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Health Care and Popular Medicine: The Case of the Tai Khamyangs of Assam, India

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Abstract

Health care is intrinsic to the well-being of the people. Diseases and ailments are a universal features of human society and in every society, there are ways to get relief from the same. In traditional society, people mostly depends on natural resources like wild roots, herbs, plants, animal parts to recover from ill health. They have developed an indigenous way of healing to protect their health against various kinds of diseases. This indigenous medicare system or popular medicine/ethnomedicine is prevalent in one form or other in traditional societies in cross-cultural perspective. However, with the establishment of modern Medicare provisions within the rural tribal areas, they avail the benefits of the same along with sticking to their pristine medicare system. In this present endeavor, an attempt has been made to examine the continuity and change of the Health care practices of the Tai Khamyangs, one of the Tai Mongoloid ethnic groups of Upper Assam, India.

Keywords: Health; Hygiene; Tai Khamyang; Magico-religious practices; Popular medicine

Introduction

Health is one of the urgent necessities of human being both in indigenous and modern societies where there are multifarious ways to overcome the disorder of the body or ill health. Unlike modern societies, the people of indigenous societies have their own ways of healing with a parochial medicare system with which the society is integrally interwoven. In indigenous societies, a person is considered healthy when he is not affected by any disease, consumes food normally and carries out his routine functions without any difficulties. There are two components in the concept of health of the people which are present almost universally. First, the individual maybe committing or omitting certain acts which may bring upon the individual or the household some affliction and, secondly, the belief in some benevolent and malevolent spirits, ghosts. The field of indigenous health can be viewed in two main aspects: (i) as a cultural complex, i.e., a complex of material objects, tools, techniques, knowledge, ideas and values and (ii) a part of social structure and organization, i.e., network of relations between groups, classes and categories of persons. Knowledge of these two aspects is necessary for itself and in relation to other fields of social life such as economy, religion, magic, and law. When it is talked about tribal health and their beliefs and practices, one has to realize the immense heterogeneity in this area. The entire field, however, can be regarded as a sub-system of the social system which is continuously changing and adapting itself to changes in the wider society.

The practice of traditional/popular medicine by different ethnic groups to cure diseases and ailments bear a testimony to the indigenous knowledge system. Such knowledge is transmitted orally from generation to generation and is seldom if ever, documented. Medicinal plants and, to a lesser but important extent, animal parts constitute the materia medica of the pristine or ethnomedicinal remedies. A number of indigenous medicare studies have been undertaken by scholars from different parts of the world including north-east India. Among them the studies by Acherknecht et al. [1], Basu et al. [2], Bhat et al. [3], Choudhury et al. [4,5], Das et al. [6], Hassan et al. [7], Karna et al. [8], Medhi et al. [9],

Polgar et al. [10], Scotch et al. [11], Zaman et al. [12-15] are to name a few. However, information on indigenous knowledge of ethnomedicine among the immigrant tribes of Assam belonging to the great Tai-stock is very scanty. The Tai people possess the knowledge of a number of herbal remedies which are prepared from a wide range of plant species. Their accumulated wealth of plant-based medicinal knowledge is mostly passed through oral tradition and some through Tai Buddhist literature from one generation to another. Some remedies are reported to have high ethnomedicinal value against some very important diseases. Their knowledge of the magico-religious and spiritual treatment of diseases and ailments is equally acknowledged by many. They have developed such ethnomedical practices in conjunction with their age-old interaction with nature. Therefore, the present paper is an attempt to document the same among the Tai Khamyangs of Tinsukia District in Assam.

The people

The Tai-Khamyangs or Khamjangs, popularly known as Shyams are a section of the great Tai-stock. 'Tai' is a generic name denoting a great branch of the Mongoloid population of Asia. Its members are to be found from Assam in the Chinese province of Kwangsi and from Bangkok to the interior of Yunan. The different Tai-groups of people who migrated to Assam from south-west China and north Myanmar in the historical past are the Khamyangs, the Khamtis, the Phakes, the Taurungs, the Aitons and the Ahoms. They belong to the Siamese-Chinese linguistic family. Today, the Tai - Khamyangs, one such immigrant tribe are a distinct ethnic group of Assam having their own unique culture and tradition. They are included with the scheduled tribe (Hills; Mann-Tai speaking group) and are concentrated in the districts of Jorhat, Sivasagar, and Tinsukia in Assam, India. They are small in number with a total population of around 3000 individuals. At present, Tai language is not in use among the people. They speak Assamese and use Assamese script, but many Tai terms are still retained in their vocabulary. The Khamyangs are patriarchal by nature. Their society is divided into nine exogamous clans (Phan) viz. Thaomung, Chaohai, Chaolun, Chaolek, Tungkhang, Wailong, Panngyok, Phaalik, and



Chaosong. Agriculture is their main stay and traditionally they are pile dwellers. They profess Buddhism of the Theravada or Hinayana form. Every village possesses a monastery (Vihar) headed by a Monk (Bhante). Mai-Ko-Chun-Fai, Poi-Sang-Ken, Poi-Nen-Hoke, Poi-Kathin, Poi-Chang-Kham, Poi-Leng, is some of the important socio-religious festivals/ceremonies of the tribe.

Material and Method

Powaimukh village which is located at Margherita, Tinsukia District of Assam was selected for the present study. It is a homogenous village inhabited by the Tai Khamyangs only. There are 45 households in the village with a total population of 249 individuals of which 131 are males and 118 are females. Extensive fieldwork was carried out in two phases during the months of July/August 2016 and January/February 2017. Information about pristine medicare of different medicinal herbs/plants, their vernacular names, part/parts used, various animal parts used, methods of preparation, doses, and route of administration and application in the treatment of a particular disease/diseases were recorded. For the same, extensive personal interviews, in-depth discussions, case studies, were carried out with the two traditional practitioners as well as some of the inhabitants of the household of the village in order to enumerate their pristine medicare practices. Again, information on modern medicare facilities of the village along with awareness of the people for acceptance of the same was gathered from primary health center of the village and its different personnel including in-depth interview taken with the main health care activist, the ASHA of the village.

Objectives

The present study tries to examine

- i. Beliefs, customs, traditions, taboos, related to the health;
- ii. The pristine medicare resources of the study area;
- The materia medica use for preparation of the local medicine and their various uses;
- iv. Magico-religious practices related to the health care;
- v. Modern medicare facilities available to the study area.

Results and discussion

The ethnic communities, in general, have built up reservoirs of health and medical knowledge overages for upkeep and survival. In Powaimukh also, the villagers have a good knowledge of common diseases and their remedial response in the form of herbs, roots, shoots of plants, and of animal parts. They are confident to treat patients suffering from fever, cold, cough, headache, stomach disorder, wounds, injuries, skin disease, and so forth.

Beliefs in spells and amulets are an important aspect of traditional health care system of the people of Powaimukh village. When somebody falls ill they at first contact the *bej* (medicine man) for help. He diagnoses the cause of the illness through divination. At the time of divination, he invoked the dead ancestors and gods, through parochial spells and incantations. They convey the causes and remedies of illness to the *bej* and he treats the patient according to these directions.

The Khamyang observe certain taboos during the pregnancy of a household member. A woman at that period is restricted to pass the cremation ground, forest, etc., as such places are infested by spirits. They avoid taking foods that are sent from a household which is under the period of pollution because of the death of a family member. The parturient mother is also abstained from killing animals, fishing, looking at an eclipse of the sun, which may cause a defect in the unborn child. The woman and her husband both are tabooed from killing animals as they

believe that the newborn may possess the features of the killed animals and visit a household where someone has expired recently.

The Khamyangs have an elaborate knowledge of ethnomedicinal plants handed over from generation to generation. They have traditional knowledge about the medicinal value of the plants and use that knowledge to control sufferings and eliminate diseases and ailments. The experienced traditional village medicine man and midwives of the aforesaid village have integral knowledge about the classification and utilization of various medicinal plants, animals' parts and other material ingredients that constitute major sources of materia medica of Khamyangs indigenous medicine. The Khamyangs believe that one can gain great knowledge and perception about the medicinal value of plants by simply observing it and most of them are well versed with the same for curative purposes. The medicinal specialists are also well acquainted with the medicinal plants available in the nearby areas of the villages. The Khamyang ethnomedical knowledge can be broadly divided into two type's viz., (i) Herbal, use of animal parts or material medicine that is treatment of diseases/ailments caused by pathogens and natural agencies, and (ii) Magico-religious and spiritual, that is, treatment of diseases/ailments caused by supernatural

Herbal or Material medicine

The present study proves that the Tai-Khamyang tribe is rich in ethnomedicinal knowledge. Based on such valuable age-old tradition, the Khamyang indigenous medical practitioners are considered as one of the most knowledgeable and expert service providers in the field of ethnomedicine in this part of Assam. The Khamyangs have immense faith in their indigenous system of medicine which is largely based on medicinal plants coupled with traditional culture, beliefs, and superstition. The elderly practitioners are the principal knowledge holders and are the primary means of knowledge transmission. The knowledge and wisdom that the elder practitioners possess are those which have been derived through a lifetime of experiences in treating patients. Normally the elders pass on the ethnomedicinal knowledge to their children or grandchildren. But sometimes a close relative or fellow villager also come up voluntarily to acquire the ethnomedicinal knowledge from the elderly practitioners.

The bulk of the drugs used in the indigenous medicine is of plant origin. These drugs are prepared in definite proportions from different plant parts with the addition of animal parts in some cases. The plant parts most used are leaves, root, stem, seeds, fruits, the complete aerial parts, the whole plant, barks of both root and stem and flowers. In most of the times, fresh plant parts are used for the preparation of medicine. It is seen that different plant parts and sometimes the whole plant is either grinded or crushed to make a paste and to extract the juice as medicine. Medicinal plants are collected from the surrounding plant resources like forests and are also grown by the medicine men in their homestead plantations. Depending upon the ailment the medicine is administered raw in specific doses and juice when consumed internally, and as ointments, powder or raw paste when applied externally.

In the study village, there are two herbal medicine men. They are found to be specialized in one or more diseases and extend their helping hands both inside and outside the village. None of them, however, takes this profession as their primary source of earning. All of them consider this expertise as a gift of the almighty as well as their forefather. As such, they undertake the treatment of the ailments more as a service then as a source of income. Brief particulars of the medicine men have been provided below (Table 1).

It has already been mentioned that the traditional medicine men among the Khamyangs of the study area have elaborate knowledge about the use of varieties of plant parts for the treatment of different ailments and diseases. In addition, they also have integral knowledge about the use



Table 1: Medicinal use of plants among the Khamyangs of the study villages

SI.		Name of Plant		Plant part	Form of medicine	Integral disease	
No.	Local	English	Botanical	used		Integral disease	
	I	II	III	IV	V	VI	
1	Amlokhi	Indian gooseberry	Emblica officinalis	Fruit and tree bark	Powdered form	Piles, gastric	
2	Kachidoria	Scrophulariaceae	Bonnaya reptans spreng	Leaves	Paste	Carbuncle	
3	Chalkuwari	Aloe vera	Aloe vera L	Leaf and resin	Paste	Burn injuries	
4	Harjura	Edible stemmed vine	Cissus quadrangularis	Stem	Paste of stem	Bone fracture	
5	Kuhiar	Sugarcane	Saccharum officinarum	Stem	extracted juice	Jaundice.	
6	Modhuri	Guava	Psidium guyava	Tender leaves, leaf buds	Paste of leaves with honey, tender leaves	Bruiser or ulcer, blood dysentery, tongue ailments.	
7	Mahaneem	Indian lilac	Azadirachta indica	Bark, leaf, and twig	Powdered dried leaves, or water extracted after boil	' Skin diseases	
8	Jaluk	Black pepper	Piper nigrum	Seeds	Powdered dry, soup, juice	Fracture, fever with cold, irregular menstruation, melena, pneumonia, retention of urine.	
9	Bor thekera	Brindle berry	Garcinia pedunculata	Root	Juice	Dysentery	
10	Dalim	Pomegranate	Punica grantum	Peel	extracted juice	Dysentery	
11	Nefafu	Tube flower	Clerodendrum colebrookianum	Leaf	The raw leaf, root bark	High blood pressure, pneumonia	
11	Jati Bet	Cane	Calamus viminalis	Root; Leaf	extracted juice; paste of leaf	Dog bite, snake bite	
12	Silikha	Chebulic Myrobalans	Terminalia chebula	Fruit	Powder of dried fruit	Acidity, constipation, cough, fever, piles, stomach pain.	
13	Tulakhi	Basil	Ocimum sanctum	Leaf	Juice extracted from leaves	Cough, fever, skin diseases, bronchial asthma	
14	Dhopat	Tobacco	Nicotiana tobaccum	Leaf	Paste	Carbuncle	
15	Ada	Ginger	Zingiber officinale L.	Rhizome	Juice extracted is mixed with or without honey	Cough and cold	
16	Duron bon	Thumbai	Leucas aspera	Leaf	Paste is inhaled	Epistaxis	
17	Dubori bon	Bermuda grass	Cynodon dactylon	Leaf and root	Paste is inhaled	Epistaxis	
18	Pochatia	Chinese chaste tree	Vitex negundo L.	Root and leaf	Paste	Eczema	
19	Jomalakhuti	Crepe ginger	Costus speciosus	Rhizome	extracted paste	jaundice, pneumonia.	
20	Ronga gulap	Damask rose	Rosa damascene M.	Flower	Juice	Eye infection	
21	Haladhi Turmeric		Curcuma domestica	Rhizome	extracted juice	To cure severe pain of the abdomen after child birth; bleeding	
22	Afugutti	Opium poppy	Papaver somniferum L.	Fruit	Paste	Gastric	
23	Tita bhekuri	Poison berry	Solanum indicum L.	Root	Juice	Irregular menstruation, hematemesis,	
24	Dhopat tita	Hill glory bower	Clerodendron infortunatum L.	Root	Juice	Dysmenorrheal,	
25	Roghumola	Loranthus	Loranthus longiflorus	Leaf	Juice	Dysmenorrheal	
26	Manimuni	Indian pennywart	Centella asiatica	Leaves and tender leaf	Paste	Carbuncle, piles	
27	Noharu	Garlic	Allium sativum L.	Cloves	Soup	High blood pressure	
28	Aam	Mango	Magnifera indica L.	Fruit, tree bark	· •	Jaundice, Melena	
29	Satiana goss	Devil's tree	Alstonia scholaris	Tree bark	Paste as tablets	Melena	
30	Hathi bhekuri	Devil's fig	Solanum tarvum	Roots	Paste as tablets	Melena, Jaundice	
31 32	Goss mahoti Borali bhukua	Euphorbiaceous Graceful	Croton joufra Pouzlzia zeylanicia	Tree bark Leaf	Paste as tablets Paste as tablets	Melena, jaundice Retention of urine	
33	Doopor tenga	pouzolzsbush Sproutleaf plant	Bryophyllum pinnatum	Leaf	Juice Juice	Jaundice	
34	Kordoi	Carambola	Averrhoa carambola	Fruit	Juice	Jaundice	
35	Rohar dal	Pigeon pea	Cajanus cajan	Pulse	Soup	Jaundice	
36	Ou tenga	Elephant apple	Dillenia indica	Leaf, buds, tree bark	Paste as tablets	Pneumonia	
37	Rongalau	Sweet gourd	Cucurbita moschata	Stem	Paste as tablets	Melena	
38	Amora	Wild mango	Spondias pinnata	Tree bark	Paste	Piles	
39	Chorat	Nettle	Tragia involucrate Linn	Root	Paste	Carbuncle	
40	Tita bahak	Basaka	Adhatoda vasica Nees	Leaf	Paste	Gastric	
41	Roghumola lota)		Dendropthoe falcate L.	Seeds	Paste	Bone fracture	

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of animal parts as well as mineral objects which constitute a major portion of their ingredient for materia medica needed for medicare purposes. The ethnomedicinal experts of the study villages utilize animal by-products as well as ingredients obtain from bodies of animals, birds, and reptiles for therapeutic purposes. These birds were earlier found in the nearby forest, which are rarely found at present time. However these type of believes are diminishing day by day due to the impact of modernity as well as steps taken by the Government of India to protect the wild lives.

Some of the faunal, reptiles and aves, etc., parts used related with the therapeutic measures of the Khamyangs are listed below (Table 2).

Magico-religious and spiritual practices

There are multiple diseases/ailments that are believed to be inflicted by supernatural agencies mostly by malevolent spirits. These diseases/ ailments may be the same as mentioned above or they may be associated with other symptoms and complications. The traditional practitioners are well - versed in identifying the cause of the affliction (s) and thus provide appropriate treatment. Sometimes for some diseases and complications, herbal medicine is followed along with magico-religious and supernatural practices. For the same, use of certain plant and animal parts accompanied with enchanting of mantras (spells) are seen. The traditional practitioners refrained from disclosing the meaning and secrets of the mantras when asked. Moreover, the visitors are not allowed to see the texts containing the sacred mantras. On the other hand, at the onset of the diseases/ ailments, the people along with taking recourse to the medicines offered by the practitioners also try to invoke the supernatural or appease the spirits that are supposed to have caused the ailments and complications. Besides, the household deity (Giri dangoria) and the village deity (Phi-Su-*Mong*) are annually worshipped in order to escape their wrath in the form of diseases and ailments.

The Khamyang generally believe that the world is full of various types of malevolent spirits having abode in places like trees, air, water, deserted homes, by the roadside, etc. Some of them are very vindictive and harm the people on the slightest pretext. They may be highly annoyed if they are disturbed by someone passing by their abode and inadvertently spitting, urinating or attending to nature's call at the abode. The wrath of the evil spirit is generally manifested by the incidences of high fever, miscarriages

and infertility of females, bad dreaming, bedwetting by children, insanity and unusual behavior, severe headache and all. In such cases, the traditional medicine man identifies the responsible spirit through divination (*Aang* or *Mongol suwa*) and sometimes by the symptoms of the ailing person. He then administers appropriate magico-religious curative measures by providing medicines, threads, amulets or mustard oil treated with magical hymns. The yellow and red colored thread is tied to the upper arm or neck or hip of the patient. Generally, the amulets are made of different plant parts and with items such as teeth of fox, horn of deer, *kori* (a kind of sea Snail) and with unidentified objects, some of which are said to be over hundred years old.

A highly fierce spirit called *Mota Khetor* is considered to be responsible for miscarriages and female sterility. It is said that the spirit kills the fetus in the womb of the mother within 2-3 months of pregnancy. Here, the medicine man must be married and having children. Otherwise, the spirit would take revenge upon the wife of the medicine man itself. Moreover, as a precaution the patient to is kept uninformed about the curative measure. The ritual of medicine preparation begins early in the morning with the medicine man cooking a small amount of overnight water soaked Mogu-Mah (Phaseolus mungo Linn.) with the finely cut meat of Bunda Kesu (Pheretima posthuma). Salt is added according to the requirement. At the same time, the medicine man cleans the place of worship, lights an earthen lamp and pray to god. After the ingredients have been prepared he chants magical spells and the medicine is taken out, which is placed on a tender banana leaf. The patient is allowed to sit on a bamboo mat with a tender banana leaf on it. The medicine is then administered to the patient reverently. The medicine man informed that the spirit will disturb him on that very night or he can hear someone calling his name or some unusual sounds at midnight.

In case of bad dreams, bedwetting by children, insanity and unusual behavior, severe headache, amulets are prepared which contains finely cut pieces of *Akon (Calotropis gigantean L)*, tender leaf buds, roots of *Tita-bhekuri (Solanum indicum L)* and Hoary trick trefoil (*Desmodium laxiflorum DC*) and inflorescence of *Bhim kol (Musa sapientum Linn.)*. It is then treated with enchanting of mantras. A thick cord made out of red, white and black color strings is used to tie the amulet around the patient's neck, on the left hand above the elbow or around the waist.

Table 2: Medicinal use of faunal parts among the Khamyangs of the study villages

SI.No.	Name of the Fauna/ Reptiles/ Aves			Part used	Theyanaudia	
SI.NO.	Local	Local English Zoological		Part useu	Therapeutic use	
1	Ketela Pohu	Porcupine	Hystrix indica	Dried bile	Boiled with herbal plants to cure gastric problems, hematemesis. upper gastro-intestinal bleeding	
2	Ketela Pohu	Porcupine	Hystrix indica	Fresh bile	Mixed and boiled with herbal plants to cure pneumonia	
3	Gahori	Pig	Sus scrofa	Fat and bones	Fats are applied in muscular pain; amulates prepared from the bones are used to protect from black magic and evil eye.	
4	Sagoli	Goat	Capra indicus	Urine	Taken orally in tuberculosis. In case of insect bite, the urine of goat is applied to the infected area.	
5	Paro	Pigeon	Columbia livia	All parts	Prepared curry is taken in liver related diseases; feather with a drop of mustard oil is applied in ear ache.	
7	Goru	Cow	Bos indicus	Dung, milk	In case of muscle pain, the mixture of dung and milk is given to the patient to drink.	
8	Mou	Honey bee	Apis indica	Honey	In case of cough, cold, eye disease or flexibility of tongue of babies, honey is applied orally.	
9	Shamuk	Pila	Pila globosa	Watery fluid	In order to cure from eye disease, the watery fluid is used as an eye drop.	
10	Goroi fish	Fish	Channa punctatus	Meat	Consumed with herbal medicine to cure piles	
11	Kusturi	Musk deer	Mosches moschiferus	Bile	Mixed and boiled with herbal plants to cure Melena, hematemesis.	
12	Kekora	Crab	Cancer pararus	Whole body	Soup prepared from the body is taken orally to cure malaria and cough; flesh is consumed in stomach pain.	
13	Aajagor	King Cobra	Ophiophagus hannah	Fresh bile	Mixed and boiled with herbal medicine to cure pneumonia, piles and also used as a replacement for porcupine.	
14	Kukura	Hen	Gallus domesticus	Meat	soup is prepared to cure fever with cold.	

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Modern medicare facilities in Powaimukh village

For availing the modern medicare facilities the villagers go to the primary health center situated in a village which provides health services. The study revealed that the villagers generally approach to the health center regarding diseases like diarrhea, dysentery, gastric, flu, fever (influenza), viral fever (cold), dermal problem, etc. In some cases, if a patient cannot be cured in the dispensary they are referred to the State Health Centre which is situated at nearby town Margherita.

There are four ASHA (Accredited Social Health Activist) workers in the village that is playing a vital role in the modern healthcare of the study area. They spread awareness and create necessary environment in the village for prevention of many diseases and health problems and works towards promoting a healthy and prosperous village and environment. As the ASHA worker is known to the resident of the village, it becomes easy for them to work with the people. As a member of the community, they have acceptability and knowledge of the area, about the people and acts as a link between the community and the formal government health set up. The emphasis is more on prevention of diseases and promotion of health. They spread health consciousness and ways to prevent common diseases from which the villagers suffer from time to time. The ASHA worker counsel pregnant mothers regarding necessary care including nutrition during this most crucial period of a mother. Bringing the pregnant women to the nearest health center for safe delivery so as to minimize the risk of maternal and infant mortality is the prime responsibility of the health activist. They also closely follow the immunization programmed of every child in her village. A problem like early marriage of girls and maintenance of proper birth spacing between children is another responsibility of the ASHA workers.

Availability of birth control items like condoms, oral pills, in the village is still a problem. Men and women in the village are hesitating to talk about these issues unlike their counterparts in urban areas. The net result is that they have young mothers bearing children. The ASHA workers keep sufficient amount of these items and distribute voluntarily among the villagers. They are equipped with adequate knowledge in first aid, mother and child care including immunization and nutrition, the role of safe drinking water and sanitation, personal hygiene and common ailments that occur in the village at the Primary Health Center of Powaimukh village.

Conclusion

Most of the diseases mentioned above have a local name which the traditional practitioners are very well familiar with. They detect and diagnose diseases based on general observations of the patient, the symptoms told by the patients as well as based on their personal experience in treating human ailments. It was found that they possessed detailed and specific descriptions of the disease characteristics and associated symptoms. These diagnostic methods yield information that helps to determine the syndrome and constitution to be treated. In general, the traditional practitioners have the expertise to treat most of the diseases/ ailments mentioned above, but some of them are specialized in specific diseases/ailments. For example, bone fracture healing and the elaborate magico-religious-spiritual treatment for miscarriages and female sterility is practiced by only two medicine men. Since the knowledge of the use of medicinal plants and their properties was long acquired by means of trial and error and has been transmitted from generation to generation, the traditional practitioners are more or less accurate in measuring the different ingredients used in preparing medicines. They provided information regarding the proportions of different medicinal ingredients in micro weights from their emic point of view. However, few of the medicinal plant parts were brought back from the field in the said precise micro weights as supplied by the medicine men. These on measurements in scientific balance were found to be more or less accurate in weight as mentioned by the traditional practitioners.

On the other hand, the magico-religious and spiritual practices are in use as curative as well as preventive measures. They may not have a scientific basis but has a great impact on the psychology of the patient and his family members. In view of their deep-rooted belief in the existence of malevolent spirits and deities the people always take precautions and abide by the codes of conduct prescribed to avoid the wrath of the supernatural beings. It is strongly believed that if the magico-religious and spiritual ceremonies are performed at the right time in the proper manner, the occurrence of many diseases and ailments supposed to be caused by the evil spirit or wrath of malevolent spirits and deities can be avoided. During the period of disease crisis and in day-to-day life in general, strictly adhering to the magico-religious and spiritual beliefs signifies that any sudden change or disrespect to these beliefs and practices can cause more harm than benefit. On examination of the course of treatment, it was found that the Khamyangs for most of the severe diseases/ ailments generally administers the above mentioned curative measures simultaneously aiming at quick relief. For example, in case of jaundice and female sterility herbal and magico-religious-spiritual treatment goes hand in hand. The curative measure consists of the specific rituals, practices, etc. and the intake of herbal medicines at the same time. Modern medicine (which is not within the purview of the present study) is rarely considered to intervene such problems as it is believed that the later cannot provide a permanent cure to the affliction. For all other diseases, modern medicine along with traditional medicine is also preferred by the people. However, the selection pattern of the therapeutic and healing option for the diseases/ ailments differs. Depending upon the nature of disease it is either in serial or simultaneously.

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