his parents told him of taking him to a temple he was calm. The parents took him to the temple of the Snake Gods following the advice of the astrologer where a ritual was performed, he immediately felt better and walked back home. But as soon as he had the smell of fish, that nauseated him and he fell back into the illness. He was brought to Poonkudil as the parents knew about the place for several years to heal such illnesses. There were a few vulnerabilities for Sumesh to get trapped in fear. The first one was that he had thrown stones at a snake with his brother and his grandmother's warning of a possible snake bite. But he got afraid at night, near the water tap, while alone. The time, the place and the situation were also vulnerable. The guilt of killing a fish which he had also triggered the trouble as he smelled fish at home at got sick from it. Sumesh had the rituals performed in which the main healer comforted him saying that his fear will leave him there and then. Sumesh could stand up and shake his hands and legs and he was given a thread, the ghee and the homemade pills. These symptoms would have been expressed or interpreted differently in another medical setting. The tag of a psychiatric diagnosis was quite possible for Sumesh with above symptoms. But for him, his family and the healers he was just caught in a fear and could come out of it with an amulet, rituals and some homemade medicines.

Petiyil petuka is almost an insidious phenomenon characterised by an external source which may trigger up such a reaction. Snakes are often mentioned as a source as in the case

of Sudhakaran who is having troubles with his sleep for which he is taking tablets. He was a thirty five year old Hindu man, a mason by profession. He was at the *mana* with the wish of stopping his modern medical pills as he could not wake up and be at work while taking them. He was there for the second time already and I took his interview amidst the crying children, loud shrill of the local buses breaking in front of the gate and streaming people all around.

When I asked about any happenings in his childhood Sudhakaran shared a memory as follows:

SK: May be there is something, but I cannot remember. I will be startled quickly but after a while I will not have even that theme in my mind. We have a sacred snake grove (*sarpakavu*) near our house. It is in a big Brahman house hold (*illam*). After a marriage feast we, me and my friend were returning back the big copper vessels. We thought of visiting the snake grove. I said no in the beginning as it was an abandoned place without worship (*puja*) for several years. He said there is no such problem and then we went inside. I was joking and said what kind of a snake grove is this, there are no snakes here! Two black serpents (*karinagam*) came hissing to us immediately over the snake idols! Both of us were so afraid (*sarikum petichu*). There was a low wall and my friend jumped over it and ran. I followed. We went running and reached the *kalari* (the place where martial arts were taught). There we saw 5 or 6 rat snakes on the ground. There was no other way other than to cross that place. He ran through the middle of that and I followed. Suddenly he was stuck and he stopped. There was a narrow path and across that path there was another big serpent lying! He jumped over it and I followed him. He was shivering even when we reached the road! He got fear that night and had a fever for a few days. I don't think about this. He had a fear and all that, but I did not, though I am really afraid of the snakes.

For Sumesh, it was an insidious onset of fear which was aroused by seeing external objects. And for Sudhakaran, though he does not attribute his troubled sleep to the strange

experience in a sacred grove, he is deadly afraid of snakes. But he reports his friend getting a fever with that incident. This phenomenon is also ambiguous as in case of Ramani. She was a 26 year old Hindu girl working as a helper in a clinical laboratory who came with her mother. Her mother told me in the beginning that she had got a fear but later in the interview it became clear that she felt being followed by a girl always and both she and the family considered it as a possession. I will be speaking about her later in this chapter. During my field work I witnessed that “*peti*” have other aspects than an insidious fear caused by an external object such as a snake or a possessing spirit which start from a particular event. I would like to discuss this phenomenon using a couple of case studies.

Vinod, 21 year old Hindu male first came on an afternoon in October. He was accompanied by his father and his complaint was a flash inside his head followed by weakness when he see or even hear about blood. He was supposed to go for a job in Chennai, but could not go because of this. The healer did the rituals, gave him a thread with holy ashes, homemade pills and the ghee to smell, taste and smear on joints. He came again after a week when I could take this interview.

Interviewer: Why did you come here?

Vinod: When I see blood in any film on the television I feel something strange in the mind (*manasil entho thonnal*), a flash in my head (*thalaminnal*), reduced courage (*dhairya kammi*). When I was in school I had the same problem in the science lessons when the teacher used to talk about blood. It was there from the third standard.

Interviewer: You had flashes in your head even when the teacher speaks about blood?

Father: Yes, in the science classes, when they teach about blood.

Interviewer: What will happen when you have a flash?

Vinod: I get tired and often fall unconscious. Then I don't remember what happen later. I remember only from the point when I wake up, when someone sprinkle water on my face. This difficulty was severe in the 10th standard and it did affect my studies.

Interviewer: Do you know how it started? Did you see some accident or get a shock?

Father: I had the same problem in my young days. I think it is that inheritance which gives him that. Now I am fine. When I was once walking home from a shop, the kerosene bottle fell from my hand when I saw some blood on the grass. We don't know when this happen!

Interviewer: Do you have the same problem seeing red colour?

Vinod: No, only if I see blood.

Father: Seeing the films, especially seeing the violent and bloody scenes of stabbing...

Vinod. Stabbing is not so problematic, but I cannot stand seeing the veins being cut. When I see that my mind trembles (*manas pitakkum*) and then there is a flash in the head followed by fainting.

Interviewer: Was it how it occurred last time?

Father: On that day he had also no food in the morning. He had just I tea.

Interviewer: How are you after the last visit?

Vinod: It was fine. Nothing happened after I came here

Here the nature of his problem is expressed as *dhairya kammi* – reduced courage and not *peti* or fear. He is having *manasil thonnal* -certain feeling in mind, *thalaminnal* flashes inside his head and he faints when he sees blood on the television. He had it from a young age and had such episodes when the teacher mentioned about blood in the science classes. There was no specific incident of onset mentioned and his father say that it is an inheritance as he also had such symptoms while young. The thread and the medicines were helpful for Vinod and he was better after a week and had no symptoms in that period. Jacob, a forty five year old Christian man had a similar trouble and his complaint was *peti* or fear. I am adding excerpts from his exchanges with the healer.

DN: What is your trouble?

Jacob: Fear, I am afraid of almost everything. I am afraid on seeing feces.

DN: On seeing what you have feared?

Jacob: On seeing fecal matter.

DN: Do you have sleeplessness?

Jacob: It is less on some days.

DN: Do you have less mental courage (*manodhairyam kuravano*)?

Jacob: Yes. I don't know if someone has done something against me. My grandfather and father had slight mental (disease). The land where we lived also had some problems.

Jacob says he has got a fear when he sees feces. But he does not have an incident of onset nor a reason why he has got such a fear. On the other hand he mentions the presence of mental illness in his family at the same time being suspicious about the black magic and problems of the land where he lives. Here also we could see that the fear is not insidious with a specific predisposing event, though he is trying to attribute it with black magic or incompatibility of land. In my interview with the astrologer he had his assumptions about the fear and getting trapped in fear. I asked him his opinion about people getting fear to which he answered as follows:

VP: If you are in a lonely place, you will be startled if you hear a noise. But the place where you are, is also important. If you are standing on the cremation ground, then you may get a fever. You may even see some images (*roopangal*).

Interviewer: So it depends on the place where you get this fear.

VP: Yes, it seems to be focussed around that.

Interviewer: So do you also find the reason for some ones fear with astrology?

VP: Yes, It is understood by the affected house (*badhaka rasi*) and its lord. Based on the planets influencing that house, the afflicting spirits (*murti*) is also identified. The most common manifestation of fear is fever. Some say about dryness in mouth and chills.

According to him the place where one gets the fear determines the nature of this affliction. In a burial place, one can get a fear so easily, see images and even get a fever. He also mentioned the astrological method in diagnosing a fear, whether the person is affected by fear or not is determined by his planetary positions and then he mentions that the *murti* or afflicting spirit involved could also be identified by this. This brings back the point which I had touched with in an earlier interview with Ramani. Her mother at first expressed that she had got the fear, but later revealed that she was possessed by a spirit. This retains the question whether *petiyil petuka* or getting trapped in fear is a new idiom of expressing spirit possessions. But as we saw with Vinod and Jacob, there are other modes of fear too. Their *peti looks* more of a state than of a process as in the first case of Sumesh. In the case of Sumesh, the expression of fear was that of a process, an insidious one with a starting even followed by a course of events. But both were considered as *peti*, irrespective of the causation or its course. For the healers they did not seem to differentiate between the fear or spirit possession, nor between fear as a state or as a process. *Petiyil petuka* is still perplexing and ambiguous with its faint margins to possession, but remains an idiom and affliction which people identify their conditions with.

3.3. Sathru dosham and sthala virodham – of Enemy’s wrong doings and spatial incompatibilities

Vighnesh Kumar, a 28 year old Hindu man came with a friend and both were sitting in a corner waiting for their turn. He was a handsome and well built young man and was quite suspicious about what I was doing in the beginning of the interview.

Interviewer: When did your problems start?

VK: It is almost five years. Immediately after school I went to learn in the workshop. I had certain botherations there. I had some difficulties. From there it started.

Interviewer: Do you know how it started?

VK: No, if I knew, it would have been easy; I would have moved and lived accordingly! I had the wish to learn things there. But then when I read a book or try to learn something at the workshop it gets to a specific point. There is a particular type of thing called *chetta*. Then it proceeds that way.

Interviewer: So you could not manage to learn. Could you explain how this *chetta* affected you?

VK: When I try to do something, my attention gets distorted. Even when we are sitting here like this, my mind can change. Sometimes it is like someone pushing you off.

Interviewer: Do you know why it occurs?

VK: No, but when I tried to know, I was told to come here and do these rituals.

Interviewer: Did you go for any treatment?

VK: No I had no illness. There is something called *kaivisham* (Literally hand poison, indicating sorcery). So *panickar* (an astrologer) told me that it could be due to that and he made a medicine and gave it to me. I took that medicine. I don't remember buying or taking any other medicines. I had a fever some time or an injury at work place. For that I would have gone to doctors. But I had no other illness or treatments.

Interviewer: Did the medicine given by the astrologer help you?

VK: Yes, there were a lot of good changes. (*Nalla mattamundarunnu*) I had the feeling of a fire ball moving up in my belly (*Vayarinu kalicha*). That was gone after the medicine. It was to be taken with milk.

Interviewer: Have you had any serious accidents or have you witnessed anything so?

VK: I have seen an elephant going mad and making troubles once. There was someone who was an office bearer in a political party. I had good contacts with him as I used to take care of situations such as accidents or even fights. I think he is not so happy about me now and I don't know someone is playing behind this. I think one should not have such blind believes also. I think this treatment and medicines will help me.

Interviewer: So you don't have any difficulty related to work?

VK: Yes, I do. When I start to go for job, I feel repelled and lazy. Now it is a lot better. In the beginning, it was difficult for me to get up from the bed even after the sun is up and it is noon! I could not rise! That situation has improved a lot. Someone told me never to use tablets to sleep in this condition, I never used them.

Interviewer: Was your sleep affected?

VK: yes, sometimes I could not sleep until 2 or 3 at night! We are supposed to wake up at the auspicious time before sunrise, but that is when I get a bit of sleep!

Interviewer: How is your interaction with friends?

VK: That is also affected sometimes. Sometimes I do not get words.

Interviewer: Are you married?

VK: No, I am not.

Interviewer: Do you take alcoholic drinks?

VK: Yes, the astrologer said the *kaivisham* was given with alcohol. He also said that it was given by a woman. I don't know that, because I have not seen it. I cannot also go and ask the person who gave me

the alcohol. But it is true that I drink, I had drinks even yesterday evening. I tried several ways to avoid drinking. But I could not, that is an important disturbance. I am trying to avoid that. But I am just drawn into it.

This interview reflects the typical nature of multiple idioms each person is carrying to a healing practice. Vighnesh Kumar started telling about his problem as a fear. But there was also an incompatibility related to the land in which he was living. He was referred by another healer to come to this practice to get rid of those troubles. While explaining his troubles, he mentions that all started with difficulties in his work place. He could not keep his attention in work and he mentioned about *chetta* which in popular understanding stands for *jyesta* the goddess of bad luck and inauspiciousness the elder sister of *Lakshmi* the goddess of prosperity. Then he mentioned about sorcery and *kaivisham* the sorceress poison which was fed to him by a woman and mixed with alcohol. He had the feeling of a fire ball moving up in his belly due to this which got cured by the treatment of an astrologer. He is worried about the possible enmity of an influential political leader and suspicious if he has done something. After having said that, he immediately falls back to rational thinking and say someone should not have such blind believes. Though he had multiple causes for his sufferings, Vighnesh Kumar strongly suspects someone has done something against him. He is also convinced about the sorcery- the *kaivisham* fed with alcohol and that together with the problem of the land cause his sufferings.

There was another client who told about the possibility of the sorcery, a *Jinn* and *kaivisham*. Babu a 35 year old Hindu man came from the district a few hundred kilometers far. He was accompanied by his father in law. He had developed a deep grief following his mother's death almost 3 years back. Following that he had difficulty in work and he lost interest and focus. He was admitted for 20 days in a private psychiatric clinic and he improved considerably and had reduced his tablets to a single one. He had also consulted an astrologer who advised him to do certain *karmas* or rituals as he was supposed to have an affliction with *Jinn*. It later came out from his father in law that he had a pre marital relationship with a Muslim girl. His father had the history of mental illness. Later he told me that he had believed in *kaivisham* and *drishti dosham* as the main reasons for his problems earlier. He also had undergone a vomiting treatment in the temple for removing the sorceress substances.

The relevant excerpts from the interview are as follows:

Interviewer: You said something about the *jinn*. Do you think there could be such a reason behind this?

Babu: No, I don't think so now. I had such thoughts before.

Interviewer: When was that?

Babu: Before the first time.

Interviewer: What did you think then?

Babu: Whether it is *kaivisham* or *drishti dosham*.

Father in law: We have the *thiruvizha temple* near our place; we went there to vomit it out.

Interviewer: Did you vomit well?

Babu: I did not vomit!

Father in law: They gave the medicines to vomit, one has to drink water and go around the temple many times.

Interviewer: Then why don't you vomit?

Babu: I had a diarrhea later, though I did not vomit.

Interviewer: Was it because there was no *kaivisham* that you did not vomit?

Babu: Yes, it is told so.

Father in law: No, if you have an empty stomach when you take medicines, then you will vomit. If you have taken a coffee or food, then you may not. We went together there.

Babu did not answer the question about *Jinn*, though his father in law told me about his former relationship with the Muslim woman. Whether informed previously about it or not,

the astrologer had asked him to do the rituals at home and the vomiting at the temple for the *kaivisham*, which he did. Though he felt good with the rituals, he did not vomit at all after taking the medicines. But his father in law was trying to explain the rationale behind his not vomiting and thereby arguing for the possibility of *kaivisham and Jinn*. By doing that the father in law suggested sorcery performed by his former Muslim girl friend. Babu also told me that his wife was not the girl he liked. One may point out a “marital maladjustment” here and subscribe to the view of Kakar that it “is a prime cause for many who seek professional help in the west. It is no different in India...” (Kakar1982:51). But above that his narrative signifies the prevalence of the aspect of sorcery and of *kaivisham* in the present day scenario in Kerala even among well educated people. There was no single instance in which the healers at Poonkutilmana suggested *sathrudosham* or *kaivisham*. But they often mentioned it to the client as the astrologer’s reference letter had written about it. The main healer mentioned it in the beginning of the ritual together with other possible afflictions which are targeted by the ritual and declared that the ritual takes care of them all. In both the above interviews *kaivisham* was suggested by the astrologer. More over Smith in his study on the practice of possession in Kerala opines regarding *abhichara* or sorcery that “In Kerala this takes the form of *kaivisa* a Malayalam compound meaning “poison from someone’s hand” (Smith 2006:551). He refers to the text *Prasnamarga* the most important text of horary astrology in Kerala and say that this text invites the participation of Ayurveda and Tantra to treat what it could consider as an astrological affliction .The current situation in Kerala as in the above examples highlight that this phenomenon is mediated by astrology as much as its textuality depends on *Prasnamarga* as pointed out by Smith.

Hence I asked about it in my interview with the astrologer. Vishnu Panickar, the astrologer was very skeptic about the prolific rise in the frequency of *sathrudosham* in Malappuram district. His answer was the following:

VP: In this district, if you say of *sathru dosham* , then one will say you are a *panickar* (astrologer).Most of the Muslim clients ask if anyone has done bad things for them, when they see an astrologer first. Regarding that unsold land, there may be some situations there which influence its sale. But these people were thinking someone has done something to stop the sale. If you say that there is no such thing, then they will say that you are not a *panickar*! Even if

someone goes for a manual work and returns, maybe because there is no work, then his family will say it is an enemy's spell and will go to an astrologer. Most of the astrologers including me have their majority of clients complaining of *sathru dosham*.

Interviewer: What are your usual suggestions for that?

VP: To do the ritual (*avahana*) for avoiding it or to do worships and offerings in the goddess temples.

Interviewer: How do you understand about it in astrology?

VP: That is understood by the sixth house and the lord of the sixth house. We may also predict the direction of the enemy and the reason of the enmity based on that. But in truth only 10 percent of these people have real *sathru dosham*.

The astrologer takes it as a criticism of his profession that they are the people who encourage this paradigm. It has been stereotypical for a client, and more often a Muslim client to ask 'who has done it to me?' He gave examples of seemingly mundane issues such as difficulty in selling a land or someone not getting enough work identified in such terms by the clients as well as astrologers. He also revealed how *sathru dosham* is understood in astrological terms and how it could be ritually managed. But he was of the opinion that it is a client induced and astrologer mediated phenomenon and only ten percentage of it is real for him. This opinion from a young astrologer resonates the rationale of the 'Guruji', the vaidya who treat mental illness in Kakar's account who sarcastically tell "...no one has any other work to do. Everyone is sitting around just to perform sorcery. No, brother, this is a kind of illness." (Kakar1982:257). But on the other hand it points out that the prolific identification of people's suffering to afflictions such as *sathru dosham* even raise the eye brow of an astrologer. But as we saw in the interviews clients find relief with such identifications and ritual managements and thus the social life of such afflictions perpetuate.

Being afflicted by *sthala virodham* or a spatial incompatibility was mentioned by the clients and healers often. There were two important aspects in this incompatibility; one was the affliction of *brahmaraksas* discussed earlier and the second one was the defect with

architecture. The most common mention regarding the latter was a toilet placed wrongly in the *kannimoola* the divine south west corner of a land. I have heard this a few times in the healer- patient interactions and every time from a Muslim client and always from those referred by astrologers. Hence I asked the astrologer about it. The excerpts are as follows:

Interviewer: Do you think people are more inclined to look for traditional architecture these days?

VP: That is less these days, I think. Everyone is trying to construct a bungalow even if there is only 5 cents of land. So they don't take care of these ideas. They have also the problems because of that. Like the man who came earlier, who work in the bank ATM. He had no difficulties when he was living in his family home. But as soon as he shifted to a new house, he started having financial problems, lost job and everyone got sick. Finally he came here and we found out that his toilet was in the divine corner (*kannimoola*). It is a place which should be always kept clean.

Interviewer: Which is that corner?

VP: That is the south west corner of a house. It should be a worship place and it should not be kept low. A toilet should never be housed there. His new house had the toilet in that corner. In both floors it was the same. That bath rooms were dismantled and then everything was fine.

The transgression of certain principles in traditional architecture causes afflictions according to the astrologer. This concept is possibly inspired by *Vasthu sasatra*, the traditional stream of knowledge on architecture. But these ideas also influence the Muslim clients and many of them reconstruct their toilets accordingly. The rituals in the *mana* are said to give a temporary relief for spatial incompatibility where as the permanent solution such as a reconstruction is also sought by many.

3.4. Ettukutal – possession or mental illness?

Jameela a 34 year old Muslim woman came a bit late in the evening. The main healer was leaving to the town for some personal matter. But even then he asked her what her problems are and asked her to tell me the details first. She was one of the very few who claimed of possession and she tried to demonstrate her possession to me as well as to the healers.

Healer: What is the difficulty?

Jameela: This is the difficulty; someone is making me play like this. (She dances turning her hands alternatively to both sides and turning around). Those ones who have entered into my body, *kuttichathan* and *chathan kutti*, they are pushing me like this.

Healer: Tell your problems to him (and points to me and leave.).

Nair starts the interview. The questions are answered by Jameela and her mother, both at the same time.

Interviewer: How did it start?

Mother: I was standing near the well, she was outside and her sister went to the bathroom. Then she cried out. “Mother, my mother ...something happening to me...I am getting afraid.”

Jameela: Someone entered into my body. I cried loud.

Interviewer: When was that?

Mother: It was in between the Ramadan.

Jameela: After the second day, it was on the third day.

Mother: It is like something has entered her body. But then what is she thinking? She is thinking that her husband send it. He recently married another girl without her knowledge. And she has 3 children, 3 boys.

In the interview I understood that Jameela was the second wife of her husband. They had three boys, the elder one was 14 and the younger was 11. Her husband recently married a younger woman again without her knowledge. On knowing that he had another woman, Jameela asked him not to make a ceremonious marriage. He did not accept her proposal, brought the new bride and kicked out Jameela. He had already sold her gold which amounted to be 30 sovereigns. And then while she was just living with her in laws he forcibly took Jameela to the house where he was living with the new woman for getting a social acceptance for his third marriage, and to show the relatives and the community around that it was an amicable marriage. This broke down Jameela and she left her husband's house and came home to live with her parents. It was during that stay that she was possessed during the holy month near the well early in the morning. There was a marked difference in her talk and behavior after that incident according to her mother. She started getting doubtful whether the parents may be able to take care of her forever and she felt like going back to her boys who were still living with the father. But in between the interview when I asked about the incidence of similar complaints earlier she immediately said that she never had mental illness before.

Interviewer: So there was nothing similar before this?

Mother: No.

Jameela: I never had any mental illness (*manasika rogam*) until now.

Mother: But her husband is telling everyone that she is mentally ill.

Interviewer: So is it a mental illness?

Jameela: No, something has entered into my body.

Mother: Yes, she is also saying that something has entered. She did not sleep yesterday. And from today morning she is speaking too much. Even before, she is beating with her hands and legs on the cots.

Jameela: I have *sarpam* (snake god), *karimkutty*, *kuttichathan*, *chathan kutti*, *chekutti pappa*, *oti murthy*.

Mother: She was saying all these names. She is also saying that she is going back to her children. She asks us if we will look after her properly! It is clear that he had sent them. Her lever was swollen this afternoon so much.

When I asked whether she considered herself as having mental illness, both Jameela and her mother insistently said that she had a possession, and something has entered her body. Her mother also said that she tells all these names, asks whether her parents will look after her forever and expresses her wish to go to her children. For the mother these were clear cut signs of her possession and confirmed her husband`s role in causing it. But during the interview Jameela asked a few questions which shook me.

Jameela: Can you take off those who are with me?

Interviewer: How do you know that they are with you? How do you know them?

Jameela: Don`t you know them?

Interviewer: How do you know?

Jameela: They have entered me, in my body. *Oti murthy*..

Interviewer: How do you know? Have you seen them?

Jameela: Yes, I am seeing them, don`t you see them? This is *karim kutti, kuttichathan, chathan kutti, sarpam*.

She starts moving like a snake,

Jameela: This is *sarpam*, isn`t it how it moves?

Interviewer: Where are you seeing them?

Jameela: I am seeing them before my eyes. Who will catch this *sarpam*?

Interviewer: The healer will come now, please wait.

I was surprised with the answers given by Jameela and felt embarrassed. She reminded me about my inability to help her. But I continued the interview and was insistent with my question how she knows about those spirits and whether she had seen them. But she asked back whether I don't know them and whether I don't see them and replied she is seeing them pointing behind my head and moving herself like a snake. I was trying to raise a rationale question, but her answer was conclusive, factual and experiential.

Another such incidence was with Ramani a 28 year old unmarried Hindu woman. I did mention her before in the section on *peti* as her situation was first explained so by her mother, though later it was clear that they were thinking about a possession. Ramani got ill after her father's death. She discontinued her work as an assistant in a clinical laboratory and never went again. She felt a woman followed her and told her that her younger brother was responsible for her father's death. She also felt that this woman who follows her will take revenge on her brother and make him loose his job. She belonged to a joint family and she had 4 sisters and 2 brothers. Two of the sisters were living separately as they were married, but all others stayed together. Once during the interview she also told me that it is her elder brother's wife who follows her. Her mother was complaining about the totally upsetting situation her illness has created within their joint family. When I asked Ramani she said that she did not see or know the woman who is said to follow her, but the family had a guess about the situation though they did not pronounce it. The following part of the interview reveals the incident important for this.

Interviewer: Do you know the name or the looks of the girl who is following you?

Ramani: It is my elder brother's wife.

Mother: She does not know what she is talking. The wife of her elder brother is living with us and she has a child.

Interviewer: Do you know the name of the girl?

Ramani: No.

Interviewer: Have you seen her?

Ramani: No.

Mother: She is telling such things also to neighbors. What will people think?
She is also telling all this to her sister in law. She is also affected.

Interviewer: Did she have any problems at her work place?

Mother: No. Her younger brother was working in Madras. He was living in a rented line room. The girl in the next room poured kerosene on her and burned herself. He was attempting to save her and was totally burnt. This incident affected him so much. He came back after that.

Interviewer: What happened to that girl?

Mother: She was dead. When my son came back to go to *Sabarimala* (the famous Hindu temple in south India), he came after the burns had healed, but he had several dark scars on his body. I was spellbound, and asked him what they are and then we came to know this story. He said it was only lord *Ayyappa*'s grace which saved him. Then he did not return to Madras.

Interviewer: Did he have any other problems?

Mother: No, he is fine.

Interviewer: When was that?

Mother: It was two years back.

Interviewer: Is Ramani talking to her friends?

Mother: No, she does not have many friends.

Interviewer: Is she on any medications?

Mother: She was on the medicines for breath problems. And now she is also taking medicines for the worries of her mind (*Manasinte prayasathinu*). She is taking medicines from the doctor in Manjeri. She is not taking it for two days. Should she take them?

Interviewer: The healer will tell you what to do. Who told you about this place?

Mother: It was that *panicker* (astrologer). But even then we could not come here for a long period. Both my sons could not find time to come and it was postponed. Today after the bath, I prayed and said we will go today anyhow. I said we are going to the doctor and we came here. What else could I do? Both my sons could not make it and I prayed to *guruvayurappan* to help us to come here for my daughter. I had difficulty to walk because of the pain in my legs. That is how we came here today.

The story of her younger brother who got burnt, while attempting to save a woman who burnt herself was an important incident for her family. But there was no relationship between this woman and Ramani's brother as told by her mother. But the family believed that their son was protected by the God *Ayyappa* whom Ramani's brother was worshipping as he was in the preparation for the temple visit. Ramani was also taking medicines from a Psychiatrist in the nearby town. But they have also gone subsequently to an astrologer who referred her to Poonkutilmana. In my repeated interview with Ramani and her mother almost two months later, the theory of possession was clearer.

Interviewer: How are you?

Ramani: It is reduced (*kuravund*).

Interviewer: Are you still followed by the woman?

Ramani: No.

Ramani's mother: Now she is better, and someone comes and tell her you don't need the medicines from here. The illness has been removed (*sookket mari*). Then she tells me, mother my illness is gone. I asked who told you. A girl comes and tells that in her ears. That your illness is gone and now you don't have to go there again. Then I went again to the astrologer and had another look. Then it was found that it is not removed. Now we have to repeat the *uzhinjumattal* (the ritual performed at the *mana*)

and remove it. Then only it will go away without traces.
What to do?

Interviewer: Is someone telling so in your ears?

Ramani: No.

Interviewer: Did the astrologer tell anything about the spirit possession?

Mother: It is not gone. We went to the same astrologer. He asked to repeat the ritual. There is some change after coming here. Before that there were several quarrels in between. Now there is a little difference in that.

Ramani felt well, the quarrels at home were said to be less but the astrologer said the spirit possession is not completely gone. He also asked to repeat the rituals. Though Ramani did not hear stories of vengeance, she continued to hear the woman saying that her illness is gone and she doesn't need medicines. Though she was better, the spirit possession remained as per the astrologer and thus they wanted to repeat the ritual.

Smith while investigating about the diagnosis of possession in Ayurveda argues "Never, to the best of my knowledge, except at last- resort places that specialize in exorcism, such as Balaji, is there an assumption of possession" (Smith 2006: 552). He might be making this opinion about the diagnosis by the *vaidyas* about possession, but at Poonkutilmana and in Kerala there are definitely clients and their families who assume possessions. Interestingly they may also mention as Jameela, about the psychiatric idiom or may be using the psychiatric medicines as Ramani while going to the astrologer and doing rituals, all in tandem without much distinction or awareness. There were many other clients who totally negated the theory of possession and considered their problem as mental illness and were at Poonkutilmana just for the medicines. They were carrying the 'list' mostly from Psychiatrists and rarely from Ayurveda practitioners, but never from astrologers. There were some who had come for medicines, but accepted the rituals and underwent them. And some others, who asked only for rituals, got the medicines and were advised by the healers about the importance of taking them.

When I asked the astrologer in the village whether the possessing spirits are real or are mental phenomena, he answered they are both. He also said that when one is worshipping God, he is doing a worship of that *bhava* or aspect of his own mind. The other spirits are also similar, he said. Then he narrated the story of a Muslim woman who started taking bath in boiling water.

VP: One cannot take bath in boiling water just by saying he is god. If it is due to an imagination, it will not happen like that. If you dip the tip of your finger in boiling water, you would have a burn. And that woman, she poured boiling water on her head, so definitely it is a possession.

But for the healers they never promoted the view of possession though their rituals consisted of exorcism of possessing spirits. When asked whether the afflicting spirits are real, the main healer answered first `What shall I say?`. But he did not negate the presence of spirits as inflicting agents and said that if one had *viswasam* a deep faith, then they are existent for that person.

3.5. Protecting the vulnerable

Pregnancy and child birth are vulnerable points when protection is needed from inauspiciousness, evil eye and possessions. The vulnerability of women and children in getting possessed are mentioned in the *Isanagurudevapadhati* a 12th century Sanskrit text describing possessions and their management according to Smith (2006:543). “The monthly release of blood and their ability to carry the offspring make them attractive to spirits and the protective measures to guard new born from threats visible as well as invisible were extreme” (Smith 2006:543). This text was said to be very popular among the medical and *tantric* practitioners of Kerala (Smith 2006: 540).

In the present day scenario also, a good number of women come to the *mana* for the conventional ritual in the 7th month of pregnancy. During the ritual the healer ask the client to pray well to the Goddess at the *mana* to have a safe delivery and advise to give a word to the Goddess that the child will be brought again to the *mana* after *annaprasana* the feeding ritual. Certain stereotypical questions were also asked to these clients like how

many months it has been, whether they have pain in the flanks, back and abdomen and swelling in the feet. Advices such as reducing the amount of salt or increasing the amount of green leaves and vegetables taken are given. Some clients also presented with reduced movements of the baby in the uterus or swelling of the feet. The healer also enquired about the Gynecologist the clients are consulting, the results of the scan, whether they had hypertension or diabetes and so on. The healer also asked whether they could take a ghee preparation and gave the home made ghee only if they agreed to take it. Everyone was given a protective thread and ashes to make a mark on the fore head and to apply on the joints. The commonest prescription was the ayurvedic pill *Mahadhanwantaram gulika* which they had to buy from a pharmacy.

Infants are also brought regularly after the *annaprasana* , or the feeding ritual. I have also witnessed the *annaprasana* rituals performed at the *mana*, as the parents could not bring their children after delivery. In this ritual rice was served in a banana leaf in the healing space with sweet rice, a red chilli, jiggery, salt, tamarind and papadam and the parents had to mix all of it together and feed the child while the healer chanted inaudibly. After this ritual the parents had to clean the premises of the healing space. Children were brought in also with complaints of startling and unnecessary crying which are also treated with the standard rituals as well as with medicines. Prescriptions were given for reduced breast milk. Tricks such as pinching the thigh gently was an advice when an infant cried and could not breathe. Infants were also given the protective thread always with ashes and the home made ghee preparation for giving a few drops on the tongue, to smell and to apply on the joints. The home made pills were also given with varying adjuvant substances such as breast milk, honey or the juices of herbs. Thus the protection of the vulnerable, the pregnant woman and the infant were carried out without much distinction between the ritual and medical realms.

4. Therapeutic approaches

In this chapter I will discuss about the main therapeutic modes engaged by the healers. *Marunnum mantravum* is an idiom in Malayalam, indicating the tradition and sense of using medicines and *mantras* together. This seems to be the sense of his practice as Tarabout (1999: 137) notes that they were allotted the family traditions of “*mantra* and

chikitsa` (i.e. the practice of medicine as well as of mantras)”. Apart from the above, they are also said to be famous for their `good words`.

4.1. Mantravadam – the ritual

The term *mantravadam* is holding its own debated origins and inconclusiveness though it indicates the use of *mantras*. Tarabout explains in his foot note that the use of the words sorcery or magic to denote *mantravadam* have been done for the ”commodity’s sake” (Tarabout 1999:152). Tarabout say a *mantravadi* literally means an expert in *mantras* (Tarabout 1999:135) while Smith is of the opinion that “*mantravadin*” is the term used to denote “*tantrikas*” in Kerala (Smith 2006:544). But later in the ethnography, Kumaraswami a *mantravadi* of Kattumadam mana tells Smith that he consider himself as a *mantravadi* and not a *tantrika* as the latter performs rituals in temples in Kerala while “*Mantravadins* specialize in treatments that require personal attention outside the temple” (Smith 2006:549). To hear from the horse’s mouth, Kattumadam Narayanan , a *mantravadi* in his book argues that *mantra* is what protects by *japa* or ritual chanting and *mantropasana* or propitiating the *mantras* is the power source of the *mantravadi* (Kattumadam 2006:8). Tarabout in a later article characterizes *mantravada* as follows:

“*Mantras* are verbal or phonic formulae which are said to have the capacity to act when properly uttered, murmured or just evoked in the mind. Mastering mantras is the core of some initiatic disciplines (`tantrism`) enabling the practitioner to acquire extra ordinary powers (*sidhi*) and spiritual awareness. At the same time, it is the very foundation of routine cult praxis. In this particular technical respect, *matravadam* (`magic`,` sorcery`, `witchcraft`) cannot be always clearly distinguished from these practices.” (Tarabout 2003: 220).

Thus we see that *mantravadam* is an ambiguous term which is not easy to capture completely in a single word, or even using many.

Two almost contemporary articles describing the function of Poonkutilmana, one by Tarabout (Tarabout 1999) and the other by Unnikrishnan (Unnikrishnan 1998) do not mention their use of *mantravada*. For Tarabout what they do was “psycho- religious therapy” as evident by his title and Unnikrisnan say that they are doing “traditional psychiatry” and mentions them as a “team of physicians” (Unnikrisnan 1998:18). But

Smith in his more recent article makes it clear that this Nambudiri family does “*mantravidya*”. He remarks:

“Kumaraswami Nambudiripad as well as members of an unrelated family of Nambudiris from Poomkutil Mana near Manjeri, in Malappuram District about fifty difficult kilometers away, state that they learned their *mantravidya* and associated healing practices from their forefathers through direct observation and instruction and not from books or Sanskrit manuscripts” (Smith 2006: 548).

Smith also comments later in his foot notes about this practice and say that they have a “burgeoning practice”, and their focus is mental illness. The majority of clients are Muslim girls, and they have an inpatient facility. He further says that the family “empowers their medicines with *mantras* and *puja*, all of which are tightly guarded family secrets” (Smith 2006: 577). Though he mentions about the tradition of “*mantravidya*” in this family, he does not go into the details of the same. Thus it is definitely worthwhile to narrate certain aspects of this *puja* or ritual.

This standard ritual known as *Uzhinjumattal* happens in the *Poomukham* or the visitor’s place of the *mana*, where the healers are usually sitting and seeing their clients. But when the ritual is about to start, the healer asks the client to come inside the *poomukham* and then assumes their position on an *avanippalaka*, a traditional wooden stool which resembles a tortoise. The clients enter the place and sit on a mat facing the healer. The client is first asked the name, the star on which he or she was born and the name of the family where they live. For women their husband’s family name was asked. The Goddess is invoked by the healer with inaudible *mantras* and then the clients are purified by sprinkling a few drops of water on them. The healer also purifies the space before the ritual by sprinkling water drops. A brass plate is prepared with a burning wick, flowers and rice and an anthropomorphic sandal wood effigy and placed on the floor. The patient is asked to take the plate with both hands and rotate it around them from top to bottom for five times and then to place it down. Then the healer repeats this again for five times. This act of rotating the plate in front of the person signifies the popular name of the ritual *uzhinjumattal*. It was interesting to note that some of the clients just turned the brass plate around their head in a clockwise direction while the healers always did turn the plate vertically from top to bottom. After doing that, the sandal wood effigy was placed at the bottom of the lamp and worshipped using flowers, rice, water drops and mantras. Another

wick of thread is lighted and held by the healer in his hand and he repeats the rotating movements vertically again with chants. This thread is dipped into the bowl with *guruti* the red colored liquid resembling blood. After this a small *pantham* or fire torch is lighted and placed over the bowl with *guruti* and the rotating movements are repeated again. Then the client is given water to drink from a conch shell as the *prasadam* or the ritual remains. The client is protected by throwing ashes mixed with rice grains. All these steps are carried out with chants, mostly inaudible and offerings of flowers, water and rice. Finally, the client is asked to stand up and shake off his or her hands and legs which concludes the ritual.

In a very precise interview, the main healer at Poonkutilmana was asked about their ritual. He answers:

DN: We are doing *avahana*, which is invoking the deity on the oil lamp. First the client and the place is ritually cleansed. Then the rice and flowers are taken on the plate. Whatever is on their (Client's) body, that is invoked on the wooden image by turning it in the plate with rice and flowers on it. After that if there is something specific remaining, another burning wick with flowers is used for invoking of that. Then a *puja* is performed there itself for the *rakshas* and other *murtis* thus removed. We are doing other offerings like *palpayasam* for the *rakshas* on every Thursdays. But the *puja* performed during the ritual is to appease them immediately. The second time with the burning wick is for the unknown influence remaining. The *guruti* (red coloured liquid) and the *pantham* (fire torch) are moved around the client to remove whatever other influence is remaining. Then *bhasma* (*holy ash*) is thrown to protect the person from further afflictions. It is thrown with rice to make it fall on the body.

Interviewer: Are you bringing all those afflicting spirits to the wooden idol?

DN: That idol is only for the *rakshas*.

Interviewer: What does the client do in the beginning when he is turning it around?

DN: He is doing the *avahana* himself.

Interviewer: So is that all transferred into the wood, then from the wood to the lamp, and then from the lamp to the *guruti* and from there to the central courtyard of the house?

DN: *Rakshas* is not removed to the *guruti*. For *rakshas* we do perform other rituals here. What goes into the *guruti* are other spirits. You would have heard of *upadevatas* (sub deities) which belong to the three groups- *saivam* ,*vaishnavam* and *saktheyam* (related to the three predominant deities of Hindu worship *Siva*, *Vishnu* and *Sakti* the goddess). The *rakshas* is *vaishnavam* and it is only the other two which goes into the *guruti*.

According to Devan Nambudiri, the ritual they perform is *avahana* and the objective is to remove or exorcise the afflicting spirits. The main affliction taken care of is the *brahmaraksas*, and the sandalwood effigy is used for the purpose. He presented the idea that the *murtis* are categorised into three according to their sources as *Saiva* pertaining to *Siva*, *Vaishnava* pertaining to *Vishnu* and *Sakteya* related to the Goddess. The sandal wood effigy used for *avahana* is specific for the *brahmaraksas* which is a *Vaishnava murti*. The *guruti* is used to exorcise the other two. According to Kattumatam, the *mantravadi*, the six *karmas* engaged by the *mantravadi* are *santhi*, *vasyam*,*kharsanam* ,*stambhanam*, *uchatanam*, and *maranam*. Among them only three are considered as *satkarmas* or good acts and thus carried out by a traditional *mantravadi*. They are *Santhi* which is done for calming an illness, *stambhanam* for freezing an irremovable spirit, and *uchatanam* which is removing the spirit possession. But he does not go in detail nor explain each of them (Kattumatam 2006: 35). The other three which are not considered as good could be literally translated as *vasyam* – attraction or seduction, *kharsanam*- friction or confrontation and *maranam*- killing. On close observation of the practice at Poonkutilamana, it is clear that they do only rituals for worshiping and pleasing the *murtis*. The *karma* which they do- *avahana* looks more like a *santikarma* for calming the deity by worship, though the explanation given by the main healer points towards *uchatana* or elimination. Kattumatam also mentions that the spirits removed by *uchatana* in traditional *mantravadi* families are removed to a big tree in the court yard where those spirits reside further and they are kept under control by the presiding deity of the house hold.

Other than the above ritual another one called *muttarukkal* was also performed often. This was offered for removing the impediments or obstacles with work, education or health. In this ritual the client brings a coconut and the healer ask the client to rotate the coconut around himself or herself for five times and then to touch the important joints like the elbows and knees with the coconut. After this a lighted wick of thread is placed above the coconut and then the healer performs the *puja* by turning the coconut around the client vertically and also around each of his joints. After this the coconut is taken inside the house and broken on the stone in the sanctum of *Ganapathi*. The healer brings back the broken coconut and shows it to the client to ensure the efficacy of the ritual. An evenly broken coconut with circular margins indicate a perfect offering and if the breakage of the coconut is uneven, then the ritual should be repeated. Almost every client received a sacred thread prepared with mantras and given with holy ashes from former worships. This thread was advised to be worn anywhere on the body and not to be removed once applied. Special talismans made on copper sheets were also prepared with mantras written on them and chanted and given to the clients. They had to insert those talismans into a copper, silver or gold tube made by a goldsmith and worn on their body as a protection. Yet another ritual advice was *uzhinju vakkal* -to offer a coconut to the goddess at the clients' home by turning it around the affected family member and to bring that to the *mana* on the subsequent visit.

Tarabout in his study on *mantravada* in South Kerala presents his interview with a non Brahmin astrologer and *mantravadi* belonging to the *Kaniyan* community who speaks about eight *karmas*. They are “immobilization (*Sthambhanam*), attraction (*akrasanam*), enchantment (*mohanam*), conquest, seduction (*vasikaranam*), demolition (*bhedanam*), expulsion (*uchatanam*), creating enmity (*vidweshanam*) and breaking (*oti*)” (Tarabout 2003: 235). The eight *karmas* above consist of more aggressive acts and the difference between the models of *mantravada* practiced in Kerala among different communities is clear from this. Tarabout in his section on Nambudiri Brahmins resonates the possible reason for this big difference “Popular opinion, among various castes, believes that the Brahmins know all the mantras, even the most cruel ones (*durmantram*), but they use only the good ones (*sanmantram*)” (Tarabout 2003: 237). This is true to Poonkutilmana, as they did their *pujas* only for protection and never for destruction.

Apart from the theoretical underpinnings discussed above there were a few spectacles in their ritual practice. The first one was the attendance of it by a majority of Muslim clients,

both men and women. In my field work period there was only one incident of a ritual proposed being refused. This was from the brother of a Muslim girl who accompanied her. Though both Smith and Tarabout who have visited this family say about the predominant Muslim clientele, they have not made extensive remarks on the ritual they perform. In the beginning of the ritual the healer asks about the birth star and almost half of the Muslim clients already knew their stars and mentioned their name. For those who did not, the healers had to adapt without it and ask for the name of the family where they live and proceed with the ritual. The most striking spectacle of this practice came when I heard the healers asking their clients to pray to *patachon* (literally God, but used as the synonym of *Allah* among the Muslims in Kerala). This was at the next step of the ritual when they ask the client to pray to the God, that their possibly multiple afflictions, whatever they are may leave them then and there, and ask to do the *uzhinjumattal*, turning around the brass plate around them. At this step, they asked their Muslim clients to pray to *patachon*. Towards the end of the ritual water from the conch shell is given to drink and ashes and rice are thrown on the clients to protect them, both were the distribution of ritual remains and the Muslim clients had no difficulty in accepting them. The healers in a personal talk once told me that they may have a problem to drink that during the time of Ramadan, but otherwise they accept it. The healers never asked the Muslim clients to make a visit to the temple inside their house and no one among the clients proposed doing so. When they distributed the protective threads with the holy ashes, the ashes were to be applied only on the joints for the Muslims whereas it was to be applied on the forehead also for their Hindu clients. Hence we see contemporary modifications in the practice of *mantravada* though the rituals remain the same.

4.2. Ayurveda - tradition and practice

The Ayurvedic theory of endogenous (*nija*) and exogenous (*aganthuka*) *unmada* (madness) is mentioned by Smith in his study of the medicalisation and treatment of possession in Ayurveda and *tantra* (Smith 2006: 552). The healers at Poonkutilmana are found not to bother much about this Ayurvedic theory of mental illness or possession. Their Ayurvedic practice is based on the traditional instruction at home and not based on any Sanskrit texts. This has been observed by Unnikrishnan who states that:

“Even though their approach is classical one can observe that there is a gradual dilution in the methodology of diagnosis and treatment compared to the classical Ayurvedic literature. This has taken place in due course of time. Thus the practice at present is fully based on the experience related to the practical realm” (Unnikrishnan1998:18).

While explaining the treatment modalities Unnikrisnnan points out “It is a combination of all the three modalities of treatments mentioned in Ayurveda, ie Daivavyapasraya (spiritual therapy), satvavajaya (psychological), yuktivyapasraya (rational therapy” (Unnikrsinanan1998:18). But as soon as he made this statement, he also put the disclaimer and say “Even though presently they don’t follow Ayurvedic classifications in the exactly same way one can observe that the treatment includes all three major classifications of Ayurvedic treatment.” (Unnikrishnan1998:19). Their non adherence to textuality in Ayurveda has been thus discussed by Unnikrishnan, though he attributes this to their extreme sense of practicality.

They had a sound inpatient system until 2003, the remnants like the ropes used to tie patients and the rooms where they were housed remain in the premises. The flourishing inpatient treatment was observed by Tarabout who says “Inmates number between 15 and 40 and their average stay is 15 days .A small minority of them are enchained...” (Tarabout1999:138). The enchainment holds the reason that it is the direct treatment given by the society and thus increases the pace of healing. The reason for stopping the inpatient section of this healing practice as told by the healers is the negligence of the family members of the ill people who leave them behind even after complete recovery. But the fact that it was closed down after the Ervadi tragedy which happened in August 2001 and the human rights stir following it suggest a human rights issue as well behind the stopping of enchainment and even the inpatient facility. But the inpatient treatment definitely involved a lot more of Ayurvedic treatments than what are happening today, which we could read from the accounts of Tarabout and Unnikrishnan. Tarabout states:

“Details of the treatments will of course vary according to the illness diagnosed. In its main lines it relies on: rest, Ayurvedic medicines to be absorbed internally, and applications of Ayurvedic decoctions on the fore head, oil baths for the head. Herbal preparations are made in the house itself, according to its own specific tradition. Their efficiency is nevertheless not only a question of components or of

recipe, but depends too on charging them with mantras and on pujas” (Tarabout1999:141).

Unnikrisnan also comments on the treatment methods and notes the internal use of ghee’s, purgations, pouring of decoctions on head and body and nasal drops. During my field work, I have seen only their treatments based on an outpatient basis and external applications of streams, nasal drops and purgation treatments have disappeared from their methodology. They have retained their tradition of homemade remedies charged with *mantras* and *pujas* as mentioned by Tarabout. The internal use of ghee and the oil baths for the head are also going on even in the outpatient mode.

I will add the case studies of Gopika, Thulaseedharan and Arya to look into their present mode of Ayurvedic treatments.

Gopika, a 31 year old Hindu woman came with her husband. She was looking restless though her husband managed to get her seated and waits for their call. Both of them looked different from most of the other clients gathered, with their dress and as well as with their well fed bodies. Her husband was working in the Middle East and she was living in Kerala with their two children. After their marriage, Gopika went with her husband to his work place and was also working in his own private firm. But she could not adjust with the life there and had to come back. She was living in the newly built house with the children and a servant and her husband visited the family almost once every six months which has become once every month because of the present situations. The main complaint of her husband was that she is afraid and she want him to come back leaving his business. She could not send the children to school because she is afraid something will happen to them. The healer asked her why she is not sending the children to school and Gopika said it happens only on some days when she is too tired. The healer asked about her treatment history and the husband told that she has been treated with modern medicines and by different doctors since almost ten years. She could not stick to any medicines and for the last six months she is not under the treatment of any doctor. Asking about sleep she said it is good with *manasamithravatakam* an Ayurveda tablet available in the market. Her husband complained she was resorting to self medication, especially with Ayurveda medicines. But on enquiry, Gopika revealed that she was taking the Ayurveda medicines on advice of the *panickar*, the astrologer. The other Ayurvedic products at home were bought for the children as she knew them from their advertisements in the media. The

husband again complained that even if she buys those medicines for the children, she is the one often taking them and added that she likes Ayurveda the best. The healer asked whether she hears some sounds in her ear. She said that she had a pain in her ears but no sounds. The healer then asked about back pain and she said she had it though it disappeared with the medicine from the doctor. The husband again complained that she could not manage the situation at home though she would like to do everything by herself and send back their house maid.

For the husband, Gopika was not taking care of their children though she loved them extremely. She was also having fears about them because of which she did not send them to school. Gopika told the healer that it was only due to her tiredness that she could not take care of the children and send them to school. The exchange between the healer and this family proceeded as follows:

Gopika: I am afraid whether the children get ill or something happen to them.

DN: You should not have unnecessary thoughts. We should be having necessary fears, but not unnecessary ones! Which oil does you use, Sesame oil or coconut oil?

Gopika: I am using warmed castor oil mixed with sesame oil.

Husband: She changes that often, not stable.

DN: How about her food?

Husband: She eats without problems. But if I am angry with her then she is twice as angry and behaves violently.

DN: So she loses control.

Husband: Yes, then she does not know what she is saying or doing.

DN: Do you feel tired often?

Gopika: Yes, It is on such days with excessive tiredness and pain in legs I hesitate to send children to school.

Husband: Then she call me and say the children have fever or other illness and don't send them to school, even if they want to go.

DN: Is she alone at home after they go to school?

Husband: There was a servant until a few months back, but then she think she alone should take care of children. She is over possessive. Even in my case, she is like that. She is not agreeing to have the servant, and she could not take care properly as well.

The healer asks them to wait for a while for the ritual to be performed. After the ritual he gives her the medicines and the advice was as follows:

DN: Tie this thread anywhere on your body. Apply the powder (*bhasmam*) inside the cover over your joints (*sandhukalil thottu permarumaruka*). Once you tie the thread, then don't untie it again. It is no problem if it is soaked in water when you take bath. In this cover there is one tablet (homemade pills). Won't you get good cow's milk there?

The husband is unsure whether they could get pure cow's milk where they live and report that they buy *cover pal* (milk available in a plastic cover in the market).

DN: Then you take the tablet in *jeeraka kashayam* (decoction of cumin seeds). For that you fry the cumin first and then pour water and boil it. You should not use *coverpal* for this. It is a mix of different milks. So take the tablet in good cow's milk if you get it, or otherwise in cumin decoction.

Gopika: It is pasteurised milk which is available in the market.

DN: Yes, but that will not have the right quality (*gunamundavilla*). So you take one tablet in one ounce of cow's milk or cumin decoction; empty stomach in the morning and after dinner at night. In this there is ghee. Take one teaspoon ghee after the lunch. Use this oil on the head and take your bath half an hour later. Are you taking bath in warm water?

Gopika: No, not in warm water.

DN: You could take bath in cold water (*pachavellam*). Do that two times, in the morning and in the evening. Apply this oil and you could use soap on the body and not on the head. Use this ghee (in the small bottle, homemade) when you have discomfort, when you have fear and such discomforts. Taste a few drops internally, smell them and smear them over the body (*lesam kazhikuka, vasanikuka, perumaruka*). Here I have written that you should do it twice daily. So definitely do that two times, and then do that if you have any discomforts. You can continue that medicine..., the medicine for thyroid which you are taking. I will write here the name of another powder which you should take. Do you have Diabetes?

Husband: She does not have any control in food. So cholesterol is very high.

DN: Is she also a borderline diabetic? Is she testing her blood samples?

Husband: Cholesterol is high.

DN: So you have not looked for sugar.

Husband: Sugar is not bad (*kuzhapamilla*), but a bit high.

DN: How much is that (*ethrayund*)?

Husband: 6.4 is her count now. What she need is 6.

DN: That numbers will be different, I think. Any how she should control her food. Have you looked at your blood pressure?

Gopika: No, I don't know. If I feel the pressure is high, I warm the *sarpath* and drink it.

DN: You should not do self medication. Take this powder. Buy 10 grams and divide it into 20 equal parts and keep them separately in small paper covers. When she is taking the tablets given from here in milk

in the morning before food and at night after food she should mix half of this small pack. Now this is enough, nothing else.

Husband: When should we come again?

DN: You can come after one month. You need not take the other medicines. Do you have weakness of hands and feet (*kayyum kalum kuzhachil*) and severe tiredness (*ksheenam*) ?

Gopika: Yes

DN: This powder will help you. Just take these medicines. You call me if there is necessity. Buy this powder from *Aryavaidyasala*. Don't buy this anywhere else. Come back on 18th or 20th of next month. How high is your cholesterol, is it over 200?

Husband: Yes, but it was one month back.

DN: It will get reduced, you could check later.

Then he turns to another patient who was waiting and starts talking to him. Devan Nambudiri insists again that Gopika should control her food, eat only vegetarian food and she should take only the medicines given by him and she should be responsible in taking care of her children and reminds them of the next appointment after a month.

The healer enquired about the oil used by the patient on her head when she was telling about her fear. Then he asked about her food and the feeling of tiredness she was complaining of mostly. In his advice, he specified for cow's milk as an adjuvant with the home made pills and not the pasteurized milk available in the market. He said that it is a mixture of several milks, lacks purity and hence could not have the desired qualities. If they could not have cow's milk which is pure, it is better to use the decoction of cumin seeds for the purpose. The home made ghee preparation was to be taken a spoon after lunch and the home made oil for the head. She was advised to take her shower in cold water. He was asking whether she had Diabetes, high levels of cholesterol and high blood pressure. He was also asking about the values of her medical tests. When she said that she takes warm *sarboth* (a natural soft drink) for the problem of high blood pressure, he strictly advised her against self medication and prescribed her a powder which could be bought

only from *Aryavaidyasala* an Ayurveda pharmacy. She needed only those medicines and self medication was strongly discouraged. He was also sure that her cholesterol levels also will be better with those medicines.

There are many patients like her who came to the *mana* knowing about their Ayurvedic treatments and medicines. But those medicines were never just given alone, nor are they manufactured commercially. The medicines were said to be prepared and empowered with *mantras* and given only to those who came to the *mana* and followed the personal advice of the healers. They always incorporated *mantras* and rituals with the medicines given, and seldom practiced them separately. The clients also accepted this as most of the members of the local community were used to this practice for long. Those who came without prior knowledge also accepted it as most of them believed those rituals will not cause any harm and could be helpful. These treatments and medicines had not just a medical authority, but rather a religious one.

We will discuss two more case studies to see the nature of the practice at the *mana*.

Thulaseedharan a fifty year old man came with his wife and son .He was a government servant and worked in the education department. His problem was a long term addiction to alcohol and a more recent liver disease. The main healer performed the ritual *uzhinjumattal*. Following advices were given to him by the main healer:

DN: You have to tie this thread. Take the ghee once a day. Take the tablet in cumin seed decoction two times. Take *keezharnelli* (*Phyllanthus Niruri*) with its root pasted, as much a goose berry early morning on empty stomach. Take the fermented medicine named *Sreekhandasavam* two times after food. Take the Capsule Perment one each two times, in the morning before food and evening after food. You have to reduce drinking alcohol. It will be difficult if the liver get damaged. It will go to strike only if there is no other means. It is an important factory in our body. What will we call our most beloved?

Thulaseedhaaran: We will call my dear friend.

DN: Is that the way one calls the most beloved?

Thulaseedharan : We will call *Karale* (my liver)!

DN: It is such an important organ. That will get damaged. So avoid drinking alcohol. Get inside and do your prayers.

The husband catches his wife's hand and goes inside the *mana* for the worship in the temple.

Here the man was given the medicines followed by the ritual. His prescriptions consisted of a herb (*Phyllanthus Niruri*) to be pasted and taken and consumed every morning apart from the home made remedies. Together with this he was advised to buy *sreekhandasavam*, a fermented medicine from an Ayurveda pharmacy. A new generation of Ayurveda capsule was also advised to him with the above and this was followed by the advice with popular views on the importance of the liver and the possible threat of it getting damaged. He was also advised to get into the *mana* and to make the worships for the family deities. He was accompanied in this worship by his wife.

Arya a twenty seven year old Hindu, Brahman woman came with her mother and her elder cousin brother in an auto rickshaw. It was almost mid day. She got down and was trembling and approached the *poomukham* with her hands held together in a worshipping gesture thinking it is a Hindu temple. She was loud and asking whether that is the temple of *meenkulathi bhagavathi* a local goddess. She immediately catch the attention of all assembled, all the three healers, the clients as well as the ethnographers. The senior healer was free and he asked her name and details in a serious way. She moved close to him still with her hands held together, she turned more quite and the other healers and clients are back to their business. She was under the treatment of a doctor for eight years and was taking medicines. She was married once but was divorced. She complained of difficulty to eat and pass urine. She had very little sleep and reported of an attempt to commit suicide. The healer carefully asked about her thirst, whether she is drinking water excessively. He asked about her food, bowel movements, history of illness with its onset, medications taken, her marriage and other familial situations. She was also carefully asked whether she had tremors, fever, chills, a blocked feeling in the throat, fire balls in the belly and turning of the head. She had some of the symptoms and denied some others.

She was given a thread to wear over her hand, and the ashes to put on the forehead. The home pade pill was advised to be taken in morning and evening with the juice of *brahmi*

(*Bacopa Monera*) and *bhumyamalaki* (*Phyllanthus Niruri*) as adjuvant. She was also prescribed drakshadi *kashayam* a decoction and *manasa mithram* gulika a tablet to be bought from a pharmacy. The oil for the head and ghee after lunch was advised and given. The special ghee in the small bottle had to be smelled, tasted and smeared over joints. Applying soap and shampoo over the head was contra indicated.

As the above case studies reveals the prescriptions at Poonkutilama is of a wide range, starting from a homemade and empowered preparation to the classical forms of medicines available in Ayurveda pharmacies and the new generation products such as capsules. They also had a wide range of adjuvants being used with the home made medicines. They had no difficulty in prescribing the home made and sanctified preparations together with capsules or juices of herbs. Another important fact is the mixing of medicines with rituals and religious worships. In all of the above cases, a ritual was performed before the medicines being given. And in every case, there was a sacred thread and ashes given together with the medicines. But they also made clear with many patients that devotion alone may not help and they have to take medicines regularly to get better. This `cocktail therapy` resembled a very interesting scene I have witnessed at the *mana*. The healers were doing their rituals half naked with the fire torch over the bowl with *guruti* which resembled or signified blood and exorcising a spirit, while a medical representative of a new generation Ayurveda pharmaceutical company clad in his western dress and leather bag was waiting for him. But there was no lack of coherence or difficulty in understanding for the healer or the medical representative in that act. As soon as the healer returned to his seat, the medical representative briefed him about the new capsules and tablets and explained him about the status of their availability. As both Tarabout and Smith has noted, their religious authority as high caste Brahmans and their long tradition and training at homes have given them the authenticity of charging their medicines with *mantras* and *pujas*. These medicines are still their mainline therapy. But they don't limit themselves to that and they engage in a dialogue with the new forms of Ayurveda medicines and use them without distinctions for the benefit of their clients. But still it is their religious and ritual authority rather than the medical one which enable them to do so.

4.3. Good words or Counseling

It was Damodaran Nambudiri, the *tantri* who said first about the 'good words' used by the healers at Poonkutil. With that he meant the words of re affirmation like 'nothing bad will happen to you' or 'don't worry'. During my field work I have heard several such good words spoken by the healers. This was for me a part of the methodology explained to me by the main healer on my first visit. He told me about the complete acceptance and empathy for the client and his suffering as the main feature of their treatment. He mentioned two examples which were interesting. One was the story of a Muslim man who stayed as an inpatient. He asked permission to make a pond in their premises and was granted that as a part of his treatments. He singlehandedly dug a pond which is still in use to take bath for the members of the family. His illness was said to be cured after digging the pond and he went back happily. The second story is that of a man who argued the word '*hridayam*' which is used in the Malayalam language for heart is wrong. He said it was '*rdayam*' as the syllable for '*r*' in Malayalam has a demonstrable visual similarity to the structure of the heart. This argument was also accepted by the healers and they appreciated him. Here we could recall what Unnikrishnan has gathered "The physicians here say that sneha (love), oushadha (medicine), paradevata (family diety), samuham (society) are the four essentials parallel to the Ayurvedic chatuspada (4 essentials of Ayurveda)" (Unnikrishnan1998:19). The *chatuspada* are four quadrants of Ayurvedic treatment absolutely necessary for its fruitful outcome. Here for the healers the love given to their patients and the society makes the half of their successful outcome while a quarter each depends on their deity and medicines. Thus the narration of complete acceptance and empathy to the clients may be springing up from their notion of 'love' for the patients. The charges the clients had to pay were never fixed and many were given medicines with basically very little money. There was often the question whether the client had enough money for the way back once they paid. They underlined their mobile telephone numbers when prescriptions were handed over and asked the clients to call them in the evenings if they had questions. Thus the healers always tried to keep personal warmth in their relationship with the clients.

The clients were also reminded often about the society by the healers. The usual question was 'what will people say if you behave like this?'. I have noticed that this question often brought the answer 'they will say I am mentally ill'. The healers then proceeded with the next step, 'is it good for you to make them say like that? So you should control yourself.'

This approach of the healers is a part of their practice as their objective is to bring the person back to a pre existing harmony from which they have departed. Tarabout has also noticed this and says that “The cooperation of the patient’s family and society is necessary since the ultimate aim is to bring back the patient to what he was before in order that he may experience again conjugal, familial and social harmony.”(Tarabout1999:139). I will present some of their good words before further discussions.

The interview with Jameela, the thirty four year old Muslim woman who was complaining of multiple possessions was given earlier in the section on possessions. She had her healing session with Sanal Kumar Nambudiri, the youngest among the healers. This woman was send away by her husband when he married another girl. She had three children and her children were with the husband. She wanted to go back even if she was unwell. The young healer had his good words with this extremely disappointed client. The excerpts from their exchanges were as follows:

Sanu: Don’t you want to get well and go and stay with your children?

Jameela: My illness should be cured, it should not recur. I feel like vomiting when I eat food. (She looks at the motorbike parked near the gate and asks) Will he push me down if I get on his motorcycle?

Sanu: You cannot even stand here, and then what will you do at your husband’s place? You could go there only after getting well, is it not? Could you complain with your people or the mosque committee in such a state? After getting well we could talk and get it resolved.

Jameela: He is calling me back. I have a fear if he will kill me.

Sanu: Such a thing will not happen. I will do *Uzhinjumattal* (the standard ritual) for you.

Jameela: Someone has conquered me and going to kill me.

Sanu: What will someone else say if one sees all this?

Jameela: They will say it is mental.

Sanu: Your sleep should not get reduced; I will advise what to do for that.

The healer first tried to remind her about her children and tries to give her an objective thereby stressing the need of the familial harmony. While she refers again to her skepticisms he advises her importance of the society and their role. He tells her that she should be well before making any legitimate claim of her conjugal role before the mosque committee. They are not going to take her seriously if she behaves like how she did. He tries to comfort her saying about the ritual and the protection it will provide her. But even after that when Jameela repeats her fear that someone may destroy her, the healer refers to the society again and say about her sleep and its importance. Here we see that Sanu first refers to the children and motivates her about the family. The advice which followed about the mosque committee and the possible strife for justice shows his skill of motivating the client with 'good words' as well as his thorough sense of the social and religious context of the client. His reference to the ritual which he will do for her was reasserting the possibility of a solution as well as his authority to sort out the reasons of her suffering. Here we see how the healer uses the local familial, social and religious conceptions of the client imaginatively to solve the chaos of her sufferings.

Seetha a forty year old Hindu woman was complaining that she had lost interest in her life. She was married and had two children, but had a lack of peace at home. One or the other member of the family was sick at any time and she feels better when she goes somewhere else. She also said about her several futile attempts to commit suicide and mentioned that she is alive only because of the strength of her predetermined life span. Devan Nambudiri comforted her by telling her to offer a coconut at home and turn it around every one and also the house and to bring that coconut to the *mana* when she comes next time. After suggesting the ritual therapy, he gives her the following advises:

DN : Why were you born? Was it not to live? When it is time, death will occur. You should have the mental courage to face the difficulties. Leave those other thoughts, did you hear? Mind has to be courageous. You need not have fear, it will get alright.

The healer is encouraging the woman to live on referring to the local notions which reflected in her own narrative that the time of death is predefined. Then he speaks about the mental courage and asks her to leave the thoughts regarding suicide. He finally

reconfirms that everything will be better for her after the ritual at the *mana*. Here he makes her bothered about the local cultural notions about death at the same time trying to advise her that she should gather the courage to face her difficulties. For that she should leave her vulnerable thoughts. The approach here is to impart a sense of reality as Tarabout comments on their methodology “The strategy of treatment follow logically. One should endeavor to bring back the patient to reality.”(Tarabout1999: 139). But the method used is multi faceted, evoking local notions of familial, social and religious harmony.

The annual special edition of a popular Malayalam health journal published in June 2009 had an article on Poonkutilmana. This article stated that their treatment method apart from medicines consists meditation, *mantarvada*, *tantra* as well as counseling (Sreekanth 2009: 90). The word counseling invariably raises a sense of Psychology with it. But the healers never claimed that they do counseling. Their methods also lacked the aspects of introspection or of elucidation which is characteristic to modern psychotherapy. As Tarabout opines “To sum up, as a main distinction from Western psychotherapy, the cure does not aim at becoming conscious of inner conflicts and tensions so as to elucidate them, but providing the patient serenity through his reintegration in his milieu, preserving all his previous beliefs.” (Tarabout1999: 139). The healers never went deep into the inner conflicts of their clients and analyzed them. But they were rather suggesting methods to re integrate them to a pre existing harmony. Kakar also finds that” This kind of introspection is simply not a feature of Indian culture and its literary traditions” (Kakar1982: 7). Apart from an introspective and an elucidative methodology, the one used by Poonkutilmana is based on their idea of familial, conjugal, social and religious harmony.

5. Conclusion

In his account of the folk healing sector, Helman argues that the majority of the healers “share the basic cultural values and world view, of the communities in which they live, including beliefs about the origin, significance and treatment of ill-health.” (Helman1994: 69). Though belonging to a high caste Nambudiri Brahman family, the healers in Poonkutimana could be seen having a thorough knowledge of the cultural values and social situations of their clients, even when the majority of them were Muslims. But this was not at the cost of their own values or world views as they considered the prayers and rituals to their family deity and the empowering of their medicines as the basis of their practice. They valued the religious beliefs of their Muslim clients and asked them to pray to *patachon* (Allah) as a part of the ritual. The importance which they have given to the society is also evident in their practice. The healers demonstrated their knowledge about the social structures and their interplay. In the case of Jameela, the Muslim woman who wished to go back to her husband and children, we saw that the healers tried to give her hope and motivation by mentioning the possibility of approaching the *Masjid* committee once she is healed. On the other hand, though they did not completely subscribe to the view of astrologers regarding multiple spirit possessions, they did not interfere with the faith of their clients and were always agreeable to conduct the rituals recommended by them. In a personal discussion, the main healer once joked about the creativity of the astrologers in inventing new spirit names but when he was asked whether they were existent beings or mental phenomena he concluded that they were existent for those who have a deep faith in them. Unnikrishnan points out that they consider three aspects in diagnosis and treatment, the relationship between the mind and the external world, the relationship between the mind and the body and the relationship between materials and mind (Unnikrishnan1998: 19). The importance of the society as a factor in healing at the *mana* is also mentioned by Unnikrishnan as he quote the healers saying “... the society distinguishes degrees of each illness with a local name which is very important. The society many a times attributes the cause to a specific event, which has to be clearly examined by the physician.” (Unnikrishnan1998:19). This argues again what Helaman says about folk healers reflecting the definition of health in non-western societies “as a balance between people and their social, natural and supernatural environments” (Helman1994:69).

Poonkutilmana is a popular practice mainly because of its sources of power. We have seen that the mythical Naranath Bhrantan is an archetype of a wise but mad man with which

someone like the sculptor may identify himself. This myth overlooks the caste segregation because of the notion of 12 castes being siblings of the same parents and hence gives a background to the progressive outlook and declared openness of the *mana*. But it is amazingly interesting to note the dualism involved in this myth. The father and mother of Naranath Bhrantan belonged to the most pure Brahman and extremely polluting Pariah castes, respectively. The mythical mad man is considered an extremely wise and powerful tantric but he was equally mad. What he was doing on a daily basis was rolling a huge stone uphill. After the huge effort of getting it to the top of the hill, he pushed the stone down again, laughing about it rolling. The narration of this myth is grounded on this opposing dualism. But the dialectics of this myth definitely provide one with a broader sense of meaning, above the dualism of wisdom and madness, purity and pollution, exertion and relaxation and most importantly fortune and misfortune.

The traditional construction of the *mana* and its resemblance to the Hindu temple in appearance and rituals evokes a sense of devotion in the clients. But it is not only a temple; it is a traditional household and a family home. The clients arriving there are also mostly families. Thus it provides a healing space between the two worlds of the sacred and the familiar, between the traditional and the modern. Their divine sources of power are the *Devi*, the Goddess and *Ganapathi* the elephant faced God. But at the same time one of the healers also mentioned a sub deity, the Goddess of blood *Rakteswari* residing in the central courtyard of the house, for which the vegetal sacrifice *guruti* is offered at the end of the day. This idea was denied by the main healer who said that *Devi* is the presiding deity in their healing and worship. Here also we see the opposing dualism of the protecting and calm Goddess *Devi* and the malevolent and violent deity *Rakteswari*. The worship of the former is with flower petals, rice and a lighted wick of thread, but for the latter it is with *guruti* the vegetal sacrifice with a liquid signifying blood. Both converge towards a meaningful common goal of healing. The tradition of this family is also another source of their healing power. The two important aspects revealed were life style and inheritance. Both of these aspects also contribute towards their healing abilities and popularity.

The multitude of afflictions and the management of it at the *mana* reflected what Helman mention as a holistic approach “dealing with all aspects of patients life, including their relationship with other people, with the natural environment and with super natural forces, as well as any physical or emotional symptoms” (Helaman1994:69). *Brahmaraksas* the affliction with the spirit of a dead Brahman, which is classically associated with the signs

such as worshipping (or hating) the Gods and Brahmans and the spontaneous induction to Sanskrit literature and chants, has a different presentation as an affliction. This affliction was found to be associated with lands and caused symptoms in the cattle and poultry before humans. The ambivalence of this affliction was also clear from the study. It was a protecting spirit for some, but an afflicting spirit for others. The reason for the latter was considered to be the transgression of moral codes of nature. Thus it fell both within the supernatural and the natural realms in Helman's holistic model. *Petiyl petuka* or getting trapped in fear belongs to the realms of the emotional as well as the supernatural as it has the dimension of a state of emotion as well as that of a process with an insidious sensory onset. *Sathru dosham* as it belonged to the social environment of the person with its background of sorcery also has the shadows of the supernatural. *Sthala virodham* or spatial incompatibility belonged to the natural and the supernatural whereas *ettukutal* or possessions belong more to the supernatural environment. The vulnerability related to pregnancy and child birth fell between the physical symptoms of child bearing as well as the supernatural environment. Though such classifications are possible, it is evident that their margins overlap. Such realms cannot be separated clearly in human experience, which is a composite whole of all such environments, social, natural, supernatural, physical and emotional.

The theories of illness in this practice were also more related to popular concepts and never explained in terms of the classical or textual sources of Ayurveda. Though Tarabout writes that they recognize the Ayurvedic classifications of mental illness (Tarabout1999:138), and Smith points towards the diagnosis of endogenous and exogenous madness in Ayurveda (Smith 2006: 552), in present day practice I could not come across any explanation for the client based on the theory of humoral imbalance in Ayurveda. As I have explained here their knowledge on the use of adjuvants was impeccable and had a deep practical sense. On the other hand, the home made medicines prepared at the *mana* were valued not only for their therapeutic properties, but were also charged with mantras and thus very important for healing. These medicines were distributed together with rituals, sacred threads and holy ashes. But all such sacred aspects of healing were juxtaposed with new age Ayurvedic capsules having exotic names such as *perment* or *my mind*. The healers were not seen distinguishing one of them from the other, but were found freely moving between these paradigms.

The free movement between the ritual aspects or *mantravada* and the medical aspects of their practice based on *Ayurveda* were also similar. They conducted consultations and ritual healing sessions for small groups of men and women intermittently without distinctions. The distribution of sacred ashes, protective threads and medicines was also juxtaposed and non-distinctive. Similar was the case with homemade medicines empowered with *mantras* and the new age capsules. Thus we see that the healers freely shift between ritual and the medicine, between the sacred and the secular and between the traditional and modern in a non-distinctive manner. They are found to hold the ambivalent roles of a *mantravadi* (*sorcerer*) and *vaidya* (Ayurvedic practitioner) consecutively. Though the non-distinction of the above realms could be interpreted as ambivalence, the healers and most of their clients were still coherent in their thoughts regarding the practices described above. As suggested by Beals and quoted by Travick Egnor "...as an Indian villager is used to contradiction and does not expect to get a consistent total picture of the universe, so he feels comfortable in the presence of mutually contradictory medical systems" (Travick Egnor 1983: 936).

Here we see that the healers in Poonkutilmana do *mantravada* the rituals for healing. The textual sources of this ritual practice could not be specified to a single source (Smith 2006:548). The present rituals also had secular modifications for Muslim clients. Thus it does not fit perfectly to a particular source or a traditional pattern, but is subscribed to by several clients. The healers never promoted the theory of sorcery or possession, as I have never seen them making such a diagnosis themselves. They even joked about the astrologer's creativity of finding new spirit names. But whenever there was a reference letter from an astrologer with a similar diagnosis, they never intervened and were agreeable to conduct the rituals. Similar is the case of their Ayurveda practice, which had a deep practical sense but was never explained theoretically. The textual sources of this practice were also not often referred to. The use of herbs and empowered home remedies together with new age patented Ayurveda capsules also strikes out as a break in context. Similarly they had a very good knowledge of the social situations and always had a deep empathy towards their clients. They had their `good words` which motivated the client and inspired healing. Though this has recently been projected as counseling, introspection and elucidation are lacking in their `good words`, and it does not fit to a psychological idiom. Thus I conclude that this practice, though subscribing to certain views of Ayurvedic theory, or ritual or astrological theory and stand in negotiation with modern theory, it is a

unique model which does not fit completely anywhere. More than that, the myths around signify that what one may see as an ambiguity could make sense in a broader perspective as we saw in the case of Naranath Bhrantan. This practice goes on with its popularity as there are the needs for such services. As suggested by Leslie: “Indians commonly assume that it is reasonable to consult different specialists for the same illness if it seems intractable. They expect different interpretations under these circumstances, and to pursue different remedies concurrently or in sequence.” (Leslie1992: 203). The presence of multiple afflictions and multiple therapeutic options in the same practice was the most important feature of Poonkutilmana. This provided the clients a wide range of possibilities for explaining and finding meaning for their `intractable problems`, thereby legitimizing their suffering, and to be exposed to the wide range of therapeutic options from the ritual to the capsule, in the same practice. This was further glorified by the backgrounds of myth and tradition. Thus it remains and represents a truly unique indigenous healing practice.

6. Bibliography

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7. Explanation of Specific Terms

Agantuka	External, exogenous, a category of illness in Ayurveda.
Agni	The God of fire, also one among the five primordial elements.
Akarshanam	A ritual act done by a mantravadi, literally attraction.
Annaprasana	Feeding rites, one among the sixteen traditional Hindu rites.
Astanga Hridayam	One among the three classical works in the Ayurvedic literature.
Avahana	A ritual, literally to attract.
Avanippalaka	A wooden seat used in rituals, resembling a tortoise.
Beeja	The sperm.
Beeja mantra	The basic phonetic representation of any element.
Bhagavathi	The mother goddess.
Bhrantan	The mad man (in Malayalam language).
Bhedanam	A ritual act performed by a mantravadi, literally breaking.
Bhrishtu	A social system of out casting, among Nambudiris in Kerala.
Brahmaraksas	the spirit of a dead Brahman, an afflicting spirit.
Chathirangam	A traditional performance tradition among the Nambudiri Brahmins of Kerala.
Chatuspadam	The four essential quadrants of Ayurvedic treatment.
Chetta	The Goddess of misfortune, considered as Jyeshtha, the elder sister of Lakshmi, the Goddess of wealth.
Chekkutti pappu	A Muslim spirit said to be malevolent.
Chikitsa	Ayurvedic treatment.
Daiva vyapasraya	An approach of treatment in Ayurveda, often translated as spiritual therapy.

Devi	The mother goddess, usually Durga.
Drishti dosham	Evil eye.
Durita	Difficulties, here due to a divine or supernatural cause.
Durmantram	Bad or dangerous use of mantras.
Filaria	The elephant foot disease caused by the filarial parasite.
Ganam	Group, here a group of deities.
Ganapathi	The elephant headed god, destroyer of obstacles, often called Ganesa.
Graham	An afflicting spirit or influence mentioned in classical Ayurveda and tantric literature.
Guruti	A red colored liquid prepared by mixing slaked lime and turmeric, resembling blood, a vegetal sacrifice performed to deities in Kerala.
Hridayam	Heart (in Malayalam).
Jinn	A Muslim spirit.
Jyotisha	The tradition of astrology in India.
Kaivisham	Literally hand poison, but refers to sorcery and being fed a ritually charged substance.
Kaniyan	A member of a Hindu community traditionally engaged in astrology and Ayurveda.
Karal	Liver (in Malayalam).
Kariasthan	The care taker of a traditional households.
Karma	An act, here a ritual.
Karimkutty	A malevolent spirit, dark in appearance.
Kharshanam	An act of a mantravadi, literally confrontation.

Kundalini	The tantric and yogic concept of sakti or power , envisioned as a spiral serpent resting at the base of the spinal column.
Kundalini prabodhanam	Awaking the power of kundalini by tantric or yogic practice.
Kuttichathan	A mischievous imp, also worshipped in north Kerala.
Malabar	A district in the former Madras presidency during the British Empire, consists of the northern districts of Kerala
Mana	A traditional Nambudiri house in Malabar, north Kerala.
Manasikam	Regarding the mind .
Manasika rogam	Mental illness.
Mandapam	The covered extension, in a temple or in a traditional house often serving a ritual purpose.
Mantra	Ritual chants invoking Gods or deities.
Mantravada	Literally the use of mantras, but here refers to ritual healing, often translated as sorcery, magic or witchcraft.
Maranam	A ritual act of a mantravadi, literally killing.
Marunnum mantravum	An Idiom in Malayalam language, Literally, medicine and ritual chants, but the idiom strongly stress their conjoint use.
Masjid	The Muslim worship place, mosque.
Mohanam	A ritual act performed by a mantravadi, literally attraction.
Murty	A deity.
Muttarukkal	A ritual in which a coconut is broken, to remove obstacles.
Nalukettu	A traditional style of construction with four interconnected buildings around a central courtyard.
Nambudiri	Member of a Kerala Brahman community.
Nija	Fixed, endogenous, a category of illnesses in Ayurveda.

Onam	The important local festival in Kerala.
Oti	A ritual act of a mantravadi, literally to break.
Otimurthy	A malevolent spirit .
Oushadham	Ayurvedic medicines.
Panickar	A member of the Hindu community traditionally engaged in astrology.
Papadam	A fried crispy food taken with rice.
Paradevatha	Family deity.
Parambu	A piece of land in north Kerala.
Parayi petta Panthirukulam	A myth in Kerala , referring to the 12 castes born to the low caste Pariah woman and the learned Brahman scholar Vararuchi.
Patachon	The word in Malayalam for Allah, literally the creator.
Peti	Fear
Petiyil petuka	To get trapped in fear, an affliction.
Poonkala	A locally known name of Poonkutilmana.
Poomukham	Literally the flowery face, but the visitors place in front of traditional Kerala houses.
Prakriti	Nature, also the basic unmanifested in sankhya school of philosophy.
Puja	The ritual worship, in a temple or at home offered mostly by a Brahman.
Rakshas	A short form to refer Brahmarakshas.
Raktewsari	Literally the Goddess of blood, a sub deity.
Sabarimala	A popular pilgrimage centre ,the temple of God Ayyappa on the hills, in Kerala.

Sadhana	A spiritual or ritual practice to accomplish some specific objectives.
Saivam	Related to the God Siva.
Sanmantra	The good use of mantras.
Satwik	Refers to the ascetic or pure way of life, having a predominance of Satwa, the bright and pure aspect of the trigunas.
Satwaavachaya	Winning the mind, an approach of Ayurvedic therapy.
Sakteyam	Related to sakti, the Goddess.
Sakti	The divine power, the goddess.
Samuham	Society.
Shanti	Peace, but here an act of a mantravadi to calm an illness.
Sarpam	A serpent often mentioned as the snake God.
Sathru dosam	The wrong doings or the wrath of an enemy, indicates to sorcery.
Sneham	Love, here empathy towards the patients.
Snehapanam	Drinking oil, a way of unction.
Sthala virodham	Spatial incompatibility.
Stambhanam	An act of a mantravadi, literally freezing.
Thala minnal	A flash inside the head.
Thali	A flake of gold, traditionally worn as the locket of wedding knot in Hindu marriages in Kerala
Tantra	A stream of traditional knowledge in India.
Tantri	A man engaged in tantra, but in Kerala refers to the Brahmans who are traditionally engaged in temple rituals.
Unmada	A category of illness in Ayurveda, often translated as madness.
Upadevata	A sub deity.

Uchatanam	A ritual act by a mantravadi, literally to remove.
Uzhinjumattal	Literally to remove afflicting spirits and influences by turning around an anthropomorphic object , the standard ritual at the mana.
uzhinju vakkal	To offer a coconut to the goddess at the clients' home
Vaidya	A traditional Ayurvedic practitioner.
Vaishnavam	Related to the God Vishnu.
Vasyam	A ritual performed by a mantravadi, literally attraction or seduction.
Vidweshanam	A ritual act of a mantravadi, literally creating enmity.
Virecana	Purgation, one among the purifications in Ayurveda.
Viswasam	A deep faith.
Yuktivyapasraya	An approach of treatment in Ayurveda, based on logic.