

## From Tibetan medicine to *amchi* medicine: the struggle for recognition

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The legally recognised indigenous medical systems of India fall under the auspices of Indian Systems of Medicine & Homeopathy (ISM). This autonomous governmental body provides economic support and infrastructure to the included medical practices, namely Ayurveda, Siddha, Unani, Yoga, Naturopathy and Homeopathy. The *amchi*'s medical system of Ladakh is therefore today officially illegal. Paradoxically, in spite of its non-inclusion in the ISM, there are governmentally assigned practitioners and other fund allocations, both by central and regional governments, for institutionalised educational structures, training workshops and medicines supply. This situation is locally understood as a 'partial recognition' but does not meet the contemporary expectations of the *amchi*. They are seeking integration within the ISM and therefore the right to claim a legal status, which is intimately correlated to a social redefinition of the medical practice.

This communication will therefore explore the process and challenges of legal recognition for what is today generally considered in India as 'a folk medicine practiced by the Himalayan scheduled tribes' or as a local 'version' of the scholastic Tibetan medicine (*gso-ba rig-pa*). It will shed light on the ways that the Ladakhi *amchi* community presents itself and negotiates its medical and social identities with the national authorities. Ethnographical accounts of several encounters between both parts and the analysis of local discourses and written documents on the subject will illustrate the position of the Ladakh minority in the nation-state.

Furthermore, this paper will reveal the political stakes and the social challenges of a medical community today fully active in its own renewal. The *amchi* of Ladakh define a space for their medicine within the Tibetan *medicines*, considering the various social, identity, political and medical expressions of *gso-ba rig-pa*. They intend to affirm the singularity of both the sociocultural and medical aspects of their practice, whilst keeping a somewhat close identification with other localisations of this medical system. This will lead us to examine the relationship of *amchi* medicine (for Ladakh) with other medicines (e.g. Tibetan-medicine-of-the-Tibetans-in-exile and Ayurveda). It will provide some insights in the construction of *amchi* medicine not only medically and institutionally but also ethnically, politically and socially.

In spite of the efforts occasionally made by single individuals, the struggle to achieve legal recognition in Ladakh shows a very rare case of action shared by the entire *amchi* community. Each individual envisions the personal benefits s/he could get from it and is not reluctant to work in coordination, although it is usually not the case for most of the other contemporary issues regarding their medical system (i.e. intellectual property rights,

*amchi* associations, development activities). A central reason is that the neo-traditional *amchi* elite sees recognition as the first priority for their medical system and stays confident in leading the contemporary negotiations in India. The *amchi* of Ladakh therefore represent not only their region but also this medical system for the *amchi* of the other Himalayan areas of India, including those of the exiled Tibetans. The struggle for recognition actually expresses a collective medical identity in Ladakh and its eventual achievement is seen to represent the crystallisation of this identity. It also gives a means to the Ladakhi *amchi* to transcend their tensions with and their complex of inferiority toward the exiled Tibetan *amchi* and to gain accordingly in social status. The Ladakhi *amchi* community tries today to achieve what the Tibetan had earlier refused. They aim to make *gso-ba rig-pa* an Indian system of medicine, despite its historical geographical emergence. Official recognition appears to be a political instrument, which could serve the *amchi* both within and outside Ladakh, and the solution to root socially Tibetan medicine in the Indian land.

The Ladakhi *amchi* have banned the term 'Tibetan Medicine' from their official correspondences and discourses in English, which is the most official and socially marked medium of communication with the national authorities. It is replaced by '*amchi* medicine' and very recently, occasionally by Sowa Rigpa (*gso-ba rig-pa*). This semantic manipulation, emphasised by the local elite, tends to reinforce both the medical and social identities of the practice in Ladakh. The anthropological exploration of the contemporary conceptual shift from Tibetan medicine to *amchi* medicine in the case of legal recognition will highlight, on a variety of levels, central issues of *gso-ba rig-pa* in Ladakh.