

Faith Healers in Nepal

* Nirakar Man Shrestha

Both the positive and negative aspects of faith healing in Nepal have been highlighted in this paper. An emphasis has been made for a need to mobilize faith healers and the ways of doing this have also been discussed.

INTRODUCTION

Faith healing is the oldest kind of health care not only in our country but all over the world. Whether it is acute pain in abdomen, headache, vomiting, diarrhoea, depression, phobia, abnormal behaviour, prolonged labour or fits, the first therapist to be consulted is the faith healer in many cases. This holds true for vast majority of people in our country irrespective of age, sex, culture, education and socio-economic status.

Faith healers are known by different names in different parts of our country. Some of the common names are: 'Dhami', 'Jhankri', 'Guvaju', 'Ojha', 'Lama', 'Baidangi', 'Phedamba', 'Guruwa', 'Janne', 'Phukne', 'Jharne', 'Herne', etc. All of them, though using different materials and methods, have the common principle of healing sick people through prayer and the power of religious faith. In fact, Collins Dictionary¹ defines 'faith healing' as 'the treatment of sick person by someone who believes they are able to heal people through prayer and the power of religious faith'.

Why do people believe in Faith Healing?

People believe in faith healing for a

number of reasons: Firstly, faith healers are available to them almost all the time and in every nook and corner of the country.

Secondly, they are not expensive and accept their remuneration in cash or in kinds or in both, depending upon the convenience of their clients.

Thirdly, they belong to the same community and thus, share similar beliefs, customs, language and feelings as that of their patients. They therefore, have a very good rapport with their clients which is one of the essential components of successful therapy.

Fourthly, direct side effects of this form of therapy are not there, except on rare occasions.

Fifthly, people believe that in many a cases they are therapeutic and in some cases they help other forms of therapy by driving away the evil spirits or evil eyes that are believed to interfere in the healing process. Some of the patients admitted in the hospital, are taken away to faith healers if the improvement is slow or if the condition of the patient remains status quo or deteriorates. They believe that in spite of good doctors and

* MBBS, MD. Senior Consultant Psychiatrist, Mental Hospital, Lagankhel, Lalitpur, Nepal.

good medicines, patient's condition remains unsatisfactory because of wrath of God or of evil spirits and that once the God is pleased or the evil spirits are driven away, medicines become effective and the patient gets better. At times, patients are even sent on leave for few hours if the doctor thinks that at least patient and patient's party would get psychological satisfaction by undergoing faith healing therapy and then continue with medical treatment.

Sixthly and most importantly, faith healers have gained widespread confidence of the people in our country. This is because of many factors. But most important is that many patients they handle get better or get cured in due course of time as many illnesses whether we treat or not and irrespective of form of therapy, get cured on their own. Natural healing processes of our body can take care of most of the illnesses that are commonly seen in the community. Moreover, the positive outlook and confidence which faith healers instill in their patient's mind boost up this natural healing process to a great extent.²

Why Faith Healers need to be mobilized ?

Faith healers need to be mobilized and integrated into the general health care system of the country for a number of reasons. Firstly, as mentioned above, they usually have very good rapport with the people and have gained their confidence. This harmonious relationship between these healers and the community could be exploited in many ways for the provision of basic health care to the community. For example, faith healers could play a very good role in the expanded programme of immunization, family planning, maternal and child health activities, nutrition programme, antidiarrhoeal campaign, antiepileptic campaign and other similar activities.

Secondly, since they are the first therapist to be consulted in majority of cases, they play a crucial role in treatment influencing the morbidity and mortality of their patients. Many disabilities and deaths could be prevented if patients have had proper

treatment and proper counselling at the right time, usually in initial stage of the disease. This becomes possible only when faith healers possess some basic knowledge of community medicine.

Thirdly, mobilization of faith healers helps us in the care of patients in their natural settings as this would enormously increase the number of easily available first line manpower. This not only saves the health of the patient but also saves the time, money and many other physical, mental, and social hardships that the patients and his family members face in the absence of such basic health care facilities.

Fourthly, this would increase the understanding, co-operation and mutual trust between the faith healers and the modern healers and, thus, they would be helping and complementing each other instead of criticizing and antagonizing as sometimes is the situation now.

Fifthly, this would help faith healers in knowing their limits as to where they can't do anything further or which type of cases they should refer for the better management. For example, it is quite satisfying to see that many faith healers have already started oral rehydration therapy for diarrhoeal cases in our country. They even refer severely dehydrated cases for parenteral therapy. This is all because of widespread health education campaign against diarrhoea through radio, television, and other mass media in the country.

Sixthly, and most importantly, this would give more satisfaction to the patient and his family members in the sense that they are receiving both forms of therapy at the same time which they believe would have additive or even synergistic effects.

Do Faith Healers actively participate in such program ?

In my opinion, they would certainly come forward and participate in such integrated programme provided they understand the motto and do not feel that their business is being threatened. For this, firstly we

should be able to show them that their system of therapy has both positive and negative sides. Secondly, we should be able to assure them that, on one hand, our efforts would help them to minimize negative sides of their therapy and, on the other hand, positive sides of their therapy would be further enhanced and they would be provided with further armamentarium at their disposal. Thirdly, we should be able to convince them that we will have a joint and co-ordinated approach on the basis of integrated basic health care of the community. Fourthly, we should be able to make them feel that they are not only responsible but also indispensable partners in the delivery of health care system of the country.

Only a few, if at all, would oppose this idea after having made these points clear to them. In fact, we have already been seeing some clever faith healers using allopathic medicines in the care of their patients. Of course, most of the time, they do not reveal the truth to their patients. They simply ask them to take those things meant for appeasing particular God or Goddess or to drive away some evil spirits. Patients also do not care to know the nature and quietly consume them with the belief that those things have been given to them after being subjected to some rituals. Faith healers would be in a better

position to help in primary health care of the community after having had some basic training in this field.

It is a paradox that inspite of all the above facts, most of the faith healers live a hand-to-mouth existence in our society and have generally a dubious status. On the other hand, persons practising modern medicine are comparatively better-off and are held in high esteem. Therefore, besides financial help, this approach would also help faith healers in boosting up their morale and confidence.

CONCLUSION

I don't mean to say that our society should be pushed more and more towards faith healing. What I want to stress on is that since faith healing is a very common form of therapy in our society and, in fact, many a times the only form, faith healers need to be approached and convinced about both the positive and negative aspects of their therapy. After doing this, they need to be trained mainly in the field of primary prevention and to some extent for secondary and tertiary prevention as well so that they could be used to a maximum not only for the benefit of the society but also for the benefit of themselves and that of the medical community.

REFERENCES

1. 'Collins Cobuild English Language Book Dictionary', 1st ed 1987, Collins, London and Glasgow, p 510.
2. Rogers MP, Dubey D and Reich P (1979) 'The Influence of the Psyche and the Brain on Immunity and disease susceptibility'. In Kastenbaum RJ, Barber T, Wilson SG, Ryder RL and Hathaway LB (eds) *Old, Sick, and Helpless*, 1st ed 1981, Ballinger Publishing Company, Cambridge, Massachusetts, p 14.