



AYURVEDIC MEDICINE AND INDIAN CONCEPT OF WELLNESS IN R. K. NARAYAN'S SWAMI AND FRIENDS

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Abstract

In this paper, we will see the depiction of Ayurvedic treatment with the conventional Indian health ideas in R. K. Narayan's *Swami and Friends*. The narrative does have an underlying subtext of Indigenous health concepts and traditional healing techniques, although this may be missed in critical observations of the work. It examines traditional healing practices, diseases, and methods of health using a story of a young protagonist and other characters set in colonial India. Frameworks from postcolonial and cultural studies are used to investigate the ways these representations reflect the conflict between indigenous knowledge systems and Western medical practices in India under British rule. In doing so, this paper contends that Indigenous wellness ideas continued to circulate through this time, in opposition, at times, to colonial medical organisations, and that the representation of health practices here in R. K. Narayan's *Swami and Friends* is a minuscule version of the broader cultural fight going on then. We can understand such components of *Swami and Friends* by analysing them, and this records how Indigenous knowledge survives amid a colonised civilisation in solitude and quietness.

Keywords: Ayurveda, Traditional Medicine, Colonial India, Indigenous Knowledge, Cultural Identity, Postcolonial Literature

Traditional Medicine in Colonial Context

R. K. Narayan's *Swami and Friends* (1935) is typically analyzed for its portrayal of childhood, education, and colonial tensions. Nevertheless, there remains another dimension, hidden in the text, that describes how Swaminathan's world represents traditional Indian medicine and wellness ideas that it takes for granted.

The main content of these traditional wellness concepts are found, however, in domestic spaces, interacting with Swaminathan's grandmother and mother, rather than in Western medical practises apparently represented by doctors and the school system. Through such juxtaposition, R. K. Narayan records how traditional remedies and the perception of health were embedded in the Indian cultural identity even in the presence of colonial medical systems that catered to institutional settings.

Swaminathan's grandmother is the most prominent representation of traditional wellness. This is a reflection of the cultural reality that elderly women in an Indian society were repositories of traditional medical knowledge and now R. K. Narayan is portraying this. One sees her applying folk remedies, advocating for dietary changes according to Ayurvedic principles, and following traditional wellness rituals all throughout the novel.

“‘Granny,’ he said, ‘I have a terrible pain in the stomach. Please run out and come back, boy.’ He did not stay there to hear more.” (Narayan 92)

The grandmother also brings a cultural link of pre-colonial knowledge systems. She always includes ethics in the matter of health drawn from Ayurvedic ideologies, when telling storeys to Swaminathan. Often, her tales contain appropriate diet references, season references, and a balanced living aspect which is based on Ayurvedic philosophy of wellness.



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Grandmother believes in traditional medicine and Swaminathan's mother, in fact, capitalises both traditional and Western medical practises. His mother applies traditional means and Western apparatus when Swaminathan feigns illness to miss school.

"Mother came in with a tumbler of water in one hand and a plate of betel leaves and nuts in the other... She felt his body and said that he certainly had a temperature. Swaminathan said pathetically, 'Give me milk or something, mother. It is getting late for school.' Mother vetoed this virtuous proposal." (Narayan 60)

After this assessment of her touch (a method used for traditional diagnostic) she verifies her conclusion using thermometer; an equipment from the western medicine. This scene, as do many scenes that depict Indian families, show how Indian families utilised the two medical systems together, and it is to be noted that this is not strange.

Moreover, the mother's approach also implies the colonial gendering of medical knowledge in India. The traditional practises of health were often stored in domestic spaces by the women, while men embraced Western health practises more openly in public spaces. In *Swami and Friends*, this gender division is evident in how the mother and grandmother maintain traditional practices at home while Swaminathan's father embraces Western medicine.

In Ayurvedic wisdom, it is believed that all things in the universe (human bodies included) are comprised of five basic elements: earth, water, fire, air and ether. By analysing these five elements we can say that from these elements three bodies develop, viz., Vata (body of air and ether), Pitta (body of fire and water) and Kapha (body of earth and water) respectively. R. K. Narayan's characters in *Swami and Friends* mirror these constitutions.

Continual activity and inventiveness with fast tempo movements is characteristic of Swaminathan, the traits being analogous to Vata dosha.

"Swaminathan was an unobserved atom in the crowd. Another unobserved atom was busily piling up small stones before him, and flinging them with admirable aim at the panes in the front part of the school building."

Rajam exhibits Pitta behaviour with his dominating power, organizational skills and great aims:

"He was a new-comer; he dressed very well—he was the only boy in the class who wore socks and shoes, fur cap and tie, and a wonderful coat and knickers. He came to the school in a car. As well as all this, he proved to be a very good student too. There were vague rumours that he had come from some English boys' school somewhere in Madras. He spoke very good English, 'Exactly like a "European"'

Mani shows Kapha characteristics through his consistent build and reasonable pace of movement:

"He seldom brought any books to the class, and never bothered about home-work. He came to the class, monopolised the last bench, and slept bravely. No teacher ever tried to prod him."

Though not explicitly designing characters with Ayurvedic concepts in mind, R. K. Narayan's observations naturally align with these traditional typologies.

Illness Narratives and Cultural Negotiations

In *Swami and Friends*, R. K. Narayan presents several instances of childhood illness that reveal how different medical systems interacted. First addressed by female family members who would employ traditional home remedies for ailments



as minor as headaches and fevers. Western medical practitioners only break in the middle of the story when conditions persist or get worse.

Swaminathan's culturally specific understanding of illness is implied when Swaminathan feigns illness and does not want to go to school:

"Swaminathan sat impatiently in his 'room', trying to wrest the meaning out of a poem in his English Reader. His father stood before the mirror, winding a turban round his head... Swaminathan watched his progress keenly." (Narayan 59)

It is a telling sign that, in houses where Western medical tools were available, the mother's initial response — reaching for a thermometer rather than checking his body with her hand —was representative of the first recourse when it came to diagnostic procedures.

An important moment in terms of medical cultural tensions takes place when Swaminathan is faced by the Board School Head Master regarding his absent from drill classes. Swaminathan claims that he went to consult Dr. Kesavan on why he was absent:

'Sir, the doctor—didn't the doctor talk to you about me, sir?'

'What doctor talk about what?'

'It was the doctor—I didn't sleep a wink last night. I was delirious. Our doctor said so. He has asked me not to attend Drill for a week to come. He said that I should die if I attended Drill.'" (Narayan 186)

The Head Master's dismissive response—"I don't care to have every street mongrel come and tell me what to do in my school with my boys"—reveals the contestation over medical authority that occurred in colonial institutions. This seemingly simple episode allows R. K. Narayan to trace the many negotiations of power in the matter of health and bodies in colonial India.

Dr. Kesavan's storey will be another important dimension of medical culture in colonial India, not of doctors schooled and trained exclusively in a Western medical tradition, but of what we may call a hybrid practitioner whose training spanned between Western medical education and his local cultural context:

"Well, I could do it. But is there anything wrong with you?'

Swaminathan took half a second to find an answer: 'Certainly, I am beginning to feel of late that I have delirium.'

'What did you say?' asked the doctor anxiously.

Swaminathan was pleased to find the doctor so much impressed, and repeated that he was having the most violent type of delirium." (Narayan 185)

Western medical protocols are followed by the doctor's examination, yet the interaction has both cultural understanding and humour, not clinical detachment. When he explains that delirium is not "some kind of stomach ache," the doctor demonstrates how Western-trained physicians in India often had to translate between medical systems.

Beyond Ayurvedic medicine and Western medical practices, *Swami and Friends* acknowledges religious and spiritual approaches to healing. Upon Swaminathan's disappearance, his mother tries to have healing through religious association:

"Even his mother had left her bed and was hobbling agitatedly about the house, praying to the God of the Thirupathi Hills and promising him rich offerings if he should restore Swaminathan to her safe and sound." (Narayan 216)



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This representation of votive offerings highlights the integration of spiritual and physical healing in traditional Indian wellness concepts. Unlike secularized Western medicine, traditional approaches did not separate spiritual and physical interventions but saw them as complementary.

Ayurvedic wellness concepts emphasize the relationship between human health and environmental factors. Throughout *Swami and Friends*, R. K. Narayan includes references to seasonal wellness practices:

“During summer Malgudi was one of the most detested towns in South India. Sometimes the heat went above a hundred and ten in the shade, and between twelve and three any day in summer the dusty blached roads were deserted.” (Narayan 153)

However, R. K. Narayan immediately contrasts this with the children’s immunity:

“But there is this peculiarity about heat: it appears to affect only those that think of it. Swaminathan, Mani and Rajam would have been surprised if anybody had taken the trouble to prove to them that the Malgudi sun was unbearable.” (Narayan 153)

This passage reflects traditional understanding of constitutional differences (prakriti) that make some individuals more or less susceptible to seasonal influences—a concept aligned with Ayurvedic understandings.

The River Sarayu has purposes beyond mere geography throughout the novel. Ayurvedic tradition regards rivers as especially important sources of life and cleansing:

“River Sarayu was the pride of Malgudi. It was some ten minutes walk from Ellaman Street, the last street of the town, chiefly occupied by oilmongers. Its sand-banks were the evening resort of all the people of the town.” (Narayan 42)

This description establishes the river not merely as a geographical feature but as a community wellness resource—a place where residents go for restoration and rejuvenation.

Wellness Narratives and Cultural Identity

One significant aspect of traditional wellness appears through the therapeutic function of storytelling, particularly between Swaminathan and his grandmother:

“Granny expressed her approval of this attitude and then begged leave to start the story of Harischandra, who, just to be true to his word, lost his throne, wife, and child, and got them all back in the end. She was half-way through it when Swaminathan’s rhythmic snoring punctuated her narration, and she lay down to sleep.” (Narayan 56)

The sessions include this storytelling to show that traditional approaches to wellness addressed psychological and spiritual needs through narrative, not medication. Grandmother’s stories are filled with lessons about virtues and balance, and about proper conduct that was central to the traditional understanding of mental wellness as a product of moral orderliness.

Indian approaches to wellness as practised traditionally are about body awareness and development of the body, as mindfully, consciously, and honestly as possible. Swaminathan keeps himself away from the drill classes, that are a colonial imposition of Western physical culture.

“The Drill Master, a square man with protruding chest, a big moustache sharpened at the ends, and a silk turban wound in military style, stood as if he posed before a camera, and surveyed his pupils with a disdainful side-glance.” (Narayan 184)



It depicts how wellness practises became the turf of cultural contestation. Unlike the traditional form of Indian physical culture which promoted harmony and balanced development, the militaristic physical culture brought from Britain was glaringly counterproductive.

Food practices in *Swami and Friends* extend beyond nutritional considerations to encompass social rituals promoting community wellness. After coming home after his disappearance, Swaminathan is served food by his mother:

“Mother had meanwhile disappeared into the kitchen and now came out with a tumbler of hot coffee with plenty of sugar in it, and some steaming tiffin in a plate. Swaminathan, quickly and with great relish, disposed of both. A mixed fragrance, delicate and suggestive, came from the kitchen.” (Narayan 236)

This scene illustrates how food in Indian culture serves emotional and social functions beyond nutrition. The mother’s preparation of favorite foods represents both physical nourishment and emotional care, while shared consumption restores social bonds disrupted by separation.

Conclusion

Throughout *Swami and Friends*, R. K. Narayan’s representation of traditional wellness concepts serves multiple functions—documenting cultural practices, preserving indigenous knowledge, and subtly critiquing colonial impositions. By portraying how traditional approaches to health persisted within domestic spaces even as Western medicine dominated institutional settings, R. K. Narayan illustrates what James C. Scott calls “everyday forms of resistance.”

The grandmother uses traditional remedies, the mother employs indigenous and Western diagnostic techniques, characters seek restoration in natural settings, all of these reflect ways of sustaining and exceeding colonial narrations of Western medicine’s superiority.

Another part of the persistence of these traditional wellness concepts is to show how embodied practices, enabled a cultural identity through colonial rule. However, if characters follow traditional dietary principles, seek health in known environments, and listen to culturally uplifting stories, they do not sever ties to pre-colonial identity despite their encounter with colonial institutions.

By examining these often-overlooked elements in *Swami and Friends*, we gain deeper insight into how R. K. Narayan documented the quiet persistence of traditional wellness concepts during colonial rule, preserving aspects of indigenous knowledge while simultaneously showing how these traditions adapted and persisted within the changing cultural landscape.

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