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Book title: Development and Public Health in the Himalaya: Reflections on healing in contemporary Nepal
Author: Ian Harper
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Engaging with a range of public health issues, based on his rigorous ethnographic study, Ian Harper in this book deals with important social and political transitions in Nepal via the lens of medicine and health development. The book sheds light on how local realities align with or resist against and are complicated by globalized meta-narratives and practices of health and development. The author presents this scenario through four interrelated facets of case studies of traditional healers, micronutrient initiatives in the form of Vitamin A programme and pharmaceuticalization of mental health and tuberculosis control program/infectious disease and a hospital run by Christian missionary as health programme intervention in Palpa district in Western Nepal. The author examines these facets in the ideological, historical, political, and economic context of mission-based development work. The book has been of interest for both the academics and the practitioners who want to expand their horizon on developmental interface in the health sector in Nepal.

The book contains eight different chapters plus a concluding section. It begins with the introduction of the issues dealt in the monograph followed by description of Palpa, where bulk of the field study was conducted, and the healing
traditions were practiced in the area. The third chapter, ‘The view from the clinic’ primarily portrays the perspectives of the health workers and how health is linked with state, development and progress. The fourth chapter, ‘Caught in the middle’, focuses on the author’s ethnographic portrayal of shamans and mediums, and their patients and families and examines the way various healers associated with medicine and the interactions among themselves. The fifth chapter elaborately describes the history of mission hospital in Palpa vis-à-vis its role in introducing biomedicine, a completely different healing paradigm, in the area. One critical aspect of the mission hospital, the psychiatric services, has been dealt in the chapter six. On the other hand, chapter seven has come up with a critical viewpoint on the logic and implementation of capsular promise of vitamin A programme. He critically observes the implementation of protocols and the control of tuberculosis in the eighth chapter. In the conclusion the author reiterates “the main themes of the monograph, and ask(s) questions about putting health-related knowledge to work for political and programmatic ends”.

The book clearly reflects the author’s critical intellectual capability having two decades of experience in Nepal, not only as a physician and public health expert but also as a medical anthropologist. Reflexive encounter of medical and public health journey which paved his way in the domain of medical anthropology has been portrayed through his lucid ethnographic presentations in the book. The way the ranges of healers - shamans, mediums, herbalists, ayurvedic practitioners, and medically trained workforce - are introduced in it provides crucial ethnographic materials for the rest of the interpretive journey of the book. Amidst the declining interest of medical anthropologists towards plural healing practices, this book has markedly pointed out the need of reorienting attention towards this almost forgotten and overshadowed arena.

The author has beautifully portrayed the scenario in which some development actors such as Action Aid, MS (MellemfolkeligtSamvirke) Nepal,
Oxfam Nepal, and SNV (Netherlands Development Organisation) Nepal have rendered the traditional healers and their healing efficacies. Indigenous healing practices, which have been labeled as the alternative healing practices as elsewhere in the biomedical rationale dominated contemporary world, have been shown as incompetent ones and thus creating the apparatus for developmental intervention in the sphere of public health. This kind of reductionist biological approach introduced in the locality through biomedicine has colonized people’s understanding of themselves, their body and their health. Nevertheless, creation of vacuum in healing ideas and practices is not a swift task rather it takes a long time. In this construed vacuum, he shows how clinical Christianity steps in to manipulate the consciousness of local people for religious conversion through the altruistically projected healing space and procedures. Analyzing the clinical Christianity practiced in and around Palpa district, he remarkably portrays how mission enterprise was enacted in the area through hegemonic biomedical project.

The book critically presents the prevailing complexities of plural healing and the introduction of biomedicine in the study area. In doing so, the author also shows how the mission hospital has become the authoritative medium of familiarizing biomedical knowledge, especially antibiotics and diagnostic capabilities. Along with the far and wide spread of success stories of healing, mission hospital’s fame also accelerated the repute of foreign doctors, often depicting them as having magical healing power. It also points to the scenario in which how missionaries exploited the human susceptibility to illness as a space to bring in the Lord to heal the patients and preach them Christianity. It evidently shows how the missionaries tactically mystified new healing ideas as the divine power during the moment of failure of native way of understanding and manipulated their consciousness towards the alteration of the God and faith rather than that of the healing pathways.
What I found as one of the interesting topics dealt in the book is how the hospital became the public sphere where people from distinct cultural background, illness/disease condition, and healing alignment were able to interact with each other. Moreover, Harper argues that it also opened up the possibility of multiple interpretations of alternative therapies even in a biomedical space. In doing so, he has clearly shown the link between the broader social and cultural changes towards the modernity vis-à-vis the transitions taking place in understanding, adopting, and practicing healing.

The book also minutely deals with the psychiatric services provided through the mission hospital in the study area. As the author has pointed out, it specifically focuses on diagnostic category of depression. The role of health education has been explored here in promoting medically sanctioned treatments amidst the prevailing stigma especially in reckoning it as a problematic health situation. The societal transition is also reflected through this kind of reluctance to regard this as health condition rather than conventional wisdom of linking it with the disordered relation with broader socio-cultural realm. The greater availability of psychotropic drugs and expansion of psychiatric services in the area has contributed not only to sideline conventional ontologies of interpreting socio-cultural phenomena, rather, the practice of regarding it as health problem and taking medicine as remedy to get rid of it also reinforced the biomedicalization of social and cultural problems in the study area.

I found that the author is very much critical about the National Vitamin A Programme of the Government of Nepal which began in 1993 with financial and technical support from the US Agency for International Development (USAID) and a little support from UNICEF, the United Nations Children’s Fund. Based on his observation of Vitamin A capsule distribution programme, he brings the reader closer to the field site when the health personnel used multiple means to make people go for Vitamin-A. He had critically examined the nexus dominated
by the small constellation of scientists and some international development organizations. Based on almost entirely upon the biomedical logic, their publications and knowledge constructions had provided foundation in construing the apparatus showing the urgent need of what these people and organizations regard as cost-effective and humanitarian intervention of ‘micronutrient initiative’, a form of capsular rationality, to get rid of nutritional deficiency. For the author, the most important implication of this is that these representations directed the formation of health-related policy which crucially influences on developmental efforts and processes in Nepal.

The author is completely dissatisfied with the way the government of Nepal and international developmental agencies looked for the capsular solution of the nutritional deficiency. In the emerging context of increasing medicine consumption and expanding private pharmacies, he worries that this programme nourishes further into the process of the commodification and magical attraction towards syrups and tonics. He points out some instances in which in case of lack of compliance to take Vitamin A, coercive forms of state surveillance measures are also taken. Eventually, he affirms that this programme has contributed in promoting biomedical hegemony and pharmaceuticalisation in relation to health.

He regards TB control programme in Nepal as a very hierarchical, vertical, and disciplinary form of medical intervention implemented through Directly Observed Therapy, Short Course’ (DOTS) as a magic bullet approach of WHO which rolled out in the country from the mid-1990s. Harper had critically analyzed how the standardized recording and reporting for national and international organizations to monitor the control of the disease at the population level has impacted on the understanding and practices locally. Through the assessment of DOTS programme, he explicitly deals with two broad issues: how global governance works in practice for this essentially vertical public health programme and what could be the implications for those people suffering from
tuberculosis but may not fit with the order of the standardized programmatic apparatus. On top of suffering of these people undergoing through the entanglement in their treatment because of so called standard protocol he also points to the possibility of rise in multi-drug resistance variants of tuberculosis.

The author affirms that these kinds of health developmental programmes have also added in creating the emergence of ‘biological citizenship’ as families and individuals internalize modern, medical understandings of the body, health and illness. Production of ‘sanitary citizens’ through the mobilization of coercive measures of state surveillance and ‘therapeutic citizens’ through the distribution of pharmaceutical products have become common phenomena through the implementation of this kind of health governmentality. Above all, the author’s sharp critique is there for the highly vertical, technocratic intervention as euphemized capsular solution for what he regards as resulting from structural problem and inequality.

A remarkable strength of this book lies in lucid way of presentation of ethnographic details that make the reader feel as if he/she is not turning the pages rather moving around the places and people described in the book. It is mainly based on primary information with rich ethnographic details. Claims, arguments and counter arguments presented in the book are adequately supported by these microscopic ethnographic details that are elevated to the level of interpretation linking them with Foucauldian discourse analysis to interrogate the implications of public health development programmes. The adopted ethnographic methods are quite compatible in collating information which provides flesh and blood for the skeleton of this ethnography. I nevertheless assume that ‘overdoing with Foucault’ may complicate the non-anthropologists to get into it.