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[The authors] emphasize the authenticity of local practices and reject any attempt to consider them as “corrupt” texts.

Michael Baltutis on Getting Married: Hindu and Buddhist Marriage Rituals Among the Newars of Bhaktapur and Patan, Nepal

(p. 143). Third, the recent adoption of the Sanskrit term svayamvara ([woman’s] own choice) to refer to the marriage ceremony undermines the traditional north Indian concept of the kanyadana (gift of the girl), seen by some Newars as impossible due to her two prior marriages: to the bel fruit in her ihi and to the Sun god in her barha tayegu (seclusion) (p. 103). As a final example of the uniqueness of the Newar rites, multiple priests are engaged at different moments (except in the lower-caste butcher marriage in which no priests are present (p. 133-137)), and sometimes simultaneously, thus resulting in debate and argumentation over the proper performance (p. 93); one of the priests enjoined in the post-nuptial rites is a tantric priest who performs a goat sacrifice at the shrine of the Mother Goddess, Tripurasundari, in the center of the city of Bhaktapur (p. 110). (This sacrifice is graphically depicted on the DVD.)

But, the authors are careful to note, all of these traditional features are subject to change and have been changing significantly in the past thirty or so years. For example, the music of Hindi films and the concept of the Western “love marriage” have made inroads into the “highly complex, urban and literate socio-cultural environment” of these two Newar cities (p. 140). Thus, the authors’ statement in their conclusion that the Newar wedding is “a process rather than an event” is a rather multivalent one: it has historically changed over time; it has incorporated ritual sources from multiple traditions; and it serves as the married woman’s third and final marriage, as she has “effectively arrived in her new environment” (p. 143).

The audience for Getting Married might practically be small, due to the narrowness of its ethnographic range and the cost of the volume, but it should be required reading (and viewing) for graduate students and scholars interested in the changing rituals of Hindu and Buddhist South Asia.

Michael Baltutis is Assistant Professor of Religious Studies at the University of Wisconsin, Oshkosh. His research and teaching focuses on the religion and ritual of India and Nepal and he has published on the South Asian festival of Indra in the Mahabharata and in contemporary Kathmandu.


Reviewed by Steve Folmar

This book is a welcome offering by one of the premier medical anthropologists working in Nepal, Ian Harper, in which he synthesizes over 20 years of medical anthropological fieldwork, primarily in Palpa and Kathmandu. The main theme running through Development and Public Health in the Himalaya is the progressive medicalization and pharmaceuticalization of “life in the hills of Nepal” (p. 136). It brings together rich ethnographic and public health data presented against the backdrop of Harper’s professional training and experience. Three major health initiatives serve to illustrate the increasing medicalization of Nepal: TB (tuberculosis), vitamin A deficiency and mental health. The experiences of patients, healers, and institutions are also examined.

Harper explains that his book is about a “discursive gulf between tradition and modernity,” (p. 3) and the attempts to introduce and stabilize a “particular order,” a medical discourse of development, its relationship to social change, and how this gulf can be bridged in public health practices. The process of medicalization of
everyday life, he asserts, is tied up with the “ambiguous” discourses of globalization, aimed at turning health seeking behavior away from “traditional” concepts and practices to those viewed as “progress,” “science,” and “development.” This process is carried forward through development ideologies that create “modern subjects,” in order to advance the health of the nation.

A point of departure is the detailed scrutiny of the contribution of pharmaceuticals to the process of medicalization. These require no prescription, are taken in increasing quantity, and not only affect symptoms of diseases, but “those who consume [them] have a changing relationship with their bodies and the social relations through which they understand them,” (p. 136).

In Chapter 2, Harper maps out a “healing geography” of Tansen, Palpa, showing how the increased use of pharmaceuticals was propelled by policies favoring privatization of health services. Chapter 3 builds on these themes, sketching out how health workers champion a particular modern and biomedical view of health over another that is traditional. Harper includes compelling instances of how the media aid in this process. A salient example comes from a book entitled Dhaami-jhanka: A Mystery: “This [dhaami] tradition does nothing except push people toward darkness,” (p. 39). But this tendency is balanced by some organizations, like Oxfam, which supports traditional healers while advocating for positive change.

Chapter 4 explores how local healers relate to modern medicine and each other. “Caught in the middle,” (Chapter 4’s title, p. 54) they negotiate power in the contested, murky arena of “efficacy,” focusing on their place in a rapidly modernizing medical environment. One of the most compelling questions arises in this chapter: “Is it all about belief?” (p. 57). Using a number of local illness beliefs to answer this question, he describes how powerfully they affect individual thought, even his own. At one point, he “grew wary of the people saying that Tara, our daughter, was so beautiful, as the attraction of the glance of the envious could make her unwell,” (p. 68).

But, Harper is not simply saying that belief makes for illness. Things are more complex than that. In Chapter 5 he examines how the history of the mission hospital in Tansen prepared the discursive space in which medical services became touted as necessary. In a rather loose argument, Dr. Harper suggests that the ideology favoring biomedicine was originally tied up with the bird-watching methods of a missionary. At the very least, there is much in common between how bird collectors and doctors treat their subjects.

Psychiatric issues and services are the subject of Chapter 6. Here Harper details the murky relationship between the universalistic biomedical perspective of psychiatric problems and a locally informed one. Much psychiatric research in Nepal is a direct outgrowth of the former, wherein statistics that suggest how prevalent conditions like “depression,” etc. are generated. Such research not only contributes to the Westernization of psychiatric problems, but in Nepal also perpetuates structural inequality by the very categories used in statistical studies. For example, the recording of affective mood disorder used ethnic group codes in which Dalits were “included only in the residual category of ‘other,’” (p. 87) obscuring how the disorder affects this group. I would have welcomed more discussion of how medical research structures social relations and therefore contributions to the medical marginalization of Dalits and others. The chapter ends with a rich analysis of how these two belief systems are navigated, with many patients presenting with “multiple physical complaints,” which are then readily categorized as depression or “nerve disease” and prescribed pharmaceutical drugs designed for those conditions (pp. 88-100).

In Chapter 7, Harper digs deeper into how drugs proliferate in the “rarefied world of political economy and scientific abstractions,” (p. 120). Vitamin A programming illustrates how increased surveillance “does little to address political issues of poverty and consequent malnutrition” (ibid.) but results in the sad irony that “those who are vitamin A deficient are those least able to comply with health education messages” (ibid.).
Chapter 8 queries how the DOTS (Directly Observed Treatment, Short-course) program for TB was implemented at the National Tuberculosis Centre in Kathmandu. How program bureaucracy affected the treatment of patients is viewed through the stories of two men: “both Harka’s and Hari’s experiences of having tuberculosis were directly linked to being categorized with the disease under these programmatic conditions,” of “spatialization,” thus locating the disease rigidly and arbitrarily in time and space, revealing “the limits of this biomedical order” (p. 134).

The conclusions do not simply summarize the main points of the chapters, but offer a synthesis of how medicalization of everyday life is unfolding in Nepal. Harper masterfully joins a variety of ethnographic experiences with a range of theoretical concepts without becoming bogged down by jargon. He fuses applied and theoretical perspectives successfully and confirms that a particular type of modernizing medical discourse shapes how Nepal constructs modern subjects. This book stands as a most significant contribution to medical anthropology in Nepal, with appeal to graduate and undergraduate students and scholars concerned with the globalization of health in local settings such as Nepal.

Steve Folmar is an Associate Professor of Anthropology at Wake Forest University. His research interests have concentrated on caste, specifically the conditions of Dalits in the hills. He currently is at work on a project, Oppression and Mental Health-Nepal, funded by the National Science Foundation, which investigates the relationship between caste/ethnicity and mental health in Lamjung.

Steve Folmar on Development and Public Health in the Himalaya: Reflections on Healing in Contemporary Nepal

Taming Tibet: Landscape Transformation and the Gift of Chinese Development.


Reviewed by Kabir Mansingh Heimsath

In the past decade Emily Yeh has distinguished herself with articles that combine detailed quantitative data and rich ethnographic description with recondite theoretical engagement and incisive policy analysis. This is her first monograph, and, as with her articles, it musters a formidable collection of information, experience, observation, and analysis. The book is based on Yeh’s ethnographic fieldwork in Lhasa during 2000-2001, but it also draws heavily on more recent research there and across the Tibetan plateau. This sustained experience, language ability in both Lhasa Tibetan and Chinese, knowledge of China generally, and solid grounding in contemporary social theory equip Yeh to carry out a study that is singularly nuanced and insightful.

Yeh divides the book into three categories — soil, plastic, concrete — that correspond to three major landscape transfigurations that have taken place in and around Lhasa since the 1950s. “Soil” refers to the introduction of high-intensity vegetable farming to Tibet through state farms during the 1950-70s; “plastic” alludes to the coverings