

Portrait of a Himalayan Healer

We have weathered so many journeys, and so many forms of love. Would it have been the same, we ask one another, had we stayed still, in the mill with the water running under us. There is no way of knowing.

—Alastair Reid, *Whereabouts: Notes on Being a Foreigner*

READING SIGNS

It is early September 2008. The high-altitude air is tinged with autumn. I walk through the alleys of Lo Monthang, the largest settlement in northern Mustang District, Nepal. This is the time before animals have been let out to graze, before children have gone off to the new local day care,¹ to school, or to help gather dung and tend animals. I pass white-washed homes decorated with protective door hangings above the threshold: colored yarn webs holding sheep skulls, repelling nefarious spirits and gossip. I hear the muffled sounds of cymbals, bells, and the resonant drone of Tibetan Buddhist monks calling forth another day.

As I make my way through Lo Monthang, I am conscious of borders. This is Nepal's northern edge, where the Indian subcontinent is subducted under the Tibetan Plateau. Mustang lies in the Himalayan rain shadow; it is mostly high-altitude desert, abutting the Tibet Autonomous Region, China. Jomsom, the district's headquarters, is linked to Pokhara, the nearest city, by flights from a small airport and by trails. No all-season motor road connects the district to any urban center, although this reality is changing swiftly. Seasonal unpaved roads have been constructed over the past decade and are passable with tractors, jeeps, and motorcycles. Mustang is encompassed by the Annapurna Conservation Area, Nepal's largest protected area.² The district is home to approximately 14,000 individuals (2001 Nepal census), whose households and

property are partitioned into sixteen village development committees. Upper Mustang, at the center of which sits Lo Monthang, is home to Tibetan speakers, *tsampa* eaters,³ and practitioners of Buddhism and Bön, indigenous religious practices of the Tibetan plateau (Snellgrove 1981; Samuel 1993). These moral cosmologies lend structure and meaning to life here, along with what Charles Ramble (2008) calls a “civil religion,” which prescribes social norms and governs natural resource use, further defining the region’s cultural and natural landscape.

Mustang’s Kali Gandaki River and settlements situated along its banks have been a locus of trans-Himalayan trade for centuries, including the exchange of lowland grains for Tibetan salt. The people of Mustang have relied on agriculture, animal husbandry, and trade to wrest survival and even prosperity from the area for centuries. Mustang was incorporated into the nation-state of Nepal in the eighteenth century, though the area has maintained cultural, economic, and political alliances with Tibet (Ramble 2008). The most significant and enduring of these connections is the lineage of kings, descendants of western Tibetan nobility who, since the fourteenth century, have wielded influence over the region, particularly in upper Mustang, or what is known as the Kingdom of Lo (Dhungel 2002). Jigme Palbar Bista, the twenty-fifth in the lineage of Lo kings (T. *gyalpo*, N. *raja*), still lives in a looming white-washed palace at the heart of Lo Monthang. His wife, the queen (T. *gyalmo*, N. *rani*), hails from Shigatse, the second largest city in the TAR. Tibetan Resistance forces occupied Mustang from 1960 to 1974, as they waged guerrilla war against the Chinese People’s Liberation Army (Knauss 1998; McGranahan 2010). A permanent Tibetan refugee settlement has existed in southern Mustang since the 1970s.

Due in part to this sensitive political history, foreign access to upper Mustang was prohibited until 1991. Travel to the region is now allowed on a restricted basis, requiring a permit that costs \$50 per person, per day.⁴ In contrast, villages in lower Mustang are part of the Annapurna trekking circuit and have been a mainstay of Nepal tourism since the late 1970s. Lower Mustang is also more accessible to roads and regional markets. These distinctions have real-world effects with respect to economic opportunities and the provision of government services, including health care. Many from the region spend the winters engaged in small business in northern India, Pokhara, or Kathmandu. During Nepal’s decade-long (1996–2006) conflict between Maoist forces and the state’s army and armed police, Mustang remained the only district in the country that did not see active combat. Yet this conflict—along with the

chance to earn social and economic capital by working abroad—has propelled many people to leave Mustang (Craig 2002, 2004, 2011b).

On this crisp September morning, I round the corner past Thubchen, a fifteenth-century monastery that has been restored recently (Lo Bue 2011). I walk past a row of reliquaries (T. *chöten*, Skt. *stupa*) and stop before the wood-and-corrugated metal door leading to a school. A window, rimmed in black and red paint, rests above the door. Between window and door hangs a trilingual signboard. There is an arc of English—“Lo-Kunphen Traditional Herbal Medicine Clinic and School”—under which is written an approximation of the same, first in Tibetan and then in Nepali. The Tibetan reads *Lo Kunphen Mentsikhang Lobdra*. The Nepali reads *Lo Kunphen Aamchi Aaushadhyalaya Skul*. My friends and colleagues, Gyatso and Tenzin Bista, run this small institution.

Many elements of meaning are lost and gained across the two-dimensionality of this sign. As mentioned in the Introduction, the term *mentsikhang* means “house of medicine and astrology.” In its generic sense, this is a place where Sowa Rigpa is practiced. It is also the name given to major state institutions of Tibetan medicine in China and India. It becomes, simply, “clinic” in English. In Nepali *aamchi aaushadhyalaya skul* is an amalgam of language and history. The first term is a Nepali approximation of *amchi*, itself a Mongolian word long ago loaned to Tibetan, which means “healer” or “doctor.” *Aaushadhyalaya* connotes a medical establishment. It is formal, Sanskritized, the type of word most people from Mustang—though citizens of Nepal—would have trouble using in common speech. The word might conjure memories of failed School Leaving Certificate (SLC) examinations, and it would probably feel more foreign than the English word *clinic*. Finally, *skul* is a Devanagari approximation of the English term *school*.

I have passed this sign many times. This morning it stops me short. I realize that, in Nepali, there is nothing *Tibetan* about this place. In Tibetan, centuries of interconnected history between Mustang and centers of Sowa Rigpa in Lhasa, Dharamsala, and beyond are implicit in the choice of names given to this institution. In English, the deceptively simple signifier “traditional herbal medicine” supplants regionally and culturally specific understandings of medicine and health care.

Nestled between the arc of English, Tibetan, and Nepali are the words “Estd. 2056.” This is a reference to the Nepali calendar. No Gregorian or Tibetan lunar year is given, though it would have been 1999–2000 or the cusp of the Iron Dragon year of 2126, respectively. This detail on a sign—a tableau of identification, where space is limited—speaks to the

struggle for recognition and legitimacy in which Gyatso, Tenzin, and other *amchi* in Nepal have been engaged for nearly two decades. It is easy to imagine “Estd. 2056” stamped on registration papers Gyatso and Tenzin filed with district and national authorities to start this institution: a vermilion mark soaking into the thick, uneven warp and weft of Nepali *lokta* paper.

The only other element on the sign is, in a sense, its heart: a small rendering of Sangye Menla, the Medicine Buddha, his offering bowl brimming with *arura*, the fruit of the myrobalan tree and the “king of medicines.” This sign is a mosaic, an assemblage of meaning. To understand only one of these languages is to miss the negotiations of culture and identity wrapped up in my interlocutors’ efforts toward increasing the social efficacy of their practice in a new age. To see this sign simply as a handmade entrance to a marginal institution in far away place is to miss the point. Certainly this is a remote locale. But it is a place connected to regimes of value and patterns of social change that stretch out from the Himalaya and Tibetan Plateau, down the Indian subcontinent, across the world, and back again.

Filled with these thoughts about identity and belonging, language and culture, tradition and contemporary life, I walk through the door and enter the courtyard of Lo Kunphen. Several students cluster around a water spigot, brushing their teeth. Older students ready the simple dining hall for breakfast, after prayers and before classes. I greet them and head toward the back door of Lo Kunphen, which lets me out beyond Lo Monthang’s city wall, in front of Gyatso and Tenzin’s home, the lower floor of which is devoted to an herbarium and small Sowa Rigpa museum. I climb the stairs and call out a greeting. Gyatso’s familiar voice answers, inviting me in.

MANTRAS, IVS, AND MORNING TEA: 7:30 A.M.

Gyatso is seated on low cushions in the main room, drinking salt-butter tea. The brothers’ infirm mother directs morning traffic. Two generations of this family’s women perform chores as seamlessly as if playing a symphony. Gyatso’s wife loads the stove with sheep and goat dung, blows embers awake, pours water into a kettle, and sets it to boil. She then breaks grassy clumps of brick tea into this tepid water and metes out a pinch of Tibetan salt. Her eldest niece carves a slab of butter from a block with the swiftness of a potter slicing clay. She tosses it into the

tea churner. These acts mark a day's beginning here: art, routine, discipline each in its own right. This place would not run without its women.

A stack of notebooks sits on a wooden table in the corner, nestled between divans laid with Tibetan carpets. Some of these books are tea-stained and once or twice soaked through by rain. Their pages contain all manner of notations, written mostly in Tibetan, at times in Nepali, or in approximations of English, sounded out. They bespeak these doctors' networks: prescription notes, names of tourists who might become school sponsors, lists of plants and other raw materials to buy in Etum Bahal or Indra Chowk, old Kathmandu neighborhoods where herb traders hawk and bargain. Beside these notebooks are religious texts wrapped in cloth, a Tibetan-English medical dictionary, and a binder whose plastic sheaves protect stacks of receipts for school expenses. These pieces of paper must be carried to Jomsom in saddlebags, then on to Kathmandu in Chinese-made totes embossed with NGO insignia, gifts from academic conferences and conservation-development workshops these brothers have attended. In Kathmandu these recollections of rupees spent are presented to a Nepali accountant who reconciles the books and sends them to British, German, and U.S. charities that help to support the school. This institution is an experiment in bridging the gaps between Gyatso and Tenzin's father's generation and the worlds their children will inherit.

Tenzin comes into the room carrying a glass bottle of a glucose and saline solution, a splice of IV tubing, and a still sterile hypodermic needle. The glucose is Nepali made, though nearly every other commercial item in this house was manufactured in China: thermoses, blankets, solar panels that charge their satellite telephone. Tenzin moves toward his mother. This woman has been unable to walk for years and has, in a sense, been waiting to die ever since her husband passed away, in 1996. For all her despondency, she is still the center of this home, the voice to which everyone defers.

Tenzin calls his niece, a senior student at Lo Kunphen. They prop up the old woman so she can receive this IV infusion. I ask Tenzin why he has chosen to give this biomedical treatment to his mother. "It gives her strength, since she struggles to eat," he responds. The old woman seems calm until Tenzin produces the needle. Then she wriggles, moans, covers her eyes. The niece struggles to still her grandmother.

Seeing the task will not be easy, Tenzin calls for Gyatso. These sons reassure their mother. Then, deftly, Gyatso pins down her forearm as

Tenzin inserts the needle past layers of weathered mountain skin into the river of a bluish vein. Tenzin tapes the needle in place, attaches it to the tubing, and hangs the glass bottle from a hook fitted to the ceiling above the old woman's perch. All the while one of the youngest members of the extended family looks on with fascination, nestled beside her great-grandmother, enfolded in layers of wool.

This simple act—needle into vein and the slow, steady infusion of sugars, salts, and water into this old woman—reminds me there are no easy ways to parse this world of healing. Neither the terms *tradition* and *modernity* nor a presumed ideological divide between Tibetan medicine and biomedicine makes much sense here (Samuel 2006). These Buddhist *amchi* have given a biomedical anodyne with tenderness to their ailing mother. They do so in great part because empiricism has brought them here. They know it works because their mother's cheeks flush after such infusions. Just the same, a different empiricism instructs them to conduct long-life rituals and wear protection amulets. Ultimately they will face their mother's death as part of sentient existence: one karmic turning of the wheel of life.

MASTERS OF THE GIFT: 9:00 A.M.

Gyatso, Tenzin, and I move into the school's chapel (*chökhang*) and library. The phrase "someone who wears many hats" works in both English and Tibetan. This is often how I feel about these brothers. In addition to his responsibility as principal of Lo Kunphen, Tenzin is also a senior monk at Chöde Monastery, a *sakya* Tibetan Buddhist institution in Lo Monthang. Yesterday he spent half the day performing a ritual in the household of someone who had recently died. Gyatso, like his father before him, is the householder-priest (*nakpa*) and doctor to the royal family of Lo. Since 2003 he has also been the chairman of the Himalayan Amchi Association.

Yesterday, despite our plans to review clinic records and write a funding proposal, Gyatso was called to the palace to greet officials from across the border in the TAR. They had driven to Lo Monthang in a Chinese land cruiser to discuss trade relations. The "road" they drove in on is relatively new, but cross-border exchange is at once an old and an increasingly common phenomenon. Many obstacles to such exchange occurred this year, 2008. Lhasa erupted in riots in March, followed by continued unrest and repression across Tibetan areas of the PRC. The

Beijing Olympics resulted in further clampdowns. The closure of Tibet to foreign tourists meant more had ventured to upper Mustang. However, geopolitical problems also curtailed the flow of goods between this part of Nepal and the TAR, commodities on which the people of Mustang have come to depend. And so, when the Tibetan officials arrived, Gyatso was called to serve his king, as this traditional leader negotiated the terms of cross-border trade. To some in Mustang, such visits are welcome. To others, they bespeak unwanted Chinese influence in Nepali territory.

As is often the case, Gyatso was asked to read the pulse of these TAR visitors and give them medicines. I could imagine him rolling up the sleeves of a Tibetan official's dusty polyester blazer, reaching for the right hand and then the left, and, reading pulsations both deep and shallow, auguring a bile-related disorder or a chest infection. These officials, like the Tibetan constituents they represent, rely on Gyatso and Tenzin's medicines as they did their father's before them, maintaining *netsang*, relations of fictive kin and trading partners, with people across the border. Geopolitical boundaries and social ecologies do not always align. In parts of the TAR it can be difficult to access locally made Tibetan medicines such as those Gyatso make here. Some of Gyatso's Tibetan patients have been eating medicines made by his family for years, and they prefer them to the more expensive manufactured formulas trucked in from Lhasa.

Yesterday's unexpected visit put off our work on the grant proposal until this morning. Gyatso and Tenzin begin by reiterating to me their need for money. They struggle to raise sufficient funds to maintain this school of thirty to forty students, along with their "factory" and small branch clinics. Our current task is to craft a proposal for a London-based foundation that has normally supported only Tibetan refugees. On occasion it will accept applications from "Tibetan border peoples" such as those from Mustang.

We begin to work. A familiar process of translation ensues. In eloquent Tibetan, Gyatso and Tenzin speak of the decline of Sowa Rigpa across the Himalayas, the role of *amchi* in providing health care to rural populations, the importance of teaching and practicing *amchi* medicine, and then the punch line: the need for funds to develop a more advanced course in Sowa Rigpa in Nepal, to be based in the small city of Pokhara, and the need to expand their clinical practice in Mustang so senior students might have employment to keep them in their rural communities and so that local populations might have access to a complete pharmacy of Tibetan formulas, even those the brothers cannot produce themselves.

We also work on reports to current donors, an effort to translate Gyatso and Tenzin's daily work to people with good intentions but somewhat limited understanding of life in Mustang. Most donors expect this institution to become "self-sustaining." I struggle with this term. What does it mean to expect financial sustainability from people with relatively few resources when those of us with so much more still, so often, fail to achieve such a balance? What does it mean to expect cash payment for medical services from villagers who may not have rupees to spare? Or to expect *amchi* to set a fixed price for clinic visits or homemade pills, even if their ethical training demands the opposite? I question the logic, common among development projects, that views the monetization of social and medical exchanges as a measurement of success.

On the other hand, though, why will villagers eke out funds to travel to Kathmandu for a gall bladder operation or a cesarean section but see the support of local *amchi*, in cash or in kind, as something less important today than it was a generation ago?⁵ What makes them view not only biomedicine, but also medicine accessed *outside Mustang* as superior to local health care provision? What makes people nostalgic for the care they received from *amchi* who have died but wary sometimes to receive treatment from living *amchi*?

Gyatso and Tenzin's search for funding consumes enormous time and energy. It sometimes results in frustrated donors who expect something different from what the brothers can deliver or anxiety between the brothers as they struggle to pay teachers, and buy *dal* and rice. At the same time, their relative success in running Lo Kunphen can promote local gossip (*mi kha*) about whether the brothers are personally profiting from their foreign connections. Models of governance, of transparency and accountability across cultures, often clash in the spaces where a family vocation bleeds into a formal institution and then spills over into requests for "deliverables." Miscommunication can occur. Consider the following example. For the first few years that a British charity, Kids in Need of Education,⁶ supported Lo Kunphen, the brothers thought the organization's acronym was actually the name of a person, a patron whose surname was "Kinoe."

Without significant government support for Sowa Rigpa in Nepal—indeed even if such support materializes in the coming years—nongovernmental sponsorship remains paramount. In Tibetan, *jindag* means "master of the gift." These days it is a term used to describe charitable foundations, individual sponsors, private patrons, and NGOs. Gyatso and Tenzin know me as a researcher, a translator, and a friend.

But they also know me as a *jindag*. My engagement with Lo Kunphen has included raising money for the clinics and school, in part through an NGO I helped to found (www.drokpa.org). Just because I understand the nuance of an enduring Tibetan form of social relations does not make our allegiance to each other simple, though.

This morning Gyatso echoes a familiar refrain. “*Jindag* are like the wind and the rain,” he says. “They come and they go. We cannot predict from which direction. But we need them for these seeds we have planted to ripen.” It is an honest assessment, if also an organic metaphor voiced by a person who knows so well this earth of which he speaks.

We hunch over annual budgets and student examination reports. As we work I think about a conversation I had over dinner in the posh European home of one Lo Kunphen donor. I came bearing reports and pictures from the school. “Isn’t it sweet,” the donor said, “to see the students looking proper, lined up in uniform? Remember what they used to look like? Snotty-nosed ragamuffins,” he scoffed. “Now at least they are cleaner and becoming literate in their own language. But I still doubt these brothers can pull off making them all into doctors.”

As if to answer this memory of mine, Tenzin speaks about this year’s examination results. “Our students made some of the highest marks in Mustang District. Not everyone passed the SLC, but we have some very good students, especially in class 9.” Tenzin pauses. “Not everyone can become an *amchi*, though. I think if we have *ten percent amchi*”—he uses English here—“that would be a good result. Some do not have right motivation. Others do not have intellect. Others have both, but their parents or their own desires will send them down the path to foreign places.” Indeed this has already happened. The roster of current students reveals the attrition of young women and men of talent. Chime has gone to Korea. Karchung’s parents are angling for a U.S. visa.

Within the eldest cohort of Lo Kunphen students, now studying for their first formal degree, called *kanjenpa*, only one passed the state-certified examinations this year. All did well on the part of the exam covering Tibetan medical curricula, but most did not score high enough on government-mandated subjects: Nepali, mathematics, and the rest. The inclusion of these subjects in this otherwise Tibetan medical curriculum was required in order for Lo Kunphen to earn recognition of its program by the Ministry of Education. But state certification and “SLC-pass” are approbations these students care about. They epitomize an “expectation of modernity,” as Ferguson (1999) calls it. In some ways, passing the SLC is a more tangible marker of the school’s social efficacy

than a *kanjenpa* certificate, since Nepal does not officially recognize Tibetan medicine, unlike Bhutan, Mongolia, and China, where it is incorporated into state health care.

This reality points to a double bind of institutionalization. These young people are coming of age in a world where certificates and licenses will be required of them in forms not known by previous generations. An aspiring *amchi*'s program of study must reflect not only local realities and theoretical principles, but also the state's conception of what a Nepali should know. Pedagogies can clash. Students struggle with questions of relevance—*Where will we put this knowledge to use? What will we remember? How will we support our families?*—even as they are quick to answer the anthropologist cum *jindag* that they are studying to be *amchi* to bring health care to their communities, to preserve their culture, to benefit sentient beings.

Gyatso, Tenzin, and I are interrupted by a knock on the chapel door. A mother arrives with her son. He fell off a horse two days ago and appears to have fractured his left forearm. The boy is no more than ten. Rivulets of tears trickle down his dusty cheeks. Gyatso takes the boy's pulse from his ear, as is standard for children, feeling along his shoulder and arm. Tenzin prepares an herbal ointment mixed with rapeseed oil. The boy cringes. Gyatso tells him not to cry. The brothers have established several small clinics in villages surrounding Lo Monthang, but the work of healing still often occurs in their home.

"He was taking care of our sheep and goat," the boy's mother explains. "He shouldn't have been on the horse anyway. He should have been walking, collecting dung. But he never listens!" This mother seems worried and exasperated. You see, she needs his labor. The cost of hiring lowland Nepalis (T. *rongba*) to herd or bring in the barley crop remains prohibitive for this family, like many others in Lo.

"Don't worry," says Gyatso. "The boy will be fine." Tenzin hands his brother the herbal mixture and two *kathag*, white silk offering scarves. Gyatso applies the ointment to the fractured bone and then bandages the boy's arm, creating a sling out of a blessing. Tenzin wraps up some of the powdery herbal mixture in a sheaf of paper. "Mix three spoonfuls of this with rapeseed oil. Change this dressing every day," he instructs. The woman pulls out a money purse that was pinned to the inside of her blouse. She attempts to hand Gyatso several hundred rupees (\$2 to \$3), but he exits the room, indicating that cash payment is not necessary. Instead the woman leaves a cotton satchel of dried cheese with Gyatso's elder sister, who accepts this gift.

As I watch this exchange, I struggle to square differential regimes of value. How might we reconcile the moral economy of *amchi* work and this in-kind payment of locally produced food with the political economy of becoming self-sustaining and the Excel spreadsheets over which we had just been laboring?

BIRTH OF THE CLINIC: 1:00 P.M.

After the young boy with the broken arm departs, Gyatso, Tenzin, and I set aside our paperwork. The proposal must wait. Tenzin heads off to teach a lesson from the *Explanatory Tantra*, one of four books that comprise the *Gyüshi*. Gyatso and I saddle two of the family's horses and prepare to visit the clinics north of Monthang. I am given Tenzin's horse, a lithe and lovely roan reputed to be the fastest in Mustang these days. The gelding once belonged to the king, but Tenzin succeeded in buying the animal after some negotiations. "The king can take his time getting from place to place," Gyatso explains, "but the *amchi* needs to move quickly when people call. This," he said, patting the horse's rump, "is Mustang *ambulance*." True enough. Just a few days before, a man from Namdo, a village near the Tibetan border, roused Tenzin from sleep with a message that his wife was severely ill. Tenzin and the husband set off in the predawn darkness. Tenzin treated the woman, left her with medicines, and rode the three hours home, only to see another patient in a nearby settlement later that day.

On this afternoon the horse lives up to its reputation. We fly over chalky paths, past verdant sedges and wildflowers that persist after Mustang's brief, bucolic summer. We arrive midday in the village of Thinker. The clinic sits above the village in the small mud-brick building that also serves as the government school, which on this weekday morning is markedly quiet. A lowland Nepali schoolmaster wanders out in his blue tracksuit, holding a stainless steel cup of sweet tea. I introduce myself in Nepali and ask where the children are. "Oh, since now is the harvest time, *no students much coming*," he replies. Gyatso whispers in quiet Tibetan, "He's lazy. A typical government teacher. Eats his salary and does no work!"

My friend opens the clinic, revealing the rudiments of health care in upper Mustang: a wooden cabinet filled with about fifty small bottles of neatly labeled Tibetan medicines, all produced by Gyatso and Tenzin, with help from senior students; a small table and bench, two chairs; a dusty but well-used clinic logbook in which the name, gender, and age

of patients, a shorthand diagnosis, and prescriptions are recorded. This regime of accountability is as new as the clinics themselves, and not unrelated. Gyatso and Tenzin's father never kept such records as he traveled from neighbor to neighbor and received patients in his home. He had no clinic and no need for a written record of these therapeutic encounters. He was not accountable to foreign donors or to a nation-state. Now clinic records render the work of healing legible in new ways to people beyond this immediate social ecology. Reports generated from these logbooks can make the scope of *amchi* medicine visible to government functionaries—the district health officer, the Council on Technical Education and Vocational Training, the Department of Ayurveda at the Ministry of Health—and foreign donors. This information is intuitive for Gyatso and Tenzin, but not for their students. The data speak to a certain type of legitimacy upon which their reputations do not rest, but that will shape the trajectory of their pupils.

This record keeping is also part of Gyatso and Tenzin's hybrid pedagogy: part lineage-based local practice, part formalized institution. Senior students are required to spend time staffing the clinics. Logbooks hold them accountable to their own learning process and to patients because making records requires students to reflect, even briefly, on what they are diagnosing and prescribing. In addition, logbooks are windows onto which medicines are used most, what formulas need to be replenished, and what illnesses are most common in a given season. These rudimentary notes scribbled in Tibetan cursive with whatever writing implement happens to be nearby illustrate how Tibetan medicine is being made "legible" (Scott 1998) to the state and to nonstate actors like NGOs. The birth of the clinic, to invoke Michel Foucault (1973), marks the genesis of other shifts: new ways of relating to medicines and patients; new ways of experiencing the efficacy and the failures of *amchi* praxis; new ways of interpreting the science of healing.

Each year since the clinics opened, Gyatso or Tenzin have sent me copies of the logbooks or hand them to me in Kathmandu. With assistance from Lo Kunphen senior students and Dartmouth undergraduates, I have helped Gyatso and Tenzin transform these handwritten records into computer files capable of producing a new kind of authoritative knowledge: statistics. It is helpful to report that these clinics see an average of one thousand patient visits annually during the seven months their doors are open, and that this number has continued to rise each year since the clinics opened in 2004. Or that the median age of patients is forty-two, 46 percent of whom are male. Or that sandalwood- and

saffron-based medicines are some of the most popularly prescribed, even though neither of these ingredients is local or affordable. Logbook analyses reveal that women suffer more from disorders of the channels (*tsa*) and of wind (*lung*), and that men have more accidents.

And yet the more I delve into what these logbooks say, the more I notice what they do not say, or what they presume. What makes the prescription of an IV glucose drip the same general treatment category as golden needle acupuncture (*ser khab*)? Why does the arc of bile disorders peak in June? How do the graphic peaks and troughs of patients from across the border in Tibet reflect different local and regional geopolitics? Without having access to a great deal of information that exists outside the bounds of what these data reveal, the efficacy of the numbers themselves is limited. For example, I know that a Buddhist master came to Lo Monthang to give teachings in July 2007. There, graphically, is a spike in patients because his visit produced an upsurge in population; visitors from other parts of Nepal and the TAR sought out medical treatment while they camped out in Mustang, receiving teachings. Out-migration of young people for school or wage labor surfaces in the reality that the median age of patients is over forty. The lack of recorded women's diseases may speak to the ways male *amchi* have often distanced themselves from women's health. Alternately, women's disorders may be statistically hidden within other categories, such as blood and wind disorders.

There is a knock on the door. Normally this clinic is open only three days a week, staffed by a Lo Kunphen student who is also preparing for his SLC at the nearby high school. But word travels quickly when a senior *amchi* is in town. A local woman, middle-aged and moon-faced, stands at the door. She wears a woolen embroidered skullcap typical of upper Mustang's women of an older generation. She complains of sore, swollen knees. She lifts her frock and hitches up her petticoats to reveal fleshy, puckered skin, in marked contrast to her sun- and wind-beaten hands and face. Her knees are visibly inflamed. Gyatso directs the woman inside. She sits on the bench.

Contrary to what one might assume, this medical encounter does not begin with initial questions. Gyatso knows this woman and has treated her for years. Instead much of the therapeutic encounter flows forth from touch. Gyatso places his fingers along the woman's radial arteries, the gold and turquoise ring he inherited from his father glinting in the light. Pulse reading completed, he looks in her eyes and examines her tongue. Gyatso says the woman has a blood-wind disorder along with

some infection. From here, stories of suffering spill out. “These keep me awake,” she says, pointing at her knees with a look of accusation and annoyance, as if they were a barking dog. The woman asks if the disease is *nyingba*, literally “old,” or if it is *drakpo*, a word that approximates “hard” or “recalcitrant.” Gyatso reassures her that these pains can be addressed. He gives her two weeks’ worth of medications, wrapped in pages torn from an old student notebook.

“Avoid eating too much salt, but poultice your knees with *bultog*,” he says, referencing sodium bicarbonate harvested locally. This harsh, demanding place provides at once the grounds for so much suffering and also, bountifully, the possibility of antidote.

OF SKY AND SOIL: 4:00 P.M.

Our visit to the Thinker clinic complete, Gyatso makes a few house calls before we head back to Lo. Tenzin’s horse flies. I balance in the thick steel stirrups, perched above the wooden frame of a saddle, cushioned by carpets. I am bathed in sand, wind, and dust.

We slow to a walk and dismount on the far side of the river that separates the walled city of Lo Monthang from territory beyond. Gyatso leads our sweat-soaked horses across a tawny stretch of land, down the well-worn switchback to the river’s edge, where poplars grow. We are tired, horses and humans both. We could have used a rest, but our time together is limited and the day has begun to wane. Instead we head off to Lo Kunphen’s medicinal plant cultivation grounds.

The experimental cultivation of high-altitude medicinal plants is a relatively new phenomena in Nepal and has been brought forth by push-pull factors. Some species are being overharvested, in part driven by increasing demand for raw materials to service commercial production of both Ayurvedic and Tibetan formulas, as you will see in more detail later in the book; this trend has also been linked to increasing market prices for certain ingredients (Saxer 2011). Yet many such plants require specific soil conditions in which to grow. Some fail to germinate. Sometimes it becomes difficult to reconcile use values and exchange values when considering the lifecycle of a plant.

Interestingly, much of the cultivation of Tibetan medicines—at times combined with species distribution mapping and in-situ conservation—is being carried out by *amchi* on the fringes of the booming Asian medicine industries in China and India, rather than as part of a strategy for growth within these industries themselves. A lot of this work has been

funded by conservation NGOs and bilateral research or development organizations. This cultivation project in Mustang is being funded by a grant from the United Nations Global Environmental Facility Small Grants Program, for which I helped the HAA write the proposal.

As Gyatso and I head toward the cultivation plots, I consider a refrain I have heard from *amchi* in Nepal: “Without plants, we are nothing. Without plants, we have no medicine. And an *amchi* with no medicine is like a bird without wings.” This metaphor shifts at times—a car without gas, a teacher without students, a meal without salt, a trader without goods—yet the meaning remains constant. Without these medicinal plants, the future of Sowa Rigpa is jeopardized.

Even so, Sowa Rigpa maintains a long history of regional substitutions, as you will see in later chapters. Patterns of substitution can depend on local availability, the purchasing power of an *amchi*, trade partnerships, the pharmacological needs of a patient, and more. Sowa Rigpa is quite literally grounded in the distinct environments in which it is practiced, in part because this science of healing allows for pharmacological flexibility. As I stare across this “plain of aspiration,” as Lo Mon-thang translates from the Tibetan, in the rain shadow of Earth’s greatest, youngest mountains, I’m reminded of how the power of this medicine emerges, at least in part, from the soil in which it grows. And yet the bulk of ingredients used in Sowa Rigpa formulas come from tropical and subtropical environments. Cross-cultural borrowing of healing knowledge and trade in *materia medica* has always been essential to this practice.

Gyatso and I hitch our horses beside the cultivation fields. I follow my friend along the raised perimeters of barley, sweet pea, and buckwheat fields toward a large plot of land rimmed by a wall of adobe brick and stone. As we walk Gyatso explains that the cultivation project is renting this land from a local family, one of many in Lo who, for reasons related to out-migration and the prohibitive cost of hired labor, are growing less food these days. Instead they are relying on purchased staples, many of them from China.

“We pay a lease of 200,000 rupees—[approximately \$2,800] for the project for three years. We have 3,000 square meters of farmland and have not used all of it. In the future we could cultivate more,” my friend explains. “Water can be a problem, though. And we need to have a path to market. This will get easier when the road really comes to upper Mustang. At present it is difficult to make a profit when the price of transportation to Jomsom remains so high. But in the future, I think

there will be opportunities for common people to make money by growing medicinal plants instead of only peas and barley.”

My friend has had preliminary discussions with representatives of the Ayurvedic giant Dabur, whose Nepali affiliates are growing plants in lower Mustang District, as in other parts of Nepal and India.⁷ They suggested that farmers in Monthang produce *akar kara* (*Anacyclus pyrethrum*) on contract. The plant, harvested for its essential oils and used as an anti-inflammatory, stimulant, and aphrodisiac in Ayurveda, seems to grow well here. Gyatso is taken by this idea, but he is also skeptical that local farmers can produce sufficient quantity to meet Dabur’s tonnage requirements. Economies of scale advise otherwise. This *amchi* waxes eloquent about the possibility of growing a more local, though commercially viable crop called *zimbu* (*Allium przewalskianum*), a wild chive that is a staple spice in *dal*, Nepali lentils. “With *zimbu*, we would not have to worry about not producing enough. Whatever is grown we could use and sell between Jomsom and Pokhara.”

Gyatso’s economics are lucid. As he fiddles with the lock on the gate, he calculates the cost of water rights and labor per square meter of land, the current market price for a kilo of barley versus a kilo of the three species of plants they are now growing and the cost of transport by horseback to the district headquarters in Jomsom, through middlemen, and then on to other markets. The profit margin is there, but barely.

Pema, a local farmer in his late fifties, meets us at the gate. He is the head gardener of these plots, a job for which this project pays him 6,000 rupees a month (about \$80). Pema’s plaid shirt peaks out from under a thin jacket, stained by soil and grease. His cream-colored woolen cap covers thinning braided hair, kept long. A small nugget of turquoise hangs from his left ear and a thin plate of gold across one of his front teeth furnishes the aging man a dignified look. Pema leads me through his domain.

Neat rows of *manu* (*Inula racemosa*) and *chumtsa* (*Rheum palmatum*) stretch across the cultivation grounds. The *manu* grows tall, its spindly petals reaching toward the sky, broad leaves open like arms. It will be a year before the plant is ready for harvest. To wait two more years would be ideal, but this is where the plant’s trajectory and the need for project outputs diverge, and where maximum potency might be sacrificed for expedience. The next third of the plot is devoted to more vulnerable species: *honglen* (*Lagotis* spp.) and *tianku* (*Dracocephalum tanguticum*). *Tianku* huddles in small, thyme-colored bunches, close to the ground. Gyatso explains that this type of *tianku* is uniquely suited



Amchi Gyatso Bista in the medicinal plant cultivation fields, Lo Monthang, Mustang District, Nepal, 2008. © Sienna Craig

to Mustang's elements, its earth and air, water and wind. Pema says he brought *manu* seeds from the village of Geling, a day's ride south of Monthang, and he rode for a week west of this walled city to collect the *honglen* seeds. *Chumtsa*, a type of rhubarb, is sturdy and relatively easy to grow, Pema muses. Its seeds are resilient, adaptive in the high country. Gyatso admires Pema's ability to grow *honglen*, a threatened species for which the Nepali government has restricted wild collection.

"We use *honglen* in so many medicines," Gyatso says, describing its potencies and qualities. I ask about cultivation methods. Pema answers by complaining about wasted time and money that went into a workshop run by an NGO that has been cultivating a number of commercially valuable species in eastern Nepal. "They showed us how to make square plots, how to turn the soil and use compost, sand, and straw," he says. "But none of these methods worked for us here. I could have told him that they wouldn't, but we were supposed to try. I lost two months trying their techniques!" I ask more about why the methods failed. Gyatso and Pema offer an array of explanations: different soil quality, old seeds, temperatures that did not match in-situ conditions. Their answers also imply a critique of developmentalist assumptions about "replicability" (Sachs 1992). For all the good intentions that had gone into this workshop, the lofty goals of "capacity building" did not pan out.

Gyatso discusses *upal ngongbo* (*Meconopsis* spp.), the Himalayan blue poppy. "We have tried to get the plant to germinate," he says. "We collected seeds from up in the high pastures, north and west of Monthang, and planted them in our nursery. But the seeds become shy when they are taken down the mountain. Next year we will try again, also with *bongkar* [*Aconitum* spp.] and *pángtse* [*Pterocephalus hookeri*]. But this time we will make plots up in high pastures. Nomads watch sheep and yak. So why not have them watch plants?"

As I listen to Gyatso describe these plants that are difficult to cultivate, I am reminded that they are not only materials to use but also life forms to honor, things that by their very nature may defy cultivation, may resist scaling up. I also realize how much I do not know about this terra firma, the time it takes a plant to grow, the smells and tastes of medicine, at once bitter and sweet.

PRAYERS OF ASPIRATION: 8:00 P.M.

We leave the cultivation grounds. Horsetail clouds streak the sky, foretelling a day of rain. Gyatso and I walk slowly, clockwise as is expected,

around the perimeter of the wall and back toward Lo Kunphen, horses in tow. We listen to the sounds of early evening in Mustang. Pressure cookers release steam. Donkeys bray. Children play hide-and-seek around rows of *chöten*. Tired-looking men and women return from harvest. Static-filled murmurs from satellite televisions diffuse into the cool air from the dark interiors of Monthang's few taverns.

Horses unsaddled and fed, we collapse on the same divans where we began this day. The room is bustling again. Gyatso's sister is cooking dinner. Tenzin arrives after his day of ritual attendance. Their mother orders her grandniece to give us tea and popcorn. There is not much left to do except to eat and rest, and we dive into both. I reach for more popcorn. Gyatso lets his chin droop to his chest. His eyes close. I watch him sink into sleep, letting the exhaustion of this man's life give way to a certain childlike surrender.

Then Tenzin sits down beside me with his laptop, fully charged. This is the problem of working with brothers. When one is resting, the other is ready to work. We have been discussing plans for Tenzin to visit the United States to fundraise for Lo Kunphen and see relatives in New York. I arranged a similar tour for Gyatso in 2003. The brothers alternate when it comes to foreign excursions; now it is Tenzin's turn. Tenzin's computer boots up. He loads a PowerPoint presentation, a process he has mastered, even though he speaks and reads virtually no English. As I wait for images to appear, I think of all the places these brothers have been: India, China, Bhutan, the United States, Britain, Germany, Japan, France, and Russia, including a stint as the resident doctors at a clinic in Tatarstan. This is difficult to square against the fact that about half of my own fellow U.S. citizens do not own a passport. In this sense "modernity" becomes a way of being in the world that lives within people who, according to stereotype, might seem the epitome of "traditional": a middle-aged monk with dirty robes and dirty hands, here on the edge of the world. In this sense Gyatso and Tenzin's life, and lifework, illustrate Bruce Knauft's (2001) point that there are many ways of being modern in the world today. To deny the complex local-global realities of people like these *amchi* is to silence key ways that ideologies and socioeconomic influences circulate and shape contemporary life, from the power to buy things to the power to represent oneself on a national or global stage.

"Sienna *la*," Tenzin says, with excitement, "let me show you pictures from England." Tenzin spent some time in the United Kingdom earlier this year and had occasion to lecture on the history of Mustang and the future of *amchi* practice at Oxford's Oriental Institute and the Wellcome

Trust for the History of Medicine in London. He had also been blessed by an audience with His Holiness the Dalai Lama. He describes his visit, aided by the digital images he took along the way. Tenzin in front of the Bodleian's ornate dome: "This library was built in the seventeenth century," he tells me, "when Mustang was also a great place." The next picture reveals Tenzin and Mingkyi, a person you will meet in chapter 3. This woman from Tibet is a Sowa Rigpa practitioner with whom I worked in Lhasa and to whom I introduced Tenzin some years ago. They smile beside the entrance to the Pitt Rivers Museum. "Did you know there are whole suits of armor inside?" Tenzin asks. This monk is most impressed by the material history of war and conquest. He advances through a series of images with His Holiness, resting on one of them bowed before the man Tibetans can refer to, profoundly, simply, as "Presence."

I ask him about this gift of time with the Dalai Lama. "I requested his advice about our school. How to move forward, what to do about the problems we face, how to keep working toward our goals," he answers.

"What did His Holiness say?"

Tenzin's reply turns toward prayer. He chants a long, low supplication. Is this Tenzin's answer to my question or His Holiness's answer to Tenzin? Really, both are true. After the prayer Tenzin tells me the advice the Dalai Lama bestowed on him: *Keep working with a pure heart. Keep making connections around the world. Keep finding points of shared interest and collaboration with other amchi. The path forward will reveal itself through this process.* The Dalai Lama then handed Tenzin several packets of *jinden*, ritually consecrated pills made each year in Dharamsala. Medicine from blessing born. This too is efficacious practice.

SUMMARY

This chapter illustrated how Sowa Rigpa operates in a rural community, in a particular social ecological context in Nepal. In spending time with Gyatso and Tenzin, you have come to see how Tibetan medicine fits into the subsistence lifestyles of Mustangi residents, but also how these remote people and places are connected to regional and global ideas, practices, goods, services, and values. You've seen the ways that one-dimensional descriptors such as "traditional" and "modern" are inadequate to understand the realities in which today's practitioners of Sowa Rigpa live and work.

This chapter has also given you a sense of the structural parameters—economic, cultural, political, geographic—that at once constrain and make meaningful the practice of Tibetan medicine locally. You’ve seen the ways that Sowa Rigpa operates within and beyond specific nation-states, languages, and cultures, and how this complicates the question of how best to train new generations of *amchi*. You’ve also seen some of the ways that competing, conflicting, or simply nontranslatable ideas are played out between the life of a local institution and the development and maintenance of an international network of support for that institution.

In the next chapter we scale up and move locations: from a small practice in the mountains of Nepal to a large, formalized institution in Qinghai Province, China.