

## RESEARCH NOTE

### BUDDHIST HEALERS IN NEPAL SOME OBSERVATIONS

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A facet of Buddhism which is quite pronounced in Nepal amongst all Buddhists, both Tibetan and non-Tibetan, is that of healing, an art Gautama Buddha himself originally propagated for the welfare of his monks and lay followers alike. A famous medieval Indian physician, Jivaka, who was an Ayurvedic practitioner, was also the Buddha's follower and he was therefore accustomed to treating monks for free. This gave even his lay followers, as historians have recorded, an incentive to become monks since Jivaka was known far and wide for his phenomenal healing abilities. Following his precedent the later form of Buddhism, that of Vajrayana (a branch of Mahayana Buddhism which became widespread in Nepal and Tibet) spawned its own system of ceremonial healing deriving inspiration from the cult of the 'Healing Buddha' which became widespread in Mahayana Buddhist countries. On Tibetan tankas the Healing Buddha is depicted as blue in colour, bearing herbs which he uses to heal. Following this precedent, the Newar Buddhist priests and Tibetan lamas practice healing even today using mainly tantric methods, those of mantra, meditation and mudra (the latter, gestures evocative of deities). Ayurveda is an integral part of the Vajrayanic healing tradition. The healing system of Ayurveda based on herbs and non-organic substances became highly developed in Tibet and was soon known as Tibetan medicine rather than Ayurveda in that country and abroad. Its ceremonial or tantric component with time had become divorced from its pharmacological to a great extent. Thus, one finds today in Nepal Tibetan practitioners who specialise only on ceremonial healing and others called Amchis, who are practitioners of Tibetan medicine.

Still another kind of Buddhist healer is the Tibetan shaman called Lhapa (or Pa-wo) in the case of males and Lhamo in that of females found amongst the Tibetan community in exile predominantly in Pokhara, and to a lesser extent, in Kathmandu. This may be linked with the fact that

shamans are more prevalent amongst the less prosperous of the two communities since in Pokhara there is a smaller minority of wealthy Tibetans as compared to Kathmandu. Thus, it would appear that the shamans have more clients amongst the poorer people than amongst the rich and in fact, the only shaman who is prominent in Kathmandu is a female, Lhamo Dolkar, living in Boudha near the famous stupa. Even members of the Nepalese royal family are said to periodically consult this female medium for an important Tibetan Buddhist deity devoted to prophesy and healing, the Dorje Yudronma orace. The Tibetan shamans thus may be seen to have patients from all walks of life and nationalities, Tibetan and non-Tibetan alike, and Lhamo in particular, is often visited by foreigners either out of curiosity or as patients themselves. In Pokhara, with the exception of one older man by the name of Wangchuk, however, they seem less adept at the art than Lhamo since they are able to register considerably fewer successes in healing.

Both Wangchuk and Lhamo Dolkar are reputed to be able to cure both physical and complex psychosomatic or supernaturally-caused complaints. Their main healing technique is sucking, for which reason especially Lhamo is simply called the 'sucking person' by Tibetans. Lhamo, who is in trance, possessed by the goddess Dorje Yudronma when she heals, sucks any afflicted part of the body and has been known to bite a patient savagely, extracting in the process either a dark liquid or a dark, sticky substance. Both are considered physical manifestations of impurity and in the event of a more serious affliction, she may even extract stones, which are either white, brown or black. Particularly in the case of alcohol or drug addicts, she often berates the patient and displays the fierce side of the goddess' persona, especially since she must counter an equally socially and personally disruptive force in the form of the addiction. For this reason, her patients tend to tolerate her thumping and hitting them, either with her hands or with some implement like a phurba, a ritual dagger, though she never actually draws blood in the process. In case the symptoms are caused due to the harassment by a spirit or witch, she may prescribe a fire puja performed in her own house once a week, which, though somewhat costly, is thought to exorcise the afflicting agent.

The male shamans, the Lhapas, on the other hand, do not ordinarily suck the skin directly, but either keep a cloth between their mouths and the patient's body or employ horns or pipes to extract similar substances, though not in the huge quantities that Lhamo does. Wangchuk, as ostensibly the more empowered of these male shamans, almost always extracts some impure item from the patients' bodies and has registered considerable success in the extraction of kidney and gall bladder stones.

However, there seems to be a 'crisis of belief' in the Tibetan community in particular since many, especially westernised Tibetans, profess disbelief in this system of healing as they evidently prefer not to be associated with 'backward' segments of their own community. Interestingly enough, though, the Rinpoche or reincarnate lama at Hyanja Refugee camp just outside of Pokhara where Wangchuck resides, indicated that he himself has witnessed Wangchuk's skill at removing coins stuck in the throat of the young monks, using only tantric techniques.

The oldest Buddhist community in Nepal is arguably that of the Newars originally centred in the Kathmandu Valley, whose artistry and craftsmanship have accounted for most of the Valley's strikingly original culture. Though Newars are divided between Hindus and Buddhists, there is, however, no trace of antagonism between the two religions and even many instances of syncretism without either tradition, however, losing its distinctiveness. The Newars adopted Vajrayana Buddhism, a branch of Mahayana also practiced by Tibetans, which is highly esoteric and complex, and has also spawned a healing system. Interestingly enough, many scholars believe, following Sylvain Levy's lead, that the form of Buddhism practiced by the Newars may be evocative of that having existed in India prior to the Moghul invasions. If this is indeed the case, then it is possible to summarise that the form of ceremonial curing practiced by the Newar Buddhist priests corresponds to that which once existed in medieval India as well. In any event, in Nepal, one of its main characteristics is its secretive, tantric nature, and the fact that it espouses tantric rituals whose practice is restricted to the highest castes of the Newar Buddhist caste hierarchy. Tibetan Vajrayana Buddhism, in contrast, does not limit these practices to any particular social category.

Thus it should not come as a surprise that Newar Buddhist healers, who are simultaneously priests, should mostly hail from the highest Buddhist Newar caste of Vajracharya, though some are also members of the related, slightly lower caste of Shakyas. This category of healer is not a shaman in that they do not get possessed for the duration of healing, but can rather be thought of as 'permanently possessed' in the same way a Rinpoche is, by a spiritually advanced spirit or soul which voluntarily has incarnated itself in a human being. Therefore, as long as they maintain their priestly decorum, adhere to certain precepts like the recitation of healing and other tantric mantras, get empowerments through rituals dedicated to the Buddha and tantric deities (mostly goddesses, considered both perpetrators of and protectors from illness), they are thought able to cure any affliction, ranging from the spiritual to the mental and physical. These healers are simultaneously Ayurvedic physicians and astrologers, which is practical

from a patient's point of view since in that case they do not need to go to these other specialists, too. This particular combination of specialisations appears rational as disease causation is thought to derive as much from a phenomenon called graha dosa or conflicting planetary constellations, as it is from other sources, and Ayurvedic preparations often figure as part of the cure. So, for instance, rather than being asked to consult an astrologer, the astrological diagnosis and even the appropriate remedy is being performed by the same specialist. The process of healing has been designated as involving transsubstantiation, the sacralisation of base matter acting to facilitate healing. This process is based on a holistic approach to the human organism, in which the psyche and/or spirit is not considered divorced or separate from the physical body by any means, so that the main focal point of the healing enterprise is the realignment of disparate components, using the astrological paradigm, i.e., the realignment of planets.

The substance par excellence through which this process of transsubstantiation is thought to transpire is known as jal, or holy water, which itself has been so empowered through the healer-cum-priests' mantras which he blows on it to transform the ordinary water into the healing ambrosia. People believe that this jal, which is sprinkled on the patient and imbibed by the latter, acts as a general panacea, so that in the event that it fails to cure a specific affliction, it can at least, it is thought, propel them to a higher spiritual plane, if not a higher rebirth. Besides the ambrosia, the healer known as gubhaju or guruju (a term of respect for a priest), relies on a wide repertoire of healing substances and instruments. Ash, often taken from the cremation ground, may be given to propitiate the masan bhut or ghost from the cremation ground, thought of as pestering a patient. The main implements relied upon are the vajra or dorjee, the salient symbol of Vajrayana Buddhism normally used in religious rituals, but in this case, placed on a patient's head or swung around the latter. It is often coupled with the ghanta or bell, the female complement of the male vajra, evocative of the tantric belief in the importance of the male and female principles in effecting a realignment of the disparate parts of the psyche.

It is significant that, despite the sophistication of this form of healing employing the ritual implements of Vajrayana, nevertheless, the main technique relied upon actually derives from Nepalese hill shamanism. Known as jhar-phuk, sweeping and blowing', this technique employs a common reed broom or kuco, occasionally embellished with a peacock feather, to sweep away the negative forces and the healer's breath to blow on auspicious ones in the form of mantras. It is particularly the usage of the broom which is thought to derive from hill shamanism, for which reason, some high caste Newar healers refuse to employ it. Instead, they may

substitute a refined form of sucking, in which the air around the patient is inhaled and mantras are blown out or exhaled, resulting in a mild form of hyperventilation. The skin, though, is never directly touched by the healer and indeed, the patient may even be unaware of what exactly the healer is up to. There is also a propensity amongst Newar ceremonial healers to incorporate some allopathic methods of diagnosis and treatment, possibly to supplement the Ayurvedic ones employed, especially since Baidyas, or Ayurvedic practitioners today occasionally do the same. However, Tibetan Vajrayanic healers, for their part, eschew any such modern innovations, especially since their system is more monolithic and closed, as compared to that of the Newars who have, as indicated, been more open to integrating aspects of Hinduism in their social and religious system.

A fairly new category of Nepalese healer which rather appears to be growing in numbers, instead of diminishing (whereas the gubhaju-healer often belongs to an older generation, whose sons are reluctant to practice healing) and spans both the Hindu and Buddhist communities is that of the female medium for the goddess of healing, the Hariti. Though this vocation is open to anyone, both male and female, most are however, Newars and female, probably because their tutelage or patron deity, the Hariti, is also female and originated in a Newar milieu since her shrine is located up on Swayambhu Stupa. This deity has an interesting history since she was originally thought to be a Yaksha, a demon wont to devour children, until the populace appealed to the Buddha for help. He cleverly hid her youngest child under his begging bowl and when the Yaksha came wailing to him about the loss of her child, he admonished her saying, "You have caused so much untold suffering to other mothers, so you should receive some of the same suffering yourself." When she duly repented her misdeeds, the Buddha revealed her child to her and she thereupon fell at his feet and asked to be accepted as his devotee. The Buddha then promoted her to the rank of goddess, the Hariti, 'she who saves', and she became the protector of particularly children from disease. Therefore, it is perhaps not surprising that the Hariti has become the patron deity for mainly female healers in the Kathmandu valley. The Newar Buddhist male healers, for their part, often acknowledge the Kumari, or 'living goddess', as their patron deity and one can often find a colour poster of the present of Ice holder, a young girl, displayed in their healing rooms, or a mask of the Kumari as goddess.

This kind of female medium for the Hariti (or in this age, one of her children who aids her in curing), similarly to the Tibetan Lhamo, is only possessed for the duration of the healing session. The fact that she is, however, considered the actual embodiment of the deity during this period accounts for the fact that many people repose greater faith in her healing

abilities than they do in those of the gurus, especially since they feel that it is the goddess who is healing them directly. This is relevant particularly for cases of supernaturally caused afflictions, whereas the priestly healers are considered better at curing problems caused, for example, by the misalignment of planets or graha dosa. The female medium called deo-ma in Newari, the goddess-mother, has a limited repertoire of healing techniques centring mostly around jal, used liberally, and jhar-phljk. Some of them, however, especially those trained by a guru also resort to the usage of the vajra. The deo-ma has probably become the most popular spiritual or tantric healer in Nepal today and possibly the most prominent deo-ma in the Valley is a high caste (Shakya) Newar Buddhist woman residing on Swayambhu Stupa, just in the vicinity of the Hariti shrine. She has been known to heal very grievous cases, in some instances even cancer patients, and has performed other miraculous healing feats of chiefly supernaturally caused afflictions which propelled her from 'rags to riches' in only a decade of healing. She has a following of numerous personal devotees, male and female, and one family has recently donated a large plot of land on the outskirts of Kathmandu, which the healer wishes to use to build an ashram. Evidently she has acquired somewhat of a cult following and treats all kinds of people, high and low class alike, offering patients coming from long distances who can not afford it otherwise, accommodation and food without charge. This, coupled with her propensity to undertake pilgrimages to both Hindu and Buddhist holy places and conduct pujas and prayer sessions there which all her devotees can participate in and reap the spiritual benefits of, undoubtedly serves to strengthen her healing shakti', or charisma.

Others practicing some form of Buddhist healing in Nepal predominantly include those ethnic groups practicing Tibetan Buddhism, the Thakali, Tamang, Sherpa and Yolmo, for example. Members of these groups, if they are lamas, practice Vajrayanic ceremonial healing as has been referred to, or shamanism with Buddhist overtones. However, in the latter case, it is not possible to state categorically that this is an instance of purely Buddhist healing. In fact, as researchers have shown, this form of healing may be grounded more in tribal or preliterate Hinduism than in Buddhism per se. Alternatively, as in the case of Yolmo shamanic healers, the admixture is also with Bon-po, the pre-Buddhist faith existing in Tibet prior to the advent of Buddhism.

In the area of healing, though, it must be averred that considerations of pragmatism often override those of the religion or culture per se. An individual healer may, in this connection, borrow the techniques from a healing tradition which is not, strictly speaking, his or her own. For example, in my own research, I came across a healer whose caste

background was that of Vajracharya, who had adopted a shamanic/Bon-po method of curing transmitted to him by a Tibetan lama. Similarly, there are some instances of both Vajracharya and Shakya males and females, who practice a form of healing which derives from Theravada Buddhism, possibly in consequence of the influence exerted by Newari Bhikshus, Theravada Buddhist monks, in the course of their missionary activities in Nepal. A very famous healer was, for example, Yog Ratna Vajracharya, who was a Theravada practitioner and cured through what he called 'Yog Siddhi', a tantric healing technique derived through meditation and austerities. Prominent amongst his followers were quite a few women who became known as powerful healers and employed this technique which consisted of concentrating one's mind and spiritually 'absorbing' the afflictions of others which the practitioner then neutralised through 'Yog Siddhi' themselves. It is interesting that, similarly to the Buddha himself who admonished his monks for using healing on a larger scale, especially as a form of gainful employment, with time, Yog Ratna also restricted his healing practice to only his close followers. This was despite the fact that he had become a well reputed healer who was often invited to the palace by the then Rana rulers and was known for miraculous healing feats which included the cure of the blind. In conclusion it seems fair to postulate that it is quite possible that in having espoused a different healing tradition to the one in which he was born, Yog Ratna derived more genuine healing charisma than he would otherwise have been able to. Thus in regard to healing, it is safe to summarise that 'occasionally the sky is the limit' and people will tend to practice whatever they personally feel inclined towards and what they feel is working for them and, by extension, for their patients, in preference to clinging to their own tradition.

On the patients' side, it would appear that the system of Buddhist healing tends to reinforce people's faith in religion. If it is possible to see tangible benefits from the religion in the form of being healed, it will obviously tend to strengthen people's faith in the Buddhist religion at the same time. Therefore, even though certain healing techniques may be controversial in some people's opinion, especially the more tantric ones involving exorcisms of supposed spirits, deities or witches thought to be possessing or pestering someone, the overall result has generally been found to be positive. Especially in this day and age in which the western, allopathic medical system has been found to be inadequate, particularly in the area of psychosomatic illness, other forms of healing may be able to supplement the conventional healing system. If these healing systems are, at the same time, grounded in a spiritual tradition like Buddhism, their success rate is seen to be significantly increased since the element of faith increases the

possibility of cure through a non-medical healing system. This can only be beneficial, especially for someone who has been suffering from non-allopathically treatable afflictions which are growing in modern times due to the increase in pollution, environmental degradation, the worsening of living conditions for the majority of the population, over-exploitation of natural resources and other ills afflicting modern man. Thus, the Buddha's adage that Buddhism is simultaneously a healing, plus a spiritual system, is being proven time and again.