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TRADITIONAL HEALING PRACTICES OF THE LEPCHAS AND BHUTIAS OF SIKKIM: A CONTEMPORARY STUDY

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Abstract

This research investigates the traditional healing practices employed by the Lepcha and Bhutia communities in Sikkim.

The investigation aims to preserve the long-established knowledge of these groups and emphasises the significance of their local therapeutic practices and spiritual healing techniques.

This study examines the indigenous healing approaches utilised prior to the introduction of modern medicine. With the advent and proliferation of modern healthcare systems, individuals, particularly in urban areas, began to favour Western medical practices. Hence, in urban settings, a lack of recognition and confidence in traditional knowledge has resulted in a decline in the number of healers. However, in rural areas, many individuals still maintain their belief in traditional knowledge practices and continue to prefer as well as consult traditional healers before considering other healthcare options.

This study concludes by highlighting the importance of traditional healing practices among Sikkim's Bhutia and Lepcha communities. The potential disappearance of individuals with this knowledge across these groups could lead to the complete loss of the region's healing heritage and culture. To address this issue, it is crucial to foster a balanced integration of traditional methods and modern knowledge systems. Implementing awareness and sensitisation initiatives throughout Sikkim is vital, stressing the value of faith healers and their expertise to younger generations. Government backing is essential, as it can support comprehensive research to record traditional faith healing knowledge. This documentation will preserve crucial socio-cultural aspects and historical information of the Lepcha and Bhutia communities.

Keywords: - Traditional Healing Practices, Lepchas, Bhutias, Sikkim, Continuity.

Introduction

Traditional healing practices have played a vital role in human life from ancient times to the present day. These practices, in essence, refer to the 'traditional knowledge' of healing methods that have been transmitted through generations over numerous years. Ryan Abbott notes that there is no universally accepted definition of 'traditional knowledge'. However, in a broader sense, it frequently encompasses traditional societal practices and information systems, as well as the logical and intangible social traditions of indigenous and social groups.ⁱ Although considerable research has been conducted on the political history and associated topics of Sikkim, there is a dearth of studies focusing on the Indigenous healing practices of the region. This work aims to address this gap by examining the healing traditions of the Sikkimese people, with a particular emphasis on the Bhutia and Lepcha communities. This study concentrates on the traditional healing practices of the two communities in contemporary period.

The Sikkim population comprises diverse ethnic groups, including Lepchas, Bhutias, Nepalis, and members of the business community, each possessing distinct traditional healing practices.ⁱⁱ Although some resources exist for documenting Sikkim's history, such as myths, legends, folktales, folklore, and oral accounts, they are insufficient to provide a comprehensive historical narrative from ancient to modern times. Consequently, to construct a complete historical account of the development of the Sikkimese people, it is necessary to extensively rely on Tibetan and European sources.ⁱⁱⁱ



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The research on healing practices of Sikkim's Lepchas and Bhutia community is essential to preserve the ancient wisdom. Although these groups have maintained their therapeutic knowledge for an extended period, the arrival of the British in Sikkim has resulted in an increased exposure to modern ideas and culture. Consequently, individuals progressively abandon their traditional practices and lose ancestral knowledge. This transition has led to a growing preference for contemporary modern healthcare methods, resulting in diminished recognition of local practitioners' expertise. According to Puspashree Nayak:

“Generations of traditional knowledge and folk healing have been serving thousands of people faced with life-threatening diseases all over the world. This deterioration of local health traditions has a major negative impact on access to local health care...despite erosion is quite evident... It is too simple to state that local health traditions are eroding because they are ineffective and unable to meet present needs. Plants have not lost their healing properties and the knowledge of plants in the traditions is still profound”.^{iv}

The practice of healing extends beyond the mere application of various medicines for the treatment of patients. It also encompasses seeking blessings from ancestral and divine spirits. As J. J. Roy Burman noted in his work, "There is a prevailing supernatural basis of folk healer treatment even when the chief means of treatment seems to be herbal. Most folk healers claim that unless a medicinal concoction is empowered by a special benediction, it will have little effect. Communication between the helping spirit and God is necessary".^v Traditional healers' expertise can prove beneficial to society in numerous ways, surpassing the utilisation of herbal remedies for physical ailments. Their knowledge also enables them to support individuals in addressing spiritual matters, thereby contributing to their overall well-being.

The final critical objective of this study was to examine the traditional healing methodologies employed by indigenous practitioners of the above mentioned communities. Furthermore, it aims to elucidate the significance of local therapeutic practices and spiritual healing techniques, to address diverse health concerns.

Methodology

The qualitative method has been used to examine and understand the traditional healing practices among the Lepcha and Bhutia community of Sikkim. Moreover, the first-hand information through open-ended interviews has been analysed through field study.

1) The Lepcha Healing Practices

The Lepchas, who self-identified as *mutanchi rongkup* (translated as 'beloved children of the mother'), are indigenous inhabitants of Sikkim. They designated this region as *mayel*, characterising it as a paradisiacal realm created by their divine mother, Ithbumu.^{vi} However, Saul Mullard, citing van Driem's research combining Tibeto-Burman linguistic history with archaeological findings, posits that the Lepcha ancestors may have traversed the Himalaya between 3000 and 2000 BC. This period approximately corresponds to the conclusion of the later Neolithic era, potentially originating from the *mǎjǐyāo* cultural complex.^{vii}

1.1) Faith Healers of Lepchas- 'Bongthing and Mun'

Lepchas believe that the world comprises spirits, categorised as *rum* (benevolent spirits) and *mung* (malevolent spirits). They attribute every calamitous event, including illness, misfortune, poor harvest, and hailstorms in the locality, to the actions of malevolent spirits—*mungs*. From the outset, it has been the role of *bongthing*^{viii} and *mun* to safeguard people from these malevolent spirits believed to cause all misfortunes.^{ix} Regarding *mun*, the role can be fulfilled by both men and women, whereas *bongthing* is exclusively a male position. The Lepcha people consider *mun* to be superior in power to *bongthing*, as they believe that becoming a *bongthing* is the initial stage in the progression to *mun*. Upon selection as spiritual healers by the sacred spirits, it is imperative for *mun* and *bongthing* to get three years of teaching from their respective teachers.^x Further, A. R. Foning talks about five categories of *muns*, i.e., a) *Pildon mun*, b) *Mum-mook-mun*, c) *Mun-jyum-mun*, d) *Tangli mun*, and e) *Avore mun*.^{xi}



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1.2) Healing rituals

During minor illnesses, both the *mun* and *bongthing* perform similar rituals. Initially, they enquired about the patient's Zodiac sign, followed by questions regarding the regular rituals performed in the patient's household and the specific gods and goddesses to whom they provided regular offerings. After gathering all pertinent information, they presented smoke offerings to the local deities. Subsequently, using *Raksha Phemu* or blueberry beads, they commenced the divination process with their eyes closed. During divination, they sought assistance and guidance from their respective teachers and personal head gods. With the support and blessings of these entities, the *mun* and *bongthing* begin chanting the names of various spirits and deities that may potentially be responsible for an individual's illness.^{xii}

After determining the main source of the malady, the faith healer calls for the provision of particular objects. These items, primarily intended to placate spiritual forces, encompass dried fish, agricultural produce, *chi^{xiii}*, dried bird and ginger, amongst others. Post-ceremony, few of these offerings were deposited outdoors for animals to consume and some partaken by the ritual participants. Should the problem persist, they might resort to the sacrifice of animals, such as hen or bull. In bygone eras, an entire bull would be immolated; prior to its sacrifice, the living creature would be exhibited to the spiritual entities. Certain anatomical parts of the sacrificial beast, namely a forelimb, a hind limb, and the skull, collectively termed *gazook*, are proffered specifically to the malevolent spirit for which the rite is conducted. Moreover, select internal organs of the butchered animal, including the liver, lungs and heart known as *sha-fat*, are prepared with rice and presented to surrounding nefarious spirits.^{xiv} However, contemporary spiritual practitioners generally endeavour to avoid animal sacrifice unless absolutely imperative, and in such instances, typically only hens are offered. During the animal sacrifice, the *mun* customarily recites incantations, a process that requires at least of two hours to complete. Subsequent to the offering, the healers compel the spirits to vow that they will desist from afflicting the individual.^{xv}

2) Bhutia Healing Practices-

The origins of Bhutia settlement can be traced to approximately around 13th century.^{xvi} During this period, a Tibetan prince named Gye Bum Sar sought the blessing of a Lepcha chief and priest, Thekong-Tek, as Gye Bum Sar's wife was experiencing infertility. Following Thekong-Tek's blessing, Gye Bum Sar's wife successfully conceived and gave birth to a son. In gratitude, Gye Bum Sar made a subsequent visit to Thekong-Tek, where they established a blood brotherhood alliance and performed animal sacrifices to their guardian deities and ancestors as witnesses to their oath at Kabi Lungchuk in northern Sikkim. Subsequently, a descendant of Gye Bum Sar, i.e, Phuntsog, who was born in 1604 (the *Shing-dug* year or wood Dragon year in the Tibetan calendar), was crowned as the first *Chogyal* (Dharma Raja or righteous king) of Sikkim at Yuksam in 1642.^{xvii}

2.1) Healing Rituals of Bhutia Faith Healers- '*Pau, Ney jum, and Bon ban bongthing*'

The Bhutias or Lhopos' healing practices emphasise rituals for expelling malevolent spirits through mantra incantations, rather than utilising medicinal herbs. Similar to the Lepchas, Bhutias have designated spiritual practitioners who conduct these ceremonies, known as *pau* (male priest), *ney jum* (female priestess), and *bon ban bongthing^{xviii}*. During the ritual, the *pau* enters an altered state of consciousness to communicate with spiritual entities and determine the aetiology of the ailment. In certain instances, the *pau* attempts to identify the illness's origin through divination, utilising a plate filled with rice. He continuously looks into the rice-filled plate until indications of evil spirits are detected. Once the cause of the illness is detected they perform *phupti* ritual, which involves presenting offerings to harmful spirits, like eggs, currency, and garments that have been passed over the patient's head. Upon completion of the ritual, these items are discarded. Their belief system posits that the patient will recover within three days of this ceremony.^{xix}

The *pau* and *ney jum* maintain a favourable relationship with the *Pho lha mo lha* (father god, mother god), who safeguards genealogical lineage through possession and religious rituals. Conversely, *bon ban bongthing*, who are never possessed by spirits, sustain a positive connection with the unpredictable spiritual entities inhabiting the surrounding regions. Similar to *pau* and *bon ban bongthing*, *ney jum* also has a dedicated altar and annual religious observance tied to the calendar, with all three converging during times of illness treatment. This is accomplished by managing local spiritual



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beings, typically identified through divination (*mo*) as the source of an individual's affliction. Unlike the *Pho lha mo lha*, these indigenous spiritual entities are considered untamed or only partially controllable, due to their unpredictable nature. Though, on one hand, the spiritual healers possess the spiritual ability to pacify malevolent spirits; but on the other, these spirits can be easily provoked, potentially causing illness, misfortune, or general hardship for local inhabitants. In her work, Anna Balikci refers to this type of malevolent spirit as *nöpa*^{xx}. The primary objective of these ritual practitioners is to harness their spiritual prowess to control these evil spirits. To achieve this, the *pau*, *ney jum*, and *bon ban bongthing* combine their spiritual abilities and seek protection or assistance from *Pho lha mo lha*.^{xxi}

Bhutia faith healers maintain the belief that numerous malevolent spirits are responsible for causing illnesses. These spirits may be provoked by the disturbance of sacred locations, environmental damage, or interpersonal conflicts with relatives, neighbours, or acquaintances. Misfortune can also befall individuals who venture into areas associated with nefarious activities, such as poisoning, the evil eye, or sorcery. When a *bon ban bongthing* is summoned to treat ailing family members, they typically diagnose the ailment through the casting of dice or utilisation of rice. The healer attempts to determine whether the illness is caused by *nöpa* or not and by considering the nature of the symptoms, the diagnostic results, and the family's history, a *bon ban bongthing* will perform rituals to expel the evil spirit from the afflicted individual's body. Each locality harbours various perilous evil spirits, each with its own unique effects. A *bon ban bongthing* possesses extensive knowledge of the demands these spirits make in exchange for leaving a patient's body. At times, the spirits may request items such as *karcho* (cooked rice), flowers, butter lamps, and boiled eggs to vacate the body. The healer gathers these offerings and places them on a banana leaf, then begins chanting mantras known as *khelen* (oral invocation) to heal the patient. If the illness persists, a *pau* or *ney jum* may be summoned for further assistance.^{xxii}

Discussion

Traditional healing practices also referred to as unorthodox, indigenous, or traditional practices, focus on holistic well-being encompassing mental, social, spiritual, physical, and ecological aspects. The primary objective is to achieve and maintain optimal health equilibrium within individuals and their relationships with society and the environment.^{xxiii} Historically, these practices have been the initial treatment approach in all communities. However, the increasing influence of Western perspectives, particularly among educated individuals, has led to the categorisation of traditional shamanic and healing practices as superstitious. Consequently, many now prefer modern healthcare systems over native practices. Nevertheless, research conducted in rural Lepcha and Bhutia settlements revealed that residents still favour their traditional healers for health issues, only considering alternatives upon the healer's recommendation. It has been observed that in most rural areas of Sikkim, the indigenous Lepcha and Bhutia communities continue to consult their traditional healers for all health-related concerns. However, urgent measures are necessary to preserve this valuable traditional knowledge, as it risks extinction in the near future without proper conservation efforts.

Conclusion

Sikkim is renowned for its faith healers, with indigenous practitioners available for various ailments. These healers possess not only spiritual ritual knowledge but also extensive expertise in medicinal herbs. These healing traditions have existed in Sikkim since ancient times, with knowledge transmitted orally across generations. However, the significance of these important indigenous healing practices across all Sikkim communities is diminishing due to a lack of recognition. Individuals are increasingly sceptical of traditional healing knowledge and practitioners, instead relying on modern healthcare systems, beliefs, and culture. *Mun* Ola Lepcha states, "if an individual disregards the supernatural deity's call to become a *bongthing*, *mun*, *pau* or *ney jum*, the deity will abandon the chosen one's body, potentially leading to a daily decrease in the number of healers." The loss of individuals with this knowledge across communities could result in the disappearance of the entire healing history and culture from the region. Rather than allowing this, a proper coexistence between traditional practices and modern knowledge systems should be established. It is crucial to conduct awareness and sensitisation programmes in all areas of Sikkim, focusing on the role of faith healers and their healing knowledge among younger generations. Government involvement is also vital, as their support can facilitate thorough research to document traditional faith healing knowledge. This documentation will preserve essential socio-cultural aspects and history of the



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Lepcha and Bhutia communities. While this paper presents some important aspects of indigenous healing knowledge from Sikkim's Bhutia and Lepcha communities, further research in this field is necessary to promote the importance of indigenous knowledge practices and develop methods to prevent their extinction.

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