

Gaurav Lamichhane
PhD Candidate
Department of Anthropology
South Asia Institute, University of Heidelberg
26 Jan 2017

State Recognition and Emerging Trends of Modernization of Tibetan medicine in Nepal

Abstract

In this talk, I will present my findings from the research I conducted for my MA thesis where I investigated the effects of the lack of state recognition of Tibetan medicine in Nepal. I found that the two groups—Himalayan *amchi* and Tibetan doctors—practicing Tibetan medicine in Nepal are affected differently by the lack of state recognition. Himalayan *amchi* are striving hard to sustain their practice and therefore are actively seeking state support in order to survive. Since the state does not recognize the traditional lineage system of *amchi*, the *amchi* have had to transform their medical knowledge by aligning with the state's policy of what makes a proper medical system, which is based on the biomedical model of healthcare; this requires the *amchi* to modernize their practice by institutionalizing and professionalizing *amchi* medicine.

Contrary to the Himalayan *amchi*, the Tibetan doctors in Boudha do not have a similar pressure to modernize their practice because they were trained in the modern institutes of Tibetan medicine in India; so their practice in Boudha is already professionalized and institutionalized. Since the Nepali state tolerates their practice and they are able to cater their service to their foreign clientele, they are not struggling for mere survival like the Himalayan *amchi*. Some Tibetan doctors have taken advantage of the absence of recognition and regulation by creating commercial training courses that suit the tastes of their foreign clients.

This study is based on the ethnographic study (participant-observation) of three Tibetan clinics and a 10-day training course in Tibetan message therapy (called Kunye) in Boudha, Kathmandu, conducted from the second week of February until the last week of April in 2015. A total of 17 interviews were conducted with the doctors and the clinic staff, and other relevant actors—local and foreign patients and officials of the organizations promoting Tibetan medicine in Nepal. The interviews were based on structured, semi-structured, and unstructured questions as well as informal discussions.