

In a Remote Area: Categories of the Person and Illness among the *Desia* of Koraput, Orissa

Tina Otten

*Institute of Ethnology, Free University of Berlin, Drosselweg 1-3, 14195 Berlin, Germany
Fax: 0049-30-83852382; e-mail: <tina.otten@gmx.de>*

KEY WORDS Medical anthropology; anthropology of the person and the body; tribal studies.

ABSTRACT The paper deals with worldviews of the *Desia* people in Koraput District, Orissa. Concerned with categories of the person and concepts of illness, the introduction gives a short overview of basic ideas of medical anthropology. Then the idea of a Koraput Complex is explained, showing that different tribal communities share the same values. This is also true for the field of medical treatment, which includes the concept of the person and the body. Healing experts have similar tasks and treat illnesses in the same way in different tribal communities of Koraput District. A main feature of illness can be summarised under the idea of "too much moving." Away from their respective places, gods, ghosts, human beings and even organs in the body move around, creating disorder. Then the order has to be re-established through rituals.

INTRODUCTION

One of the most crucial themes of life is the concern with health and illness. Birth, health, illness and death are core elements of life in every society. But how life and death are valued and experienced differs from society to society. How does a natural event become a social fact? How is the body socialised? At the beginning of the 20th century the idea of the socialisation of the body was elaborated in France, Great Britain and the United States with slightly varying approaches¹. The French School L'Année Sociologique developed a symbolical view of the body. Robert Hertz emphasised that the physical body is also social. He explained by investigating the pre-eminence of the right hand (1909) how patterns of thought are reflected in the body. Arnold van Gennep (1909) put it the other way round and showed how the body is used to re-establish the idea of society. He stresses that in many events in life the body undergoes rites of passage to transform the person and to put them into another role in society. Mauss (1936) was interested in how the ideas of the use of the body

varied from society to society. In this direction went also the English school under Malinowski.

In the States Mead (1949; [1935] 1956) and Benedict ([1935] 1968) did pioneer work describing how persons and bodies were experienced or culturalised in different societies. All schools stressed that the idea of the social body and the idea of the body or of the person are interdependent. Marcel Mauss was the first sociologist who advocated a systematic anthropology of the body. In his article about the body (1936) he explained that the body is the first and most natural instrument of man, but like other instruments it must be learned, and it may be learned well or badly, and it is certainly learned differently in different cultures. Later Mary Douglas elaborated in her books "Purity and Danger" (1966) and "Natural Symbols" (1970) the idea of the body as a symbol of society. She distinguishes between the body physical which is the individual body-self and the body social, which constitutes ideas about nature and society. Both bodies are mutually dependent on one another:

"The two bodies are the self and the society: sometimes they are so near almost to be merged; sometimes they are far apart. The tension between them allows the elaboration of meaning" (1973: 112).

The two bodies influence each other in complex ways:

"The social body constrains the way the physical body is perceived. The physical experience of the body, always modified by the social categories through which it is known, sustains a particular view of society" (1973: 93).

At the same time this view on the symbolism of the body was elaborated by other anthropologists in similar ways.² A couple of years later Charles Leslie edited the first book on Asian Medical Concepts (1976).³ Through these

studies the body became a centre of attention in anthropology, this time not as something to be measured as in physical anthropology, but as a symbolic system (Synnott, 1993: 230). With Douglas as the first who studied the body as a symbolic system, these studies were the starting point of a new discourse about body, person and society. Others who followed established an ongoing discussion. Foucault (1973) worked on body, power and politics and he showed how the body politic constitutes itself through power over the body physical. Scheper-Hughes and Lock (1987) by considering the work of Mauss, Douglas and Foucault, developed the approach of three bodies: body physical, body social and body politic. The first is the *individual body self*, experienced through the categories of the ideas of the society, the second the *social body*, a natural symbol for thinking about relationships between society, nature, time and space and the third the *political body* that means the ways in which bodies are used to establish social and political control. The article gives valuable insights to the use of different theoretical approaches like structuralism, symbolism and phenomenology for the study of societies with stress the study of concepts of health and illness. They emphasise that mind and body are inseparable in the experience of sickness and healing and that the *mindful body* is constituted through society (1987: 31, see also Lock, 1993).

From this discussion it has become clear that the concept of the body and the person influence the way in which health and illness are experienced and that the field of medical anthropology is a valuable starting point for research on social and political features of cultures⁴. After this short introduction in some basic ideas of medical anthropology this paper concentrates on the presentation of my first impressions during fieldwork about concepts of the body, the person, health and illness among the *Desia* people. This should be understood as an initial attempt to understand the complex ideas on health and illness in Koraput District. It is a paper on a work-in-progress and further research in the area will be carried out this year.

For six months my assistant⁵ and I were living in a *Desia* village (35 houses) in the Eastern Ghats. The *Kondh* inhabitants as the dominant

group share the village with *Mali* (gardeners), one house of *Kamara* (blacksmiths), four houses of *Dombo* (clients, musicians) and a *Gouda* (herdsmen) household. All people living in Koraput District call themselves *Desia*.

According to the Indian administration the *Desia* are divided into several categories. These categories are *Scheduled Tribes* (ST), *Other Backward Classes* (OBC) and *Scheduled Castes* (SC). The category of *Scheduled Tribes* (ST) includes tribal communities such as *Kondh*, *Gadaba*, *Bhumia* and others. A second category are the *Other Backward Classes* (OBC) as *Rona* (former militia of kings), *Mali* (gardeners), *Kamara* (blacksmiths) and *Gouda* (herdsmen). The *Scheduled Castes* (SC) are represented by the *Dombo* (clients, weavers and musicians). In our opinion these groups are not to be seen separately as the administrative terms would suggest. Investigations by Pfeffer (1997) in Koraput District during the last decades have shown that these groups have a common social structure which he calls the *Koraput Complex*, that means that the same basic ideas and values exist among the above mentioned categories. Pfeffer's idea of a *Koraput Complex* also holds for the basic values of body and illness. Besides this main idea the research considers also variations among the different communities. For this reason our approach is to find out about the variations among the communities as well as to consider their similarities. Our hypothesis goes as follows: For the social body we follow the idea of a *Koraput Complex*, that means, all *Desia* people share basic ideas and values about society. The social body and the body self are strongly connected following Douglas (1973, 1978), Lock (1993) and Scheper-Hughes (1987). So the *Desia* people should also share basic ideas and values concerning the body self and the body politic.

INDIGENOUS HEALING EXPERTS

For prevention, diagnosis and treatment of illness indigenous healing experts operating in *Desia* society use a variety of methods. Most of the *Desia* people are peasants living a hard life. In the last forty years the hills were deforested.⁶ This leads to the loss of species for food or medical treatment.⁷ In addition the seasonal change of

climate during the monsoon, the cold months of the winter and the drought and heat of the summer have some impact on health conditions. The district is known for its unhealthy living conditions and a variety of illnesses. Diseases are common and the life expectancy is below the Indian average.

Indigenous healing experts are *dissari*, *gurumai*, *gunia*, *dhai*. The *pujari* cares for the prevention of illness for the whole community. It is difficult to translate these terms because there are no words in English which cover those specific duties.

Dissari and *pujari* inherit their function while the others give evidence of their abilities. *Dissari* and *pujari* are always males. Being spiritual and mental leaders they play an important role in the village policy and seasonal rites. The *dissari* performs all activities in the community which are connected with time and space in accordance with the cosmic calendar. He interprets the relation between the moon, the planets and the stars and announces the beginning of the seasons and the specific qualities of months and days. With his knowledge he determines in which season, day of the week and hour the quality of time is favourable for seasonal feasts, marriage, house-building, sowing and harvesting. Collection and treatment of medical plants in the area and the performance of healing rituals depend on those factors as well. Another duty of the *dissari* is to make medicine and to banish malevolent influences. His activities are strongly connected with the wellbeing of the single human being as well as the community.

The *pujari* worships the gods in the name of the whole community. In this aspect, he is the one who has a preventive role in society. The major festivals in the villages are carried out to satisfy the gods, lest they become malevolent and bring misfortune, calamities and diseases. *Dissari* and *pujari* inherit their function while the others have to prove their abilities. Others not necessarily inherit a role of leadership in the village. They are called *gunia*, *dhai* and *gurumai*. The tasks of *gunia* are very much the same as the tasks of *dissari*; some people even say that there is no distinction between them, but they inherit no post. In addition, *gunia* know how to send evil forces to make another person ill or to

kill, and they can heal by extracting foreign material out of the body like glass, wood or harmful water. So *gunia* have an ambivalent role as bringers of disease and healing experts. *Gurumai* are a medium of the gods and other entities.⁸ *Gurumai* can communicate directly with all the gods, deities and spirits that live in the world of the *Desia* people. They are men or women. All *gurumai* were called by gods and after a period of testing, the god settles down in the body of this person. Many *gurumai* announce a specific day of the week, when gods enter their bodies. As a medium of gods they heal and they can accept worship. *Dhai* are always women. They are known as midwives and they give massage for all sorts of body-pain. Some of them also know how to induce abortion. They collect herbs and are the ones who are most body-orientated in the treatment of illness.

The local experts know the biographies and social networks of the villagers. In addition there are healers from outside who offer their duties not knowing the social structure. Before concepts of health and illness are discussed, the category of the person is presented.

THE CATEGORY OF THE PERSON

The concepts of health and illness are directly connected to the perception of body and mind. In American or European societies there is still a strong tendency to see a division between body and mind known as Cartesian dualism. But in many other societies there is no awareness of the division between body and mind in the Cartesian sense. In the same way the category of the person can have different meanings in different societies.

In his last article the French sociologist Marcel Mauss (1938) differentiated three categories of the person⁹: first *personnage*, second *persona*, third *Christian person*. He argues that the western category of person¹⁰ is developed out of the Christian ethic where the individual has a high status. In other societies more emphasis is given to the community. In this context the three concepts demonstrate the complexity of the idea of the human being rather than an evolutionary perspective or historical development.

In this sense *personnage* is related to the

performed role, which is represented by a single human being. His or her name stands for his or her position in society as well as in rituals. The name marks the status in society, in such a way that if the name of an individual should change, the status would change, too. In other words the name depends on the status and represents the right to be in a specific position, so that the category of the person is strongly connected with the social structures. Another aspect of this idea is that a person or role is not exclusive or connected with a certain individual.

Persona is used in the sense of the Latin and the former Etruscan word for "mask." That means in the sense of ritual mask or ancestor mask. In this understanding the category of the person implies more than status and position in society. The members of society are regarded under the aspect of their rights and duties. In this sense only free townsmen are persons. Slaves could not be persons. The concept of individuality is indicated but not as differentiated as in the *Christian person*. For example children were seen as part of their parents' person. As part of themselves they have the right to own and kill them. In this context the sacrifices in the Greek tragedies or in the histories of the old testament should be seen.¹¹

The *Christian person*, especially the protestant person is defined through the idea of individuality and indivisibility. In general it means that a human being stands on the top of creation. Another point is an inner moral institution which judges behaviour. In particular it includes the endeavour of individual self-realisation and the ambition to be successful in regard to status and wealth.

THE CATEGORY OF THE PERSON IN THE WORLDVIEW OF THE DESIA PEOPLE

Following Mauss the *Desia* category of the person could be regarded as *personnage* because the single human being is part of the whole community. In addition in *Desia* cosmology the human being is only one form of existence amongst many possible others with which he or she is connected. The relationships between all these gods, deities and human beings is important. This worldview is a common feature in many commu-

nities around the world.

That implies that gods, deities, time and space exercise direct influence over the human being. These ideas have in my opinion the effect that the single person is easily influenced, strongly vulnerable and open. Subsequently the well-being of the person depends on his location and company. Therefore the members of one group do not eat with members of other groups.¹² Another example where the category of the person and the change of role or *personnage* through a *rite de passage* (van Gennep, 1909) is shown clearly is the new identity of the bride after her marriage. The *Desia* people prefer to marry their cross cousins. The bride lives together with the husband's family where she is given a new first name as well as a new surname. The new names indicate that she is now a member of another lineage. As a result her identity is completely changed. If other people speak about her they use the name of her husband in connection with the suffix *-ni*. For example the wife of Guru Pangi – the former Sobei Kiloh – is renamed Alme Pangi and is called *Guruni* (woman of Guru Pangi). If we understand the name as a symbol for a role, the new name indicates that the bride has changed her *personnage* and therefore, her identity.

In the worldview of *Desia* a human being is only one of many forms of existence in an interconnected world. Parts of the person exist before birth and parts of the person will exist after death. Only by going into detail, variations arise. In the *Kondh* community we find the idea that an elder while alive will send parts of his person into several bodies of the relatives of the alternate generation. Especially people with high reputation seem to have their person participating in many relatives. In contrast in the *Rona* community the person is reborn in another person only after death. It is discovered by the mole the newly born baby carries on the same part of the body as the deceased person. So there is a difference in the category of the person. In *Kondh* community the person looks more "dividual"¹³ than in *Rona* society. In both communities the person is reborn close to their relatives.

In accordance with this category of the person is another characteristic that of permeability and therefore vulnerability. That means in *Desia*

society in general a person is exposed to many dangers originating from other beings living next to him or her, malevolent forces bringing illness. The person is seen as an open or permeable space. It can easily be affected by external forces. Most often these forces are the well-known family gods or the village goddess, the spirits of deceased family members or the evil eye of a living relative. Often the forces who make the person ill are the forces one has relationships with like the spirits of deceased relatives or the forces who demand and receive, like the goddess of the village (*Hundi*) or the goddess of the water (*Kamini*). So the healing expert's first task of diagnosis is to find out which forces caused the illness. For this purpose an oracle with uncooked rice is carried out by the *dissari*. In case of a serious or prolonged illness a *gurumai*, a medium, goes in trance in order to contact all gods and beings directly. She or he asks them if anybody of them has caused the illness. If it is a long lasting illness, different *gurumai* may be contacted. Often people seek relief from illness among the healing experts who live in the villages of their kin. Particularly the *gurumai* living in the village of the patient's maternal uncle is visited.

INDIGENOUS CONCEPTS OF HEALTH AND ILLNESS

One of the most obvious features among health and illness concepts is the importance of influences from outside the body. This means that *Desia* people often explain illness in terms of gods, deities or human beings¹⁴. Most of the illnesses are due to external factors. They permeate the person and fill him or her with their forces or take life force out of the body. This implies that the source of illness is less seen in the individual as in social relationships in which something went wrong. In this regard it should be emphasised again that these social relationships are not only with other human beings, but with all beings. Iteanu (1990: 37) goes even further in his presentation of the concept of the person among the *Orokaiva* in Melanesia: He claims that the other so called supernatural beings and deities are part of the society and therefore also subordinated to the values that order society. The thesis could be workable within *Desia* soci-

ety too because in cases of illness rituals are carried out in which gods, deities as well as other human beings are satisfied or manipulated in order to leave the body of the ill person that means to change the relationship to the former victim.

Going back to the indigenous explanations of *Desia* people they also say that the body or the way of conduct of a person itself may be the source of illness, but they do not often mention illnesses that are caused by changes in the body itself. In the following paragraph some first findings about the indigenous causes of illness are presented.

ILLNESS OF GODS

Among the external causes many are related to the anger or malevolent aspects of gods (*mahapuru*¹⁵). There are various gods, who can effect the people. The *Desia* people say that most often the village goddess *Hundi* or *Kamini* is sad, because she does not feel treated well. Sometimes she feels that a worship (*biru*) was not performed in proper order. Also it could be that some vow (*manasik*), given to the gods, was not fulfilled. Another important point is that the purity of the gods was defiled. Sometimes people behaved against the will of the gods in general, even though they had instructed them in dreams or through the medium *gurumai*. Gods like the planet gods (*graha*) or star gods (*nakshatras*) effect the life of the people. The planet gods cause infertility, or weakness of the body because their nature is like that. They are the gods of instability. The star gods effect the life of people because along with the other gods they create the auspicious and the inauspicious times. This is seen in the sky of the night through the movement of the moon, the *grahas* and *nakshatras*. It is the task of the *dissari*, who is an astrologer and one of the spiritual leaders of the community, to find out about the good and the bad times for the people in general and for activities in special. In all cases, the gods have to be satisfied through rituals (*biru*). A general pattern of the ritual could be described as follows: The *dissari* or *pujari* draws a diagram, that symbolises a god or the universe. To remove their malevolent forces the gods are invited to come to the place of ritual from their respective places. On the place

Table 1: Concepts of health and illness among the Desya people in Koraput district, Orissa. Indigenous sources of illness, their explanation and treatment

Sources	Explanation	Feature	Treatment
mahapuru (god)	- behaviour against the will of a god - ritual (biru) not performed in proper order	- fever - chronic illness - infertility - epidemics	- ritual (biru) - fulfilment of vow (manasik) - new vow (manasik) - wearing of medicinal objects
graha (planetgod) nakshatra (stargod)	- "forgotten" vow (manasik) - mostly ketu-, rahu- or sanidosha - the connection (yoga) of moon, planetgods and stargods are not auspicious for community or individual person		
duma (spirit of deceased person)	- duma enters into the body of a living person	- feeling like mad - drowsiness - headache - pain in the chest - swelling all over the body	- ritual - punishing of the duma by beating the body with sticks - massages against the pain
dahini (ghost of women who died in labour)	- suck blood out of sleeping persons in the night - make the blood white	- next morning: bruises on the body, tiredness	- ritual (biru) to ward off dahini
gunia (sorcerer)	- sends illness entity from one person to any other by putting the entity "on the way" - creates illness entity (evil eye - drushti) for a specific person - eat organs like liver and heart	- person feels weak after crossing ways - bad dreams - person suddenly fell seriously ill - person cannot be cured	- ritual (biru) to set the illness again "on the way" - the person has to be freed from malevolent forces they often manifest themselves in items such as wood, water or glass - massage to set organs in their proper places. - ritual (biru) against evil eye
bodily changes seasonal changes	- overworking - starvation - insufficient diet - dog-bites	- body pain - exhaustion - fever - wounds - "wind" in the belly	- herbal treatment - applying a hot iron on the skin - biomedicine

of ritual offerings wait for them. Different gods and deities demand different offerings. In case of severe illness often many gods or deities are involved. The offerings are of similar kind in different *Desia* communities. Usually male animals, fruits and flowers¹⁶ are sacrificed. In almost every case the offering contains five cocks. The cocks have to be of different colour: white (*dobla*), black (*kala*), brown (*koira*), black-white (*biri*) and mixed-coloured (*citra*). Also the flowers are of different colour. They have to be white, red, orange, pink or blue respectively for the different gods. Also vegetables and leaves are donated to gods. So gods and deities are set in context with the values of the society, because

the items of sacrifice are connected with values of the society. An analysis of the colour classification of various rituals is beyond the scope of this paper. Only a short example can be given.

The colour of blood in the human body is said to be variable according to the circumstances. Blood can turn white. White blood is associated with weakness and illness, with life energy taken out of the body. Also the colour of *Rahu*¹⁷, the god of instability and nervousness, is white. For him white cocks are sacrificed. They are supposed to be laid down in front of the god without their bodies moving after sacrifice because *Rahu* causes "too much movement" as a symbol that the unhealthy movement is pacified.

For further research it will be essential to decode this ritual language in terms of symbolic classification like e.g. Turner (1967) worked on *Ndembu* colour classification and Tcherkézoff (1985) on black and white dual classification. Both authors showed the implicit hierarchies of values revealed in these classifications.

When persons are ill because of the gods, a *gurumai* in trance¹⁸ asks all the gods who made the person ill and why. The gods *Rahu* and *Sani* cause chronic illness, fever, infertility and general weakness or bad dreams. *Thakurani*¹⁹ causes epidemics. The treatment is by ritual (*biru*) and often a fulfilment of a previously given vow (*manasik*). Often also new vows (*manasik*) are given to the gods. Very important in every treatment of an illness caused by gods is also the wearing of medicinal objects like amulets (*mala*) close to the body. The medicinal objects are a core element in every ritual, because they are believed to ward off bad influences. Often these objects, called *jungeli aushado*, are herbs or minerals, feathers or other objects coming from the hills outside the village.

DUMA

The next source of illness are the spirits of the deceased persons called *duma*. *Duma* often affect relatives, in particular women and children. Among the Kondh a *duma* affects relatives after his or her death or after three years again. This happens, because goddess *Kamini* demands the *duma* to serve her for three years, before the *duma* is free from her command again. At twilight *duma* come from their place of living, the graveyard, to the houses of relatives in order to eat. Even though food is prepared for them in the holy room in every house, sometimes they might enter the body of their relatives sometimes, creating madness, severe headache, drowsiness and fever particularly at the time of twilight. For treatment in case of illness, they get incense (*dupuni*) and uncooked rice that is thrown in front of the door of the house where the *gurumai* has spoken in trance with the *duma*. In case of severe pain and madness caused by a *duma*, sometimes the body is beaten with sticks by a *gunia* and massaged by a *dhai*, who is a midwife and mas-

sage specialist. *Duma* are very dangerous, they can command a person to follow them into their world. For prevention of their malevolent forces *duma* are given little black chicken as a sacrifice to satisfy them before big events like rituals.

GUNIA AND DAHINI

A third category of external forces causing illness takes living energy out of the person, such as *dahini* (spirit of a woman who died in labour) or *gunia* (witches and sorcerers).²⁰

It is said that *dahini* like to eat bodily substances such as blood. During the night they suck the blood out of the sleeping person with a straw. The next morning the person has bruises on his or her body and feels very weak. *Desia* people say that *dahini* have turned the blood white. For prevention of *dahini* a ritual is carried out.

Female *gunia* like to move or eat the liver and the heart of a body. If she ate the organs, the person will die, if she only moved them from their proper place, a massage is given to set the organs in their proper places again. Male *gunia* send evil forces to exhaust or to kill another person. *Desia* people say that male *gunia* often send substances like wood, water or glass, also chili or fish-bones into the body of the person they want to become ill or dead. Despite of these techniques that make other people ill, *gunia* act as healer.

Gunia, *dissari* and also *gurumai* can put an illness "on the way." For this purpose they perform a ritual which removes an illness from the body of a person. For the preparation of the ritual they go on a path outside the village and draw a diagram. Then they invite the god who causes the illness to come to that place instead of being in the body of the ill person. The god is invited to stay in that place. The next person who comes along the path and does not know about the ritual or does not see it and steps over it is bound to be affected by the illness in his or her body. This can be any illness such as fever, pain, bad dreams or infertility. The concept to set a god that had caused an illness "on the way" seem to be a common concept among the *Desia* people. The idea of "illness on the way" shows similarities to concepts Vitebsky describes for the Saora

community in "Dialogues with the Dead" (1993). Also the other way round works: the practice to put something in the path that leads to the village so that malevolent gods who bring illness do not enter the village (c.f. Pati, 1998: 7).²¹ Often this practice is involved in the ritual cycle of the year. This is done particularly to ward off *Thakurani*, the goddess who brings smallpox and other epidemics.

BODILY CHANGES AND THE USE OF BIOMEDICINE²²

The last source of illness is seen in the body itself. People recounted that due to changes in the body in the course of ageing they get ill. Also if they have pain in the body due to hard work they explain it with bodily changes. For bodily changes herbal treatment is given. It could be reasonable that also biomedicine is given if the illness is not caused by a god or *gunia*. Most probably biomedicine is set in the same category of bodily treatment as herbs that are taken internally against stomach pain, ear pain or other minor discomforts. Verrier Elwin (1955: 257) considered why the tribal community he studied, accepted biomedical products so easily. If we assume that they fall into the same category as herbs that are taken internally, one could argue that the biomedical products have been tried and adapted and have a place in *Desia* medicine. The concept of adaptation is verified in other circumstances of social change: For instance the aluminium factory NALCO built fifty years ago exists in the *Desia* world as a god, who can bring illness and who demands specific offerings to be satisfied. This example shows that social changes have an effect on the worldview of the *Desia* People in so far as they are embedded in their categories. The same could be true for biomedical treatment.

CONCLUSION

In the worldview of the *Desia* people the body and the person are closely connected with other aspects of their world, like gods, *duma* and other human beings. In this aspect, one could speak of a holistic worldview. Regarding our hypothesis that all communities in the Koraput Dis-

trict share basic values this paper gave examples concerning values and ideas about person and body, health and illness of the "Koraput Complex" (Pfeffer, 1997). The interdependency of the ideas about the body of a person and of the body of the society (Douglas, 1973, 1978) including their political power (Scheper-Hughes & Lock, 1987) shows hierarchies of values among the *Desia* society. The person and the body are vulnerable to attacks from gods, *duma* and human beings. Following Iteanu (1990) the non-human beings are also incorporated in society and are ranked in relation to values. The illnesses they bring to the people are closely connected with the status of all beings. The human beings have to honour the gods, *duma* and other human beings and act according to the norms of the society. Otherwise they attack the people, illness comes and rituals have to be performed. Due to these attacks the blood for example easily changes its colour or the organs move away from their respective places in the body. In some cases the attacks lead to death. For the prevention of illness and death rituals have to be carried out to pacify malevolent gods, deities or human beings. In addition medicinal objects are worn next to the body to ward off bad influences. In this regard the human body acts as an instrument in order to re-establish the ideas and norms of society (see van Gennep, 1909). Also the other way round should be considered: how are patterns of thought reflected in the body (Hertz, 1909). In *Desia* society "too much moving" creates disorder. When the gods move around in the landscape it is also a sign that illness might come. When everything is in its respective place, there should be an equilibrium. But gods, deities, *duma*, human beings and even organs in the body move around, creating disorder. Even by walking on a path, a human being could easily pick up an illness - even without knowing it. Also the other way round works, illness can be put by a *dissari* or *gunia* "on a way," out of the ill person. Another feature of the concept of the body is that organs can be eaten when they are still inside the living person or moved around away from their proper places. That means the place of organs is not fixed in the body. Here one could draw a direct connection with concepts outside the body. Because of this it is essential to

re-establish order. In the worldview of the *Desia* people order can be re-established through rituals, where the healing expert puts the whole universe on a diagram and invites the gods to come to that place in order to pacify or manipulate the gods, deities, duma or human beings. In a holistic worldview the human beings are endangered and rescued through their whole universe. Their worldview shows the involvement of the human being in a complex structure of benevolent and malevolent beings to be satisfied. The hierarchy of values ordains the way in which "the world" is manipulated and pacified.

NOTES

1. Introductions to the history of the Anthropology of the Body are given by e.g. Csordas, 1996; Synnott, 1993; Shilling, 1993 and Turner, 1991. Here I refer mainly to Synnott, 1993.
2. See Victor Turner (1967) on the Ndembu of Zambia; Marilyn and Andrew Strathern (1971) worked on body aesthetics in New Guinea.
3. In 1992 Ch. Leslie and A. Young edited the book "Paths to Asian Medical Knowledge." In the same year M. Nichter edited "Anthropological Approaches to the Study of Ethnomedicine" (1992).
4. See e.g. Carrin, 1999.
5. I would like to thank two persons personally among many others who provided help: My assistant Pratiba Manjari Tripathy from Sambalpur University, Department of Home Science, for her invaluable help. With her dynamic personality she always keeps things together. Without her the project would not have been possible and without Professor Georg Pfeffer, Berlin, the whole project would not have been realised.
6. See Kelkar & Nathan, 1991.
7. Forty years ago the landscape was most probably similar to that of the Bhuijan, analysed by Mahapatra, 1959.
8. The different *gurumai* I have seen act in a way Claus 1979 refers to as "spirit mediumship."
9. The article is discussed in various inspiring papers in "The Category of the Person," Carrithers, Collins, Lukes, (eds.), 1985.
10. Others discussed that the category of the western person is developed out of greek philosophy earlier, particular out of the thoughts of Demokrit and Platon (see Synnott and Anthony 1993: 265; Momigliano, 1985).
11. See Bloch, 1992: 24-45.
12. See Dumont 1980 for commensality and connubium of Hindu-Society: 141ff.
13. The term refers to an article of Marriott and Inden, 1977: 227-37.
14. See Bailey, 1994; Boal, 1982; Bodding, 1986 (1925); Elwin, 1955; Mahapatra, 1959; Pati, 1998 for other regions of Orissa.
15. *Mapuru* seem to be a local variation of the Sanskrit word *mahapurusha*. In the paper the word is written as it was understood in *Desia* language.
16. Probably many agricultural fruits and flowers are regarded as male. In any case pumpkin, cucumber, and hibiscus are male.
17. *Rahu* and *Sani* are the gods of disorder, weakness, nervousity and many similar characteristics.
18. An excellent paper regarding the different theories about possession is Boddy, 1994.
19. Different names exist for Thakurani. Thakurani is used in the sense of goddess. The other names characterise her in detail, but the names go beyond the scope of the paper.
20. Witch and sorcerer is only a rough translation, since the concepts that lie behind are different, see Bailey, 1994.
21. See Macpherson, 1842: 69
22. Biomedicine refers to western allopathic medicine. The term "bio" describes that this medicine has its roots in the science of biology (Hahn and Kleinman, 1983).

REFERENCES

- Bailey, F. G. 1994. *The Witch-Hunt; or, The Triumph of Morality*. Cornell University Press: Ithaca & London.
- Benedict, R. 1968 (1935). *Patterns of Culture*. London: Routledge & Kegan Paul.
- Bloch, M. 1992. *Prey into Hunter. The politics of Religious Experience*. Cambridge: Cambridge University Press.
- Boal, B. M. 1982. *The Konds. Human Sacrifice and Religious Change*. Warminster, Wilts: Aris and Phillips Ltd.
- Bodding, P. O. 1986 (1925). *Studies in Santal Medicine and Connected Folklore*. Calcutta.
- Boddy, J. 1994. "Spirit Possession Revisited: Beyond Instrumentality," *Annual Review of Social Anthropology*, 23: 407-34.
- Carrin, M. (ed.). 1999. *Managing Distress. Possession and Therapeutic Cults in South Asia*. New Delhi: Manohar.
- Carrithers, M., S. Collins & S. Lukes (eds.). 1985. *The Category of the Person. Anthropology, Philosophy, History*. Cambridge: Cambridge University Press.
- Claus, P. 1979. "Spirit Possession and Spirit Mediumship from the Perspective of Tulu Oral Traditions," *Culture, Medicine and Psychiatry*, 3: 29-52.
- Csordas, T. 1994. *Embodiment and Experience. The Existential Ground of Culture and Self*. New York, Melbourne: Cambridge University Press.
- Douglas, M. 1978 (1966). *Purity and Danger. An Analysis*

- of the Concepts of Pollution and Taboo. London & Henley: Routledge and Kegan.
- . 1973 (1970). *Natural Symbols. Explorations in Cosmology*. London: Barrie and Jenkins.
- Dumont, L. 1980. *Homo Hierarchicus. The Caste System and its Implications*. Chicago & London: The University of Chicago Press.
- Elwin, V. 1955. *Religion of an Indian Tribe*. Bombay: Geoffrey Cumberlege, Oxford University Press.
- Foucault, M. 1973. *The Birth of the Clinic*. Trans. A. M. Sheridan Smith. London: Tavistock.
- Gennep, A. v. 1986 (1909). *Übergangsriten*. Frankfurt a. M.: Campus.
- Hahn, R. A. & A. Kleinman. 1983. "Biomedical Practice and Anthropological Theory: Frameworks and Directions," *Annual Review of Anthropology*, 12: 305-33.
- Hertz, R. 1960 (1909). *Death and the Right Hand*. Trans. R. Needham. London: Cohen and West.
- Iteanu, A. 1990. "The Concept of the Person and the Ritual System: An Orokaiva View," *Man*, (n.s.), 25: 399-418.
- Kelkar, G. and D. Nathan. 1991. *Gender and Tribe. Women, Land and Forests*. New Delhi.
- Leslie, Ch. (ed.). 1976. *Asian Medical Systems*. London: University of California Press.
- Leslie, Ch. & A. Young (eds.). 1992. *Paths to Asian Medical Knowledge*. Berkeley, Los Angeles, Oxford: University of California Press.
- Lock, M. 1993. "The Anthropology of the Body," *Annual Review of Anthropology*, 22: 133-53.
- Macpherson, S. C. 1842. *Report Upon The Khonds of the Districts of Ganjam and Cuttack*. Calcutta: G. H. Huttermann at the Bengal Military Orphan Press.
- Mahapatra, L. K. 1959. A Hill Bhuiyan Village: An Empirical Socioeconomic Study. (unpublished dissertation) Hamburg.
- Marriott, McKim. 1976. "Hindu Transactions: Diversity without Dualism," (pp. 109-42) in B. Kapferer (ed.), *Transaction and Meaning*. Philadelphia: Institute for the Studies of Human Issues.
- Mauss, M. 1979 (1935). "Body techniques," *Sociology and Psychology*, 97-123.
- . 1985 (1938). "A Category of the Human Mind: The Notion of Person; The Notion of Self," (pp. 1-25) in M. Carrithers, S. Collins & S. Lukes (eds.), *The Category of the Person. Anthropology, Philosophy, History*. Cambridge: Cambridge University Press.
- Mead, M. 1949. *Male and Female*. New York: Morrow Quill.
- . 1956 (1935). *Sex and Temperament in Three Primitive Societies*. New York: New American Library/Mentor Books.
- Momigliano, A. 1985. "Marcel Mauss and the Quest for the Person in Greek Biography and Autobiography," (pp. 83-92) in M. Carrithers, S. Collins & S. Lukes (eds.), *The Category of the Person, Anthropology, Philosophy, History*. Cambridge: Cambridge University Press.
- Nichter, M. (ed.). 1992. *Anthropological Approaches to the Study of Ethnomedicine*. Amsterdam: Gordon and Breach Publisher.
- Pati, B. 1998. "Siting the Body: Perspectives on Health and Illness in Colonial Orissa," *Social Scientist*, 28 (11-12): 3-26.
- Pfeffer, G. 1997. "The Scheduled Tribes of Middle India as a Unit: Problems of Internal and External Comparison," (pp. 3-27) G. Pfeffer & D. K. Behera (eds.), *Contemporary Society. Tribal Studies*. Vol. 1, New Delhi: Concept Publishers.
- Scheper-Hughes, N. & M. M. Lock. 1987. "The Mindful Body: A Prolegomenon to Future Work in Medical Anthropology," *Medical Anthropology Quarterly*, 1 (1): 6-41.
- Shilling, C. 1993. *The Body and Social Theory*. London, Newbury Park, New Delhi: Sage Publications.
- Strathern, M. et.al. 1971. *Self-Decoration in Mount Hagen*. Toronto: University of Toronto Press.
- Synnott, A. 1993. *The Body Social. Symbol, Self and Society*. London, New York: Routledge and Kegan.
- Tcherkézoff, S. 1985. "Black and White Dual Classification: Hierarchy and Ritual Logic in Nyamwesi Ideology," (pp. 54-67) in R. H. Barnes, D. de Coppet & R. J. Parkin (eds.), *Context and Levels: Anthropological Essays on Hierarchy*. JASO Papers Nr. 4, Oxford: Ashford Press.
- Turner, B. 1991. "Recent Developments in the Theory of the Body," (pp. 1-35n) in M. Featherstone, M. Hepworth & B. Turner (eds.), *The Body: Social Process and Cultural Theory*. London: Sage Publications.
- Turner, V. 1967. *The Forest of Symbols: Aspects of Ndembu Ritual*. Ithaca: Cornell University Press.
- Vitebsky, P. 1993. *Dialogues with the Dead. The Discussion of Mortality among the Sora of Eastern India*. Cambridge: Cambridge University Press.