“Hereditary, physiological and psycho cultural factors all play roles in explaining mental illness. The goal of research is not to assign dominance to anyone, but to fathoms their interlocking relationship” (Foster and Anderson; 1978:100). This is an ethnographic investigation focused on the understanding of the whole complex of culture, behavior, behavioral disorders in the context of mental illness in accordance with what Foster and Anderson have pointed out. The current research enables to know the ways and means of handling the psychic problems, faced by the ‘Karevakkalu’ tribe.

The ‘Karevakkalu’ is an agricultural tribe, living in both clustered and scattered settlements of Uttara Kannada district of Karnataka state in southern part of India. The other two districts of the state in which a few ‘Karevakkalu keri’ (settlements) are found are Shimogga and Dakshina Kannanda districts.

In their day to day life, the ‘Karevakkalu’ spend most of the time in earning their livelihood. Most of the ‘Karevakkalu’ families are living in an insufficient economic-condition. They own small pieces of land in which they grow paddy, areca nuts as main crops and also coconut, banana, mango, sugarcane, cardamom, pepper, vanilla, and vegetables as sub crops.

The primary occupation of the ‘Karevakkalu’ is agriculture, and agriculture-labor. The secondary occupations are collection of minor forest products (such as seeds, leaves, fruits and nuts) driving, tailoring. Only a
handful of people possess formal education up to college, among whom a few are working as primary-school and middle-school teachers.

The ‘Karevakkalu’ are working mainly in the lands of upper caste ‘brahmanru’ as agri-laborers. They are placed in the middle space of caste hierarchy in between the upper-caste ‘brahmanru’ and lower-caste ‘harijanru’. Their interaction with other communities’ is found to be increasing from last 3-4 decades due to increasing communication facilities, literacy level, biomedical health care through primary health centers and other development programmes, provided by the government. The ‘Karevakkalu’ are known as humble, shy and peace loving people in their ‘grama’(locality).

The ‘Karevakkalu’ lead their routine life on the basis of a set of beliefs and practices on ‘nema’. ‘Nema’ is about the ‘Karevakkalu – right conduct’. The purpose of following the ‘nema’ (nemadhindha nadkaladhu’) is to achieve ‘total well-being’ of one’s family (‘mane’) and also that of the settlement (‘keri’). The condition of total wellbeing (‘chalodhagadhu’) includes several positive aspects of human life such as good-health (‘hushaariradhu’) of people and cattle, plenty of rainfall and crops (‘male-bele’), marriage and childbirth in case of each individual and each family) at proper age and time. When a person is alive till he/she begets grand children and they are also growing, and getting married. Such an individual is considered to have reached the complete fulfillment of his/her life.

All natural factors (that could add to the peaceful life of human kind) such as sun, rain, crops, fertility and good health of human beings and cattle
and long life are considered as the blessings of benevolent supernatural beings (‘dhaiva’ and ‘dhevru’). The ‘Karevakkalu’ also say that, both ‘dhaiva’ and ‘dhevru’ protect the whole ‘Karevakkalu’ community. And the most significant factor that is believed to be expected by ‘dhaiva’ and ‘dhevru’ is ‘nemadhinda nedkaladhu’. This refers to the following ethics and traditional rules of the ‘Karevakkalu’- culture. There is a significant popular saying that provides the philosophy of perfect life viz. ‘Sariyaagi nadkandre soodidh hoovu baadoodhilla’. The meaning is: ‘If the individual is right in his conduct, even the flowers applied on his/her head won’t fade; This finally means the person will be perfectly well. An outstanding feature of the ‘Karevakkalu’-culture is found in the peoples’ feeling of ‘oneness’ with ‘ali-bali’. (‘ali-bali’ refers our people) togetherness with the kinsmen, and helping to both insiders and outsiders of their community. Above all, the quality of thinking that they form a small part of the bigger world ‘bhoomi’ that the ‘other’ particles of ‘bhoomi’ are supposed to be respected, and their goal or struggling for total wellbeing constitutes the thecordual value among the ‘Karevakkalu’ community.

The ‘Karevakkalu’ are known for their strong faith in ‘nota’ (shamanism) and supernatural beings (‘dhaiva’, ‘keelu’and ‘dhevru’). The day to day life of the ‘Karevakkalu’ runs, through a set of beliefs and practices (‘nema’) that always convey the harmonious and peaceful co-existence of the agricultural tribe with the surrounding environment. The ‘nema’ is reflected prominently on several occasions particularly life-cycle rituals (‘saastra’) and annual festival (‘habba’).
The 'Karevakkalu' concept of life and life after death, religion, soul and taboo are packed in a complex concept called 'Gaaion to further research. The study of the structure and function of 'Gaama' itself is fit to be a direct. The 'Gaama' indicates a single concept of local deity but, it includes a cluster of 6 to 12 deities and spirits ('dhevru' and 'dhaiva'). The 'Gaama' is believed as a single power that protects the whole of 'Karevakkalu' community throughout the year. It is significant to note that the 'Gaama' exhibits certain amount of flexibility regarding the inclusion of other spirits and deities. Generally, two to three spirits are differenced from a 'Karevakkalu-Gaama' to the other. Because, the popular and other powerful local spirits and deities ('dhaiva' and 'dhevru') of other castes and tribes are also accepted as a part of 'Gaama'. This feature of 'Gaama' exhibits a prominent value of the 'Karevakkalu' culture. The 'Karevakkalu' incorporate the values, beliefs of other communities when they are found to be helping the existence and welfare of their own community, without disturbing the core structure of 'Karevakkalu' culture. The concept of health, illness and traditional healing system among the 'Karevakkalu' developed and operate on this phase.

'Gaama' is believed to be a force that protects the whole 'Karevakkalu' community from evil and leads towards total wellbeing. Therefore, 'Gaama' worship is the primary preventive measure towards all kind of illness, and it is the basic measure towards achieving total wellbeing. There is another significant fact that, the immigrant 'Karevakkalu' families offer their worships to both original 'Gaama' and current 'Gaama'. They transmit these worships
and offerings through rivers ('hole') with a hope that the mother-water ('gangamma') will flow towards their original 'gamma' and thus worship their original' Gama' from a distance. This practice reveals several significant aspects of the cultural traits of the 'Karevakkalu' tribe; This is how the 'Karevakkalu' form a 'ritualistic-bridge' between present and past, between original and alternative settlements; and, also between real world and supernatural world.

Along with the regular worships and offerings to 'Gaama' the 'Karevakkalu' conduct life-cycle rituals 'saastra' such as birth ceremony ('hesaridadhu') hair-cutting ceremony ('chavala') to boys, ceremony of first menstrual period ('hoo mudsadhu') to girls, marriage ceremony ('madhuve') and also death ceremony ('dhina kaarya –thithi'). The intenstion of conducting 'saastra' is to pray for the wellbeing (both in the lifetime and after death) of each individual born in the 'Karevakkalu' tribe.

The 'Karevakkalu' believe strongly in the life after death. Ones' life becomes 'complete' when the individual-desires ('aashe') of a person are fulfilled within his /her life time. When the person gets enough blessings from all benevolent spirits and deities, then only the person could fulfill his/her 'aashe' and lead a successful life. A 'complete' life is identified through the kind of death: when a person meets good death 'aashe theeri satre' ('aashe' means desire, 'theeri' means fulfill, 'satre' means die), he/she becomes a benevolent spirit. These spirits could be categorized as ancestral-spirits called 'thalegaledhavaru'; they protect the people of their family being a benevolent
spirit. Whereas, when a person meets bad death ‘aashe theeradhe satre’ (‘aashe theeradhe’ means desires not fulfilled, ’satre’ means die) due to accident, murder, suicide or long-term illness that leads to death of the person in young age, he/she will become an evil soul (‘heena kole’). ‘Heena kole’ could cause several troubles (‘thondre, kaata’) to the concerned family members and also to the whole settlements; these troubles are targeted especially towards sudden, severe illness which may result in the death of the person. The other troubles caused by ‘heena kole’ are as follows:a. Failure in new venture (‘entha maadiroo kai hathhadilla’) b. economic crises (‘dhuddina thondre’). Due to these conditions, the ‘heena kole’ is considered by the people as a great risk and threat to the ‘Karevakkalu’ family in particular and also to the whole ‘Keri’ (if not tackled at the family level with the help of shamanic rituals). Therefore, the ‘Karevakkalu’ always wish and put effort (through shamanic rituals on death ceremony) for good death in order to keep their family and neighbors in a well-protected condition. But, there are several instances of bad death that makes the ‘Karevakkalu’ to get tensed about the possible ‘heenakole-kaata’. Therefore, the family members and close relatives of died person seek help from shaman called ‘notagara’, in order to avoid the ‘kole’ (soul) towards becoming a ‘heena kole’, and to keep the ‘kole’ in contented state. They perform a set of rituals on the death ceremony (‘dhina kaarya’, or hanneradu).

Along with these conditions, there are possibilities of a person unknowingly breaking some ‘nema’ (ritual obligation), especially at the time of performing regular worships (‘pooje’), annual festivals and life cycle rituals. These faults
are another cause that could lead to the wrath of concerned ‘dhevru’ (deity) and ‘dhaiva’ (benevolent spirits) which might result in sudden-severe illness. In this case, altered state of consciousness, other behavioral disorders or mental illness are frequently found risks. Even wandering outside the house at inauspicious time (heavy sunshine hours called ‘oribisoloththu’), inauspicious places (grave yard ‘sodle’ or ‘sudugadu’), crossing the invisible path of evil-spirits ‘suli’ are also found to be a cause for sudden-sever illness (both mental and physical). Therefore, in their day to day life, the ‘Karevakkalu’ are found to be often scared of trouble by supernatural beings. The suspect of trouble by evil spirits is generally found in most cases of sudden sickness especially at the initial phase of sickness and also in case of long-term physical/mental illness that aren’t responding to the naturalistic treatment; at the second or third phase of (treatment) the long-term illness.

Therefore, the ‘Karevakkalu’ frequently undergo a fearful condition ‘hedharadhu’ which is considered as a short term sickness that lasts for 3-6 days. ‘Hedharadhu’ is a behavioral disorder, considered as a state of risk by the people; it occurs in both day to day life and ill health condition of the ‘Karevakkalu’. And it affects negatively at all situations. The risk of ‘hedharadhu’ is originated in the fear of supernatural beings. It is also a predominant symptom in most of the behavioral disorders and mental illness found among the ‘Karevakkalu’. The ‘Karevakkalu’ also observed that, fear (‘hedharadhu’ or ‘pukka’) is one of the mainly found feature of the ‘Karevakkalu’.
The ‘Karevakkalu’ are an agricultural tribe, living in relatively isolation, in deep forest and scattered settlements. They are subjected to sudden unforeseen risks such as forest-fires, heavy rain, lightening, attacks by animals, losing their way in forest, sudden death by unknown diseases. Though they follow agriculture, their dependency is more on forest. Due to lack of transport facility, they walk long distances, for their basic requirements. And hence they often face fears. That is the reason why they encounter ‘hedharadhu’ frequently. The people make repeated attempt to pin down the exact supernatural being responsible for the problem.

The ethno psychiatry among the ‘Karevakkalu’ could be better summarized in these four sectors viz., a) Etiology of mental illness, b) symptoms of mental illness, c) treatment of mentally ill and d) materia medica involved in treating the mentally ill.

The ‘Karevakkalu’ concept of world provides the basic ideas to the etiology of behavioral disorders and mental illness. The ‘Karevakkalu’ perceive world (‘bhoomi’) as headed by several sacred and benevolent supernatural beings (‘dhevru’ and ‘dhaiva’) respectively that are protecting the natural beings viz., mankind (‘Jana’), animals (‘dhana-kara’), plants (‘gida-mara’). The blessings of ‘dhaiva’ (spirits) and ‘dhevru’ (deities) are believed to be essential to the well-being of all living beings. It is significant fact that the ‘Karevakkalu’ perceive their surrounding environment as a space filled with several spirits and deities (‘dhaiva’ and ‘dhevru’). For instance Cow (‘govu’), Snake (‘naagaru’), Tiger (‘hulidevru’), Water (‘gangamma’), Stones in
particular place ('maasti', beerlu, chaudi') crops 'bale' (as Goddess Laxmi) are worshipped with a belief that they are benevolent spirits and deities. ( 'dhaiva and dhevru'). Along with these benevolent-supernatural beings, the people says, there are some wicked selfish and cruel supernatural beings called 'keelu', that are considered as malevolent by nature. The 'Keelu' often do harm the 'Karevakkalu' (and also to their cattle) by creating several trouble. The purpose is to satisfy self-desires. The term 'Keelu' includes all kind of malevolent supernatural beings viz., evil-soul ('heena-kole') evil-spirits ('raavu') and ghosts ('Kaad pishaathi', sodle bhootha' and 'dhaiva')

The 'Karevakkalu' place benevolent spirits (dhaiva') and sacred deities ('dhevru') at the supreme position in their concept of world ('boomi'). And they believe that, 'Keelu' is at the secondary level. In the third level all natural beings human beings, animals and plants are placed. A contented ('kusi, preethi') state of supernatural being is must to the peaceful life of human beings and also towards maintaining the good health of each member of 'Karevakkalu' community. The people believe that, both physical illness and mental illness occurs to the people if there is an imbalance between the natural and supernatural components of 'boomi'.

**Concept of Health and Illness**

The 'Karevakkalu' follow pluralistic medicine viz.

a) Home remedies ('mane madhdhu'),

b) Herbal medicine ('halli aushadh'),

c) Shamanic healing ('nota') or faith healing ('saastra') and
d) Biomedicine ('daaetar-aushadhi')

These four medicinal systems could be consolidated (for better analysis) on the basis of their features viz.

a) Traditional medicine ('madhlindha bandhidhu or nam padhdhathi') and

b) Modern medicine ('ieegina kaaladhdu')

The first three system viz. 'mane madhdhu', 'halli/gaavti aushadhi' and 'nota' are traditional medicinal systems.

The 'Karevakkalu' describe healthy status as 'aaramiroodhu' or 'hushaariroodhu'. The term indicates a complete fit status of any person physically and mentally. When a person is found to be completely normal with one's day-to-day activities and interactions with the fellow beings, he is considered as a healthy person. Whereas, a condition of ill health is spelt as 'hushaar thappoodhu', 'sheekige biladhu,' 'aaramildhidhre'. The condition of 'aaram' (healthy) of a 'Karevakkalu' person is considered as a blessed state. It is dependent on a state of balance between natural and supernatural beings of 'boomi'. Therefore, whenever, the state of 'aaram' of a 'karevakkalu'-individual is disturbed, the close relatives observe the patient sick-person in order to find out the etiology of his/her ill-health. Most of the etiological observations and decisions among the 'Karevakkalu' are done by the elder Karevakkalu of patient's family, at the initial phase of the sickness. And then it moves to the 'Karevakkalu' 'notagara' or notagara of other communities 'notagara' (shaman),'bhatru' ('brahmanru' caste priest/astrologer) and 'daactaru' (biomedical/ayurvedic doctor).
When a disease affects and is dominated by symptoms of physical sufferings, the ‘Karevakkalu’ understand the disease as naturalistic disease (‘sheeku-sankta’) that is caused by natural ailments such as rain, winter, indigestion. Hence, the treatment begins with the use of ‘mane maddhu’ (home remedies) followed by ‘halli/naati/gaavti oushadhi’ (traditional herbal medicine).

If the sickness symptoms (‘thraasu’) are found to be related to behavioral change and mental disturbances (such as talking irrelevant, ‘halubadhu’ expressing shock ‘bechchi beeludhu’, fear ‘hedharadhu’) the people look at the sickness as personalistic i.e. the disease is caused due to supernatural intervention (‘dhaivadha thondre’, ‘keelu-geelu kaata’). It is significant to note that, when any ‘sheeku-sankta’ (physical illness) is not responding to the naturalistic medicine after receiving at least two courses (which covers around fifteen days), the ‘Karevakkalu’ predict as ‘sheeku’, a personalistic illness called ‘dhaivadha thondre’. In these cases, the patient is taken to shamanic healing (‘nota’) towards a ‘Karevakkalu’-shaman called as ‘notagara’ or ‘gaadiga’, get right consultation and treatment (‘parihaara’).

The ‘Karevakkalu’ psychiatry starts with the way of their understanding of ‘normality’ and also recognizing the state of ‘abnormality’. The Karevakkalu perceive ‘abnormality’ of a person as a risk as this would lead to several mental illnesses. The ‘Karevakkalu’ identify abnormality (‘sama illa’, ‘mandha’ ‘mabbu’) by a set of sudden behavioral change. These changes are mainly expressed through gloominess (thand hoddha), fear (‘hedharadhu’).
shock (‘bechchi beeladhu’). Abnormality is also looked upon with great anxiety as it is believed to be a supernaturally caused problem. Therefore, when a state of abnormality persists for more than 7 to 10 days, it is categorized among the personalistic illnesses. Like any personalistic illness (‘dhaivadha thondre, keelu-geelu kaata’), abnormality is also perceived with great anxiety because, (unlike naturalistic diseases) there is a chance of the patient meeting sudden death in case of personalistic illness; even though the patient is alive, the ‘Karevakkalu’ people are found to be much anxious and helpless regarding the treatment of personalistic illness. In case of abnormality caused by psychic problems, the ‘Karevakkalu’ attribute its origine to the following etiological statements viz.,

a) Wrath of ‘dhaiva’ (spirits) or ‘dhevru’ (deities) and

b) When a person crosses or disturb the invisible path (‘suli’ or ‘nede’) of supernatural beings unknowingly and

c) When the person is suffering a ‘keelu’ or ‘heena kole’ or ‘pishaathi’ in its worst state such as hungry state, (‘hashuvu’), desire to trouble (‘peede’, ‘kaata’) or to take revenge on particular individual or family by possessing them.

d) The effect of ‘maati’ (witchcraft). The people believe that ‘maati’ leads to of severe long-term illness especially psychic problems such as ‘maansika’ or ‘mallu’ (madness). And the fifth etiology of behavioral disorders especially ‘hedharadhu’ (fear) is

e) the effect of evil eye called ‘dhrashti’.

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Along with these etiological aspects, the ‘Karevakkalu’ recognize nine personalistic illness which involves several psychic problems viz. fever with behavioral change, fear of supernatural beings, loss of consciousness for a moment, effect of evil eye, children’s illness, madness, attack by a malevolent spirit called raavu’, trouble by evil spirits and trouble by evil soul.

The method of diagnosis of psychic problems and illnesses among ‘Karevakkalu’ provide an appropriate base to the study of their ethno medical and ethnopsychiatric system as well as the entire culture. The complex processes of diagnosis constitutes the unique feature of the ‘Karevakkalu’ culture. A close inter-linkage exists among the mental illness/personalistic illness, their symptoms and treatment measures. Many a time, one illness forms the symptom of the other illness and also one illness becomes the cause of the other illness. ‘Hedharadhu’, ‘raavu hidiyadhu’ are illnesses and also they are symptoms to the complex illnesses viz., ‘adda thondre’ and ‘heena kole thondre’. The illness ‘mallu hidiyadhu’ is one of the symptoms of ‘adda thondre’ as well as ‘heena kole thondre’. The sickness ‘hedharadhu’ is a symptom of ‘heena kole thondre’, ‘balagraha’ and also a cause of ‘adda thondre’, ‘smrithi thappadhu’ and ‘mallu hidiyadhu’.

Diagram U. shows the gist of ‘Karevakkalu’ Ethnopsychiatry. The ‘Karevakkalu’ Ethnopsychiatry could be explained through four blocks viz. Options, Channels, Availability and affordability. The people have both options viz. traditional healing and biomedicine. The channels of availing the traditional healings are the people with in the culture. Whereas, it is the doctors
and other personnel, who form the channels towards availing the biomedicine. The third and forth blocks shows the availability and affordability of ethnopsychiatric services, among the ‘Karevakkalu’ families. Traditional healing, both ‘nota’ and ‘sastra’ are available and affordable to all of the ‘Karevakkalu’ families. The reason is, the information about ‘nota’ and ‘sastra’ is provided by the people of own culture, on mutual basis; and reward for the healing service is decided by the clients, in turn it becomes more affordable to the whole ‘Karevakkalu’ community, irrespective of their economic conditions. Whereas, biomedicine is more available to the families who interact more with the other communities people as well as settlements of better road connectivity, bus transportation. Biomedicine is less affordable to most families as they are living in insufficient economy.

Diagram-U

Ethnopsychiatry of the ‘Karevakkalu’

‘Karevakkalu’ Ethnopsychiatry

Options

- Traditional Healing
  - “Nota”
  - “Sastra”

Channels

- Family members
- Neighbors
- Kinsmen
- Friends

Availablity

- To all families

Affordability

- To the family of better economic condition
- Better interaction with other communities
According to ‘Karevakkalu’, as regarding treatment of psychic illness, only some illnesses are said to be having preventive measures. Because, occurrence of most of the psychic illnesses are believed to be accidental and therefore, they are unavoidable. The ‘Karevakkalu’ think that, most of the psychic problems are out of bounds of human knowledge and control. That is the only reason why only curative practices are followed in case of most of the psychic illnesses. Though curative practices are be highly flexible and generalized, they are targeted towards a specific curing effect, with in a specific period called ‘gadu’ are advisable only at specific situations (by the expert healer) depending on the patient’s condition and analysis of ‘notagara’. The pattern of treatment moves from simple to complex. For instance, ‘haana suliyadhu’, drashti thegiyadhu’, applying ‘bandara or basma’ are found to be the primary and simple curative practices that are used in most cases of illness. Tying the ‘anthra’, ’cheetu’ or ‘dhaara’ are found to be the next level curative practices. Whereas, conducting specific rituals such as ‘bali’, ‘ede’, ‘homa’, ’japa’, ’santhi’ are considered to be the most powerful curative practices advised by ‘notagara’ or ‘bhatru’, especially when all other measures are found ineffective. And the fourth one viz. ‘daactar aushadhi’/ ‘aaspatre aushadhi’ comes under biomedical system. The ‘Karevakkalu’ are depended more on traditional medicine as the notions of personalistic etiology dominate over naturalistic etiology of ill health. In case of both physical and mental illnesses, the ‘Karevakkalu’ start the process of health seeking by home remedies, called ‘mane madhdhu’. At the initial phase, the patients of physical illness are taken
for naturalistic treatments; whereas, the behavioral disorders and mental illness are, considered to be caused by supernatural ailments, the patients under this category are taken towards personalistic treatment. It is significant to note that the naturalistic treatment to the physical illness is available at both ‘Karevakkalu’ traditional medicine and in at other neighboring communities and also in biomedical clinics; The modern but modern biomedicine is the only source of naturalistic treatment for the behavioral disorders and mental illnesses suffered by the ‘Karevakkalu’.

The materia medica involved in the ‘Karevakkalu’ ethno-psychiatric treatments be understood in two categories viz.

1) The objects used in the process of treatment and

2) The counseling provided to the patient and his/her relatives at the time of ‘nota’ healing sessions. The first category of materia medica involves usage of several objects believed to be sacred and favorite to ‘dhaiva’ (spirit) and ‘dhevru’ (deities). The medicinal qualities are filled in these objects (such as ‘dhara’, ‘cheetu’, ‘antra’, ‘basma’, ‘bandara’) incantated by healers (‘notagara’or ‘bhatru’) through specific healing ritual. And these objects are given by the healer to the patients in order to apply or to wear; ‘basma’ and ‘bandara’ are to be applied on the forehead of the patient and ‘dhara’ ‘cheetu’ ‘antra’ are to be tied on the patient’s neck. In the cases of severe psychic illness and long-term physical illness, higher level, elaborative rituals are performed as the people believe that these ritual itself works as a medicine. The rituals are as follows:
a) Offering hen, sheep (‘bali’ and ‘raktha-haana’)


c) Along with the healing objects, the second category i.e. counseling, which is much implicit by nature, plays a significant role towards taking care and curing the patients of psychic problems, in a very comfortable, culturally molded manner.

The process of counseling takes place along with the ‘nota’ sessions and ‘saastra’ sessions. It contributes towards knowing the individual feelings and fear in detail, caring and helping the patients to overcome their fear prejudices. The ‘Karevakkalu’ say this makes them gain hope and self-confidence. After discussing about the several cases of psychic illness found among the ‘Karevakkalu’ community, the psychiatrists opine that, the ‘notagara’ successfully cured those cases of psychic illness, which were in need of counseling rather than any other medicine.

**Ethnopsychiatry and modern medicine interface**

Ethno psychiatry among the ‘Karevakkalu’ is centralized in the institution of ‘nota’. The system of ‘Karevakkalu nota’. functions as a body that safeguards the whole tribe and thereby contributes towards their total well being. It also works towards well being of other communities-people who believe in the ‘Karevakkalu nota’. The ‘nota’ counseling (given by ‘notagara’ to his clients) is very effective, as it contributes towards reducing the clients’ mental stress, feelings of fear, guilt and insecurity which emerges frequently in
their day-to-day life. Another positive aspect is the easy ready acceptability and affordability ‘Karevakkalu nota’. Unlike modern biomedical services, the ‘nota’ service is available and affordable to each and every individual of the settlement and also to people of region. The ‘Karevakkalu nota’ has shown a greater amount of adaptability to several modern technologies and also accepted modern biomedicine at the higher level as one of the efficient and quick-curative system. It is significant to note that, instance, the people take initial ‘nota service’ through telephone, by calling ‘notagara’. But it is also found that they don’t accept those modern equipments that seem to be corrupting the real spirit and image of ‘Karevakkalu nota’. And therefore, they haven’t allowed the researcher to take the photos of ‘nota’-session.

The significance of ‘Karevakkalu’ ethno psychiatry is visible in its ready acceptability of other healing systems (viz. ‘saastra’ and ‘nota’ of other communities) as well as modern bio medicine (‘dactar aushadhi’). The ‘Karevakkalu notagara’ refers his patients of possessing physical and mental illnesses to the other curative-systems, when the ‘Karevakkalu-nota’ seem to be ineffective repeatedly. Therefore, the ‘Karevakkalu’ as well as people of other-community often consult ‘Karevakkalu notagara’ not only for the treatment of illness but also to get proper guidance in all problematic when they are in dilemma.

Even though there is an elaborative ‘Karevakkalu’-etiology of illnesses, when it comes to its actual practice, it often changes and swings from naturalistic etiology to personalistic etiology, depending on the intensity of
illness and its response to the treatment. These procedures consume a larger period of time, to come to final condition of the stage of illness. This nature of ‘Karevakkalu’-etiology results in long-term suffering extending to several months to cure and slow recovery. If a physical illness (‘sheeku’) does not respond to the naturalistic treatment (‘halli aushadhi and ‘daactar aushadhi’), the ‘Karevakkalu’ believe that it must be a personalistic disease. (‘keelu’/dhaivadha thondre or adda thondre). In that case, they take the patient to a ‘notagara’ for ‘nota’ healing. Where as, if a mental illness does not respond to the personalistic healing measures, (‘nota’ and ‘saastra’). And when the mental patient develops in the meanwhile a physical problem, the Karevakkalu conclude that, the patient is suffering from a naturalistic disease, related to nerves, (‘nara dhosha’ or ‘maanasika’). In such a condition, the psychic patient is taken to a biomedical doctor (‘daactaru’) and (in rare cases) and further to a psychiatrist, if the physician advises the people to do so. In such circumstances, there are chances of illnesses getting severe, reaching a stage in which any medicine would be ineffective.

Nontheless, a significant gap exists between the ‘Karevakkalu’ and modern health care providers. Modern health care providers rarely attempt to understand the people’s believes, and faith on ‘nota’. And the common people of ‘Karevakkalu’ tribe are also found to be much confused in their understanding of modern biomedicine. The ‘Karevakkalu’ think that, ‘daactaru’ could cure only naturalistic disease (‘sheeku’) and not personalistic diseases (‘mental illness,’ ‘keelu / dhaivadha thondre’). Because, the ‘daactaru’ (doctor)
are unaware of the ‘Karevakkalu’-etiology of mental illness. Hence they don’t consider ‘nota’ or ‘saastra’ healing measures as a significant part of case history of the patient, when a ‘Karevakkalu’ mental patient comes to the biomedical treatment. The modern ‘daactaru’ mask at the whole ‘Karevakkalu’ etiology of mental illness as a bunch of ‘superstitious’ beliefs (‘moodha nambike’). This attitude of the ‘daactaru’ discourages the ‘Karevakkalu’ in receiving treatment from the modern doctors (‘daactar- oushadhi’). It is biomedical doctors do not get the psychic patients. From ‘Karevakkalu community. Because of the reason that, biomedical doctors, especially from the public health care sector, are unaware of the real picture of mental illnesses among the ‘Karevakkalu’. In this case, consulting ‘nota’ is only resort for treating the mental illnesses for ‘Karevakkalu’. In fact, ‘Karevakkalu nota’ is widely known and considered by the ‘Karevakkalu’ as effective remedy in treating the patients of personalistic illness especially the patients of neurosis. The ‘nota’-counseling found to be very effective in treating the cases of neurosis, which are often founded cases among the ‘Karevakkalu’. where as several patients of psychosis (severe mental illness occurs due to hormonal and or chemical changes in the patients’body, that needs long-term treatments, which includes both medicine and counseling), are found to be receiving biomedical treatment successfully by the psychiatrists. However, these patients are also found to be the clients of ‘nota’-healing at initial stage of their illness. And later, they shifted towards biomedicine as ‘nota’ found to be ineffective. Therefore, a sensible, realistic combination could be fruitful viz. usage of
'traditional 'nota' healing to the cases of neurosis and biomedical treatment for the cases of psychosis could lessen the burden and sufferings of the 'Karevakkalu' when it comes to the sphere of their mental health seeking.

Suggestions:-

a) The active involvement of public health care by all means and ways is absolutely necessary. There are several urgent issues in the sphere of mental health and illness, that has to be addressed, to be managed with care, efficiency and sensitivity. The suggestions in this regard are as follows:

a.1). Both public and private health care providers viz. doctors, nurses, health educators are to be trained, sensitized towards treating, handling the people from different cultural backgrounds.

a.2). The health care providers are also to be trained regarding keeping a record of the patients tribe, caste, and religion. Along with that, keeping a general record of the main features of all tribes and castes of the locality would be helpful while treating the patients of long-term illness, and behavioral disorders and mental illness. This cultural information would make the treatment effective: because a doctor can gain confidence of his/her clients, if he/she knows the clients background better.

a.3). The public and private health care providers are to be trained to understand the culture specific health seeking behavior, to respect the
beliefs, attitudes of ‘Karevakkalu’ in particular and also that of other communities in general. Because, the ‘Karevakkalu’ are unaware of several remedial measures of modern biomedicine, which could successfully cure the ‘Karevakkalu’-patients. Therefore, the people are to be informed by the public and private health care providers at community level especially regarding stress-related behavioral disorders and mental illness, psycho-somatic diseases, behavioral disorders occur due to liquor-addiction. Because knowledge of these issues is almost nil among the ‘Karevakkalu’. The reason is a very low interaction level, found between the modern health care providers (‘daactaru’) and ‘Karevakkalu’ especially in the sphere of personalistic illness. The behavioral disorders and mental illness are the major component of personalistic illness. A big culture-gap is formed here. It resulted in negligence (while treating) from the past of biomedical doctors (‘daactaru’) and a feeling of inferiority and unfamiliarity rests at the side of ‘Karevakkalu’-community. Therefore, area of user friendly atmosphere at the public and private hospitals is needed urgently.

b) The Mental Health Programs should target towards improving these fundamental aspects of ‘Karevakkalu’-life:

b.1) the fear (hedharadhu’) of supernatural beings is a single dominant feature of psychic-problems and illness, suffered by the ‘Karevakkalu’. Therefore, the Mental Health programs should
encourage the people towards gaining the self-confidence, developing positive approach in the day to day life.

b.2). to conduct de-addiction program at community level through primary health centers is an essential step. Because a major portion of the ‘Karevakkalu’-male folk is addicted to liquor and therefore they are becoming less efficient in their routine. It is found that, the ‘fear’ and other negative feelings dominate when the person is at drunken state.

b.3). The public health programmes and formal education programmes should include, personality development programmes for the people of all age group. Encouraging the ‘Karevakkalu’ towards reasoning questioning, and to let them to interact with the experts would contribute towards lessening the ‘fear’ of (‘hedharadhu’) supernatural beings.

c) Eventhough public health sector is taking several initiatives through The district Mental Health programme, there significant that amount of of perceptional gap found between doctors and ‘Karevakkalu’ patients. This gap could be built up by incorporating these measures.

It is found that behavioral disorders and mental illnesses of the ‘Karevakkalu’ are associated with several issues of their life like, fear of supernatural beings, economic instability/failure, late marriage, unmarried state, infertility, and menopause and liquor addiction. But, the effect of both traditional healing and modern psychiatric treatment is delaying as these associated problems and are not taken into consideration by both the healers as
well as psychiatrists. In this situation the suffering period of the patient becomes much longer. Therefore an interdisciplinary approach and a comprehensive effort to meet the real needs of the people, in the sphere of mental health is necessary. This includes the involvement of experts from different fields such as ‘Karevakkalu-notagara’, (shaman) ‘gaadiga (shaman) other communities, ‘bhatru’ (faith healer of ‘brahmanru’ caste), Anthropologists, sociologists, social workers and journalists. But the ‘outsiders’ (to the ‘Karevakkalu’ culture) should always remember that the ‘Karevakkalu-notagara’ and other faith healers are the best counselors available and affordable to the ‘Karevakkalu’. They are efficiently working towards reducing the feelings of fear, insecurity, guilt and mental stress suffered by the ‘Karevakkalu’. By taking the views of these native resource persons, the District Mental Health programme could definitely achieve better mental – health status and there by better quality of life of the ‘Karevakkalu’.