THE CONCEPT OF “MADNESS” AND ITS MANAGEMENT: THE KERALA SCENARIO

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SUMMARY AND CONCLUSIONS

The present study on the concept of madness and its management in the Kerala scenario is an introductory attempt to explore the origin of madness and its management in the context of Kerala. Based on the analysis of the different theoretical perspectives on the history of madness such as mainline histories put forward by Alexander, Selensnick, Screech and Zilboorg; the assumptions of anti-psychiatric movement by Szasz and Historiography of Foucault and Kuhn, the present research take a social constructivist ontological and epistemological stand to approach the discourse of madness in Kerala. The social constructivist paradigm takes a critical stand towards ‘taken for granted’ knowledge and understanding. It assumes that our knowledge of the world both historically and culturally specific. This perspective assumes that the concept and knowledge about madness is created, sustained and renewed by the social processes. Social constructivists followed relativist ontology that emphasize on the local and specific co-constructed realities.

To conceptualise the major research concern the present study reviewed studies related to madness and related concepts. The review of the related studies are classified under 1) studies
related to indigenous healing traditions 2) culture and madness and 3) colonization and psychiatry. Based on the review of related literature, discussion with the experts and field observation the objectives of the present study was framed.

5.1 The major research concern

To explore and analyze the concept of madness and its management in the cultural context of Kerala

5.2 Objectives

The following objectives are formulated for the present study.

1) To explore the concept of madness in the cultural context of Kerala.

2) To study the status of indigenous healing practices for managing madness in Kerala

3) To explore the emergence, establishment and practice of Psychiatry in nineteenth and early twentieth centuries in Kerala

Based on the major research concern and objectives, the researcher approached the discourse of madness in the context of Kerala. The present study approaches these questions using qualitative research methods because of its interdisciplinary and exploratory nature. The sampling technique followed is theoretical sampling suggested by Glaser and Straus in 1967. It is a process of data collection for generating theory where by the analyst collect
codes and analyses the data then decides what to collect next and where to find them in order to develop his/her theory as it emerges.

The present research also makes use of various historical texts, dictionaries, and archival documents as part of the enquiry. So the data consists of both the data derived from interviews and texts. The methods of data collection followed for the present study was mainly interviews and collection of documents. Five types of documents were collected for the study primarily namely, 1) archival documents, 2) published works, 3) dictionaries 4) fairy tales and 5) notes of the practitioners. The collected data were analysed using textual and thematic analysis.

5.3 Major Findings

As an exploratory study based on the analysis three broad areas, the present research formulates some hypotheses and few findings which are summarized below:

5.3.1 Concept of madness

- The meaning and nature of madness in the context of Kerala is tied up with the concept of reason-unreason, wandering existence and the perennial controversy over the characteristics and indicators of genius and madness.
- The medical meaning of madness is mixed with classic Ayurvedic tradition and indigenous healing traditions.
• the evolution of the concept of madness has greatly been influenced by Aryanisation, Tamil and Sanskrit languages and native understanding.

• The native understandings do not clearly demarcate or define the fault-line between normality, abnormality and divinity.

• Madness has a different literary meaning in Malayalam, which includes insanity as an emotional charged state of mind resulting out of the loss of loved ones, unrequited love or unfulfilled wishes.

• The belief and worship of metaphysical elements play an important role in constructing the meaning of madness in Kerala. These beliefs constitute a key component in the treatment of madness traditionally prevailed here.

5.3.2 Madness: Indigenous healing traditions in Kerala

• Kerala has a well-organized traditional system of managing mental illness, which is a combination of medicine and mathravada.

• Three forms of traditional healing practices co-exist in Kerala to manage mental aberrations, namely, family-based practices, religious center-based practices and ritual art forms.

• Mathravada, one of the unique management methods for madness had its origin from the methods practiced by the
aboriginal communities of Kerala. At some point in history the *manthravada* tradition of managing mental branched out in to Brahminic and non-brahminic schools.

- Apart from these two streams, the State also have a strong Muslim tradition to deal with mental illness.

- The indigenous management system of healing mental illness is a teamwork, that includes Mathravadi, Vaidyan and Jyotsan and a good part of it is community based practices.

- The concept of mother goddess is predominant in the indigenous healing tradition to manage madness.

- A majority of the ‘mental’ patients visiting the indigenous healing centers in Kerala are having mild mental problems in contrast with the past.

- The traditional healing practices perceive the causes of madness as having physical, social and metaphysical moorings.

- Faith is a key element in dealing with madness in the religious center based healing practices in Kerala. This element of faith is reflected in the causes and management of possession.
The healing practices in religious centers act as a preventive mechanism to deal with madness.

There are different art forms prevail in Kerala, which could manage madness in one way or another.

Theyyam, one of the popular ritual art forms in Malabar has significant power to manage mental illness and to influence the social and community life.

It provides a platform to settle many of the conflicts and issues among people and communities by reducing incidence domestic/social violence and tensions and acts as a divine intervention to solve differences or dictate solutions and even cure madness/reduce the causes that might lead to mental unrest at personal level.

By presenting the story of madness through Theyyam plots, they exemplify the social causes of madness, therefore setting a social lesson.

5.3.3 The emergence, establishment and practice of Psychiatry in nineteenth and early twentieth centuries in Kerala

The psychiatric asylums were originated in Kerala as a product and process of colonial modernity.

The number of admissions in the lunatic asylums was less in nineteenth and early phases of twentieth centuries in Kerala,
the reasons of which can be found in the cultural resistance of the natives towards a new knowledge of madness that had just been introduced by Psychiatry.

- The psychiatric asylum practise gradually marginalised the local and indigenous wisdom to manage madness and introduced a new meaning to madness.

- The number of male patients had always outweighed the number of female patients in the Lunatic Asylums in Calicut during nineteenth and early phases of twentieth centuries.

- The types of insanity found in Calicut Lunatic Asylums during nineteenth and early phases of twentieth centuries were Mania, Dementia, Melancholia, Idiocy, Toxic Insanity, Morbid changes in brain, Delusional insanity, Epileptic insanity and consecutive insanity from fevers and visceral inflammation.

- Majority of the types of insanity reported in Calicut Lunatic Asylums in nineteenth and early phases of twentieth centuries was found to be Mania, Dementia and Melancholia.

- The causes of insanity were classified into physical, moral and unknown. The physical causes are further classified as congenital, spirit drinking and Ganja and Bahng. Moral causes were grief, loss of property, fear and gambling.

- It is reported that the causes for the insanity were ‘unknown’ in majority of the cases treated in Calicut Lunatic Asylums.
• The physical causes were predominant in comparison to moral causes, which show the influence of organic causes in the asylum practice in Calicut Lunatic Asylums during nineteenth and early twentieth century in Kerala.

• The treatment practice in Lunatic Asylums in Kerala is mixed with medicine and moral management.

• The mortality rate was high in the Lunatic Asylum in Calicut during nineteenth and early phases of twentieth centuries.

• The majority of patients treated in the Lunatic Asylum in Calicut during nineteenth and early of twentieth century were within the age group of 20-40 years.

• The asylum reports show that the patients were classified according to their religion.

• There was discrimination between European and native attendants.

• There was well-structured rules and regulations implemented by the Colonial Government in the asylums which include Indian Lunacy Act and Cochin Lunacy Act. These Acts provided power to Psychiatrists and administrators to interfere in the matters of lunatics.
5.4 Implication of the study

Through the analysis of the discourse of madness in the context of Kerala the present study envisages interdisciplinary and cultural implications. The documentation and analysis of historical documents related to madness would lead to new cultural context and heritage theorizations of madness in to the dominant discourse on mental health. As an introductory attempt, this research would provide a new possibility to the researchers to approach the concept, causes and classification of madness placing them in the cultural context and heritage of Kerala. This study also facilitates a search for finding the cultural symbols and images by integrating language, history and psychology. Studying the asylum practices in Kerala would open up a new possibility for studying the power relations between Psychiatry and indigenous knowledge. Through the exploration of the historical root of Psychiatry in Kerala the study attempts to reread the issues and crisis faced by the present mental health practices. The study unwrap the connection between insanity and law in the colonial Kerala. This needs to be further studied in connection with legality, criminality and madness. Finally, the study reassures the fact that the conceptualization and management of madness cannot be separated from its cultural, historical and social roots.