

## RELIGIOUS PLACES AND RELIGIOUS PEOPLE AS SYMBOLS OF HEALING: AN ANTHROPOLOGICAL NARRATIVE

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In quest for maintaining health or for attaining healing, people often make use of multiple and often conflicting systems of medicine. Reliance of people on their religious beliefs and practices, on one hand and, biomedicine, on the other, has been highly documented and accounted for in the researches of medical anthropology. Epistemologically, the two realms may represent contested realities. However, in the wake of day-to-day life of the people, these two distinctive realities coincide and actually complement each other. The major aim of conducting the present research work was to deal with this aspect, where religious beliefs and practices influence health seeking behaviour of the people. The paper is based on the fieldwork carried out in Mohali (city) in Punjab. The analysis and interpretations are based on in-depth interviews and narratives of 25 male and 25 female respondents, from the age ranging from 20 years and above. Based on the observations, it may be concluded that in search for mitigating their pain people make use of a pragmatic approach. People choose between the available systems of health care with the hope of attaining the desired result — healing, alleviation from their (or those important to them) illness. They do not judge the approach they adopt; rather they judge the effect of the approach they adopted for healing.

### Introduction

Each historical and institutionalised religion has its own worldview, beliefs, rituals and practices. Religions are created, reformed, and perpetuated because through them groups of persons make sense of inevitably baneful and tragic events of life — natural disasters, illness, suffering, death, etc. It acts as a system of control and checks on what is ethical and moral by defining the norms and values for its followers (Levin and Vanderpool 1987). Religion has been held responsible for many differences and norms affecting the fundamental values and behavioural pattern in life including health behaviour (Bhasin 2007). Anthropological interest in health care has often interpreted health beliefs and health seeking behaviour as components of religion. Religion is a major aspect of the ideological resources of a culture for health care. It has played a central role in the process of healing by maintaining faith in one's ability to recover in the face of stark medical reality that suggests poor prognosis for recovery (Winkelman 2009).

There are variations in the extent to which people identify problems, become concerned about them and seek assistance to remedy them. These differences are dependent upon the manner of severity of the problem as accepted in context of

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the family and community based upon the socio-cultural background of the people concerned. Once the problem becomes manifest, a wide variety of factors influence how it is defined, solutions and alternative solutions available for it, sources of perceived help available (Mechanic 1974). Employing this notion as an opening proposition, it is common knowledge that in many societies and cultures, beliefs and practices related to illness are for the most part inseparable from the domain of religion (Glick 1977).

Within the realm of understanding of non-scientific systems of health care, effect of religion on health has been one of the most interesting subjects. Studies in this realm have brought forth two dimensions of religion and its influence on health seeking behaviour of the people. The first dimension is use of services of healers for ameliorating illnesses. In this dimension religious beliefs and practices are made use of by the healers to alleviate the problems of those seeking help from them for their illness. The second dimension involves use of religious beliefs and practices at the level of 'self' by the individuals concerned through prayers, pilgrimages, etc. The nuance of religiosity becomes manifest in the second dimension of relation between religion and health. The religious element in both the categories is obvious. The note of supplication, to a power beyond the laws of nature, runs through both the categories.

As Csordas (1988) opined that religious healing should be detailed as experiential analysis rather than as representing ritual or clinical dimensions of healing only. The present paper attempts to understand whether respondents considered their religion, not as a causative agent of illness but, as a source of their health seeking behaviour both when an illness befalls them and for general well-being as well. The theme reflects their belief in supernatural power(s) and their belief in religious symbols like religious texts and scriptures as source of protection against and as a source of healing for an illness.

### **Materials and Methods**

The paper is based on the fieldwork carried out in Mohali (city) in Punjab. The analysis and interpretations are based on in-depth interviews and narratives of 25 male and 25 female respondents, all above the age of 20 years. Respondents were chosen through snowball sampling method. The number of respondents interviewed was limited to the given number when repetitive and similar responses were received in relation to the research objective. The age of respondents was chosen to be minimum 20 years so as to ensure they had some information and understanding about their religion and its associated beliefs and practices by virtue of their socialisation. The observations and data have been analysed based on the dominant themes that emerged during discussions with the respondents.

## Results and Discussion

### *Belief in Supernatural Power(s)*

Since people's ideas and practices associated with health care are linked to their desire to explain the inexplicable and to assist them in overcoming the sense of helplessness, hence accordingly, they are also at times linked to their beliefs in the supernatural (Herselman 2004). According to Good (1994), the ideas that are in accordance with objective reality are described by the language of knowledge and those that are not in accordance with objective reality are described by the language of belief. Thus, belief, in the contemporary sense, is choosing between options. Lévi-Bruhl (1985) was of the view that there are different ways of thinking common to all people. There is the scientific way and there is a more "mystical" mode of thought that works through metaphor and analogy to make sense of the complexity of human existence. This is something that was also observed among the respondents — metaphorical comparisons of religion to food for soul and analogy to the importance of elders and parents in their life. The section tends to identify the beliefs of respondents in relation to supernatural power(s), the locus of these powers and the healing ability of these powers, if any.

Cutting across all the age groups, the respondents believed that some sort of inexplicable powers, functioning of which could not be explained in terms of laws of nature or through scientific rationalism, which were beyond the mundane existence of the world, exist. This supernatural realm for them was both sacred and profane. It was sacred because it was related to the divine power — God, it was profane because it was related to activities like black magic, sorcery, etc. It was in the former category of the sacred supernatural that the discussions with the respondents were focused upon in order to establish the link between religion and health from the respondent's perspective, if any existed. According to the respondents, certain individuals and places like religious institutions have sacred powers which may also heal people of their illnesses.

The respondents attributed the source of this power to the divine through prayers. Many respondents believed that

*Jithe pāth pūjā hundī hai, othe shaktīyā vi hundīyā han.*  
(Where there is worship, there is power.)

Sacredness of religious texts and scriptures creates an aura of supernaturalism. It is through the prayers that the divine may be invoked. The respondents related themselves to their religion through religious texts and scriptures of their Gurus. Thus, according to the respondents, all religious institutions like the *gurudwara* (Sikh temple of worship), were a medium of such power because God 'resides' there for the reason that it is the domain of regular recitation of sacred religious scriptures, which were the word of God presented through the teachings of their

Gurus. Such places were, thus, pious and pure, especially if those *gurudwaras* happen to be associated with any of the ten Sikh gurus directly. That is, if they have an important relevance in the Sikh history. An old age male respondent stated that

*Jithe sangat hai, othe rab hai, te rab sarab shaktīmān hai.*  
(Where there is a religious gathering, there is God, and God is the omnipotent power.)

The concept of *sangat* (a gathering of people for the purpose of collective religious worship) has always been of prime and pious importance in Sikh religion. Places of worship like the *gurudwaras* originated for gathering of the *sangat* to remember and meditate in the Name of God. Thus, the *gurudwaras* were an important medium of experiencing power of the God. This supports the notion of the respondents who believed that places of religious importance have powers inexplicable to the rationality of science. An old age male respondent was of the belief that

*Jis chīz da varḍan Guru Granth Sāhib vich hai, oh chīzā mōjūd han.*  
(The things that have been described and mentioned about in the Guru Granth Sahib exist.)

He supported his argument on the basis of notion that there is mention about evil spirits, ghosts, other supernatural beings and the other worlds in the Holy Book. Therefore, whatever has been described in the Holy Book exists and its presence could not be put into question because they are all ultimately the creations of the Almighty, they are not above Him or beyond Him.

Many respondents associated the personification of such powers in human beings with the concept of *brahm giānī* — God-conscious being. This word finds mention at many places in the Guru Granth Sahib, but respondents to be specific quoted from Sukhmani Sahib, the writing of the fifth Guru of the Sikhs, Guru Arjan Dev. Quoting the same from Sukhmani Sahib, as stated in the Holy Book, a middle age respondent from Amritsar narrated that

*Man sāchā mukh sāchā soye. Avar na pekhḥ ekas bin koye. Nānak eh lachaḍ  
brahm giānī hoye. (Pannā 272)*

(The True One is on his mind, and the True One is upon his lips. He sees only the One. O Nanak, these are the qualities of the God-conscious being.)

Thus, according to the respondents, those who attain the state of bliss, are one with the Almighty and are highly religious by their disposition are also a medium of experiencing His powers. God Himself works through such pious beings to help the needy and to absolve them of their problems. For the respondents the experience, including healing, came to those who believed and those who had faith in it. Many respondents opined that

*Je vishvās hove tá hī rab dī shaktī nū mehsūs kñā jā sakdā hai.*  
(If one has faith only then can we feel the power of God.)

Hence, the belief in supernatural was to have faith in God. The belief of the respondents was that having faith in God could be a solution to many discomfoting problems of life. Maximum respondents were also of the belief that God could heal serious and chronic illnesses of people. They believed that God was the only saviour and He could create miracles and save even the dying ones but only in rarest of rare cases. Gonnerman *et al.* (2008) also found in their study that more than 80 per cent of the respondents attributed power of healing to God and prayer. However, some respondents, among the young adults, were of the opposite opinion. Their belief was that praying to God gives only strength to fight and face the situation and healing or curing was matter of scientific temperament. A middle aged male respondent tried to bring home this point by quoting a verse from Sukhmani Sahib

*Jis kā sās nā kadt āp, tā ko rākhṭ de kar hāth. (Pannā 285)*  
(Those whose breath of life He Himself does not take away. He preserves them, and holds out His Hands to protect them.)

Thus, the respondents opined that those who are protected by God would overcome all sorts of illnesses and diseases and nothing would ever happen to them till He is their protector. A middle age male respondent firmly opined that

*Je bimārī rab ne dītī hai tá thīk vī ohī karegā.*  
(A person suffers from an illness because of God's will, he or she would be healed too because of God's will.)

It emerges that notion of having faith in God gives a feeling of being looked after and being cared for. This may have an improving effect on state of illness of a person that nothing worse would happen to him or her because there is a power to pull him or her out of situation of crisis. Another middle age male respondent made a very interesting analogy to describe the mystifying experience of belief and faith

*Log tá pathar nū vī rab mande han. Mano tá rab na mano tá pathar.*  
(It's the belief that makes one have faith in a stone as form of God.)

Religious explanations in the realm of supernatural are subjective realities that are often described in terms of belief and faith, that are incomprehensible to objective, fact based knowledge.

A middle aged adult female respondent was of the opinion that

*Jithe bhagtī hai othe shaktī vī hai.*  
(Where there is prayer, there are powers around too.)

Religious prayers in any form are viewed with reverence and piety. Such prayers are considered to be a way to experience the powers of God, may it be in relation to any problem like an illness or a blessing like healing. Another old age adult female respondent reiterated this notion by stating that

*Bhave ghar baith ke pāth karo, shaktī othe vī hovegī.*

(Even if you do prayers at home, these powers would exist there too.)

The place as such is not important, what is imperative is the prayer by virtue of which a place gains a status of being a medium of the supernatural powers. Thus, religious places, may it be of any religion, were considered to be a means of experiencing such powers because such places witness regular, unhindered recital of religious prayers through religious texts and scriptures. Prayers were the way of communicating with God. Quoting the text of the fourth Guru of the Sikhs, Guru Ram Das, an elderly respondent tried to elaborate more on this

*Ridh budh sidh sukh paveh bhaj gurmat har rām rām ||1|| (Pannā 719)*

(Riches, wisdom, supernatural spiritual powers and peace are obtained, by vibrating, meditating on the Lord God, under Guru's Instruction.)

Meditating in the Name of the God, which has been foundation of Sikh theology, has been expounded by the respondent as the source of any power. Hence, any place where such prayers are made and remembrance of God's Name is the regular feature has the ability to act as a medium for God's power for a common man. This justifies the emphasis of the female respondents on religious places as being one of the foremost medium of the supernatural powers.

As far as personification of such powers in human beings was considered, similar to their male counterpart, female respondents also touched upon the notion of *brahm giānī*— God-conscious being. An elderly female respondent quoted text of the fifth Guru, Guru Arjan Dev, from Sukhmani Sahib, as mentioned in the Guru Granth Sahib, to elaborate on the qualities of the God-conscious being

*Brahm giānī sang sagal udhār. Nānak brahm giānī japē sagal sansār ||4||*

(Pannā 273)

(In the Company of the God-conscious being, all are saved. O Nanak, through the God-conscious being, the whole world meditates on God.)

Hence the one, who meditates in the Name of the Lord, becomes a part of Him and is a source of His powers. Many female respondents believed that God actually worked through such people and they were His ambassadors on this earth in order to help the common people get rid of their problems. Healing people of their illnesses were one of the many things that these people were capable of doing. Thus, among the female respondents too, the notion of individuals having supernatural powers was related to highly religious nature of such individuals by virtue of which they

become close to God and hence become a medium of His powers. All the female respondents, irrespective of their age and educational qualification, also believed that God could cure serious or chronic ailments of the people, if He wishes to, but only in very rare cases was this actually possible. Their beliefs were based on the condition of having faith in His workings in order to experience healing. Many female respondents reiterated what their male counterpart had time and again emphasised that

*Je us sache patshāh vich vishwās rakhīye tā sabh kuch ho sakdā hai.*  
(If we put our faith in that Supreme Power, then anything is possible.)

Once again 'to have faith' emerges to be the sole criterion for experiencing the powers of God, through any medium for any purpose including healing of ailments. To have faith meant that they had a protective shield above them that would save them from any sort of ill including ill-health. Even if someone suffers from any illness or ailment, one would be able to get healed from it only because of his or her faith in the Supreme Power.

Another middle age female respondent said that

*Jo kuchh karnā hai Dāte ne hī karnā hai.*  
(Whatever happens, happens because of His will.)

Being healthy was by His blessings, suffering from an illness was because of His decision and being healed was also because of His blessings. This was something that has also been mentioned about in writings of the Sikh Gurus. An elderly female respondent quoted a text from the writings of the fifth Guru of Sikhs, Guru Arjan Dev

*Āpe karan karāvan jog. Prabh bhāve soī phun hog. (Pannā 275)*  
(He Himself is the Doer, the Cause of causes. Whatever pleases  
God ultimately happens.)

Thus, according to Sikh theology that respondents often referred to, explain the happening of events in life of individuals, presents God as the ultimate cause and the ultimate solution of everything that happens, including an illness and its healing as well. This also shows that the female respondents often made analogy from Sikh religious scriptures to give reason to events happening in their lives. Thus, among the female respondents too, to believe in supernatural was to have faith in God.

It was the belief of the respondents that their faith in God, as their saviour and protector in the time of crises like an illness or disease, would save and protect them always. The source of the power was the Almighty, whereas, religious institutions and certain individuals who were highly religious and pious were one of the media of experiencing such power through prayers — the *bāḍī* — the

teachings of their Sikh Gurus. The categorical mention of why certain people act as mediums of these powers was made by respondents.

Apart from religious institutions and highly religious people being considered as a medium of supernatural power of God, there was another category of individuals who were thought to have certain knowledge through which they could alleviate the illnesses of people. These individuals were mainly associated with occult practices like *jhādā*. Although these individuals were not considered as having divine supernatural powers, but nonetheless, they were treated as having attained certain *siddhī* (miraculous powers), something which has been propounded against in the Sikh theology. No special nomenclature was used for these people by the respondents. However, using the concepts of medical anthropology, people providing these services could be safely termed as healers.

Thus, taking cues from the theology of their religion via writings of their Sikh Gurus, the respondents developed their notions about their belief in God and their faith in God as a healer. There was a perception that all they could do was to pray and to have faith, to get or not to get what one desires for was the will of the Almighty. Falling ill was His wish and healing was also His will. Thus, according to the respondents, everything that happens occurs according to the will of God. The source of any supernatural power, thus, was God and particular places and certain individuals were just a medium of His powers. Places or people acted as media for experiencing God's power by virtue of religiosity associated with them, as Cohen (2003) puts it that 'prayer makes a place capable of healing'. It was through regular prayer and worshipping that God's power could be invoked. Hence, religious places and very highly religious people were the chosen ones.

Religion forms a "sacred canopy" (Berger 1969, cf. Davie 2006) giving credence and meaning to swerving situations of life like health and illness. This relationship of healing with the religious and the sacred is both complex and variable. It ranges from relying upon official, institutionalised religious approaches towards attaining health and healing to practices that may lie outside official religious approaches such as use of amulets, charms and votive offerings or services of healers to forestall or heal illnesses (Santino 1985). Thus, religion stands intricately woven with the aspect of healing of illnesses.

### ***The Sikh faith healing***

Belief and faith put together into a form of action or practice foster a feeling of optimism and hope. The idea that faith and belief are important factors in healing of diseases is a very important tenet of the esoteric practices and traditions of the world (Lyvers, Barling and Harding-Clark 2006, Levin 2008). Emphasis on having faith in a Supreme power as a condition for experiencing positivity in crisis has been time and again highlighted by the respondents. By enhancing positive emotions such as wellbeing, hope and a sense of purpose and meaning in life, religious



beliefs and practices may help to counteract the negative stressors that set off the fight-flight responses (Koenig 2004).

The concept of faith healing with respect to Sikh theology has already been discussed in detail, the present section deals with the perceptions of the respondents regarding faith healing in response to their own theology and putting the theological concept into actual practice. The previous section dealt with the beliefs and perceptions of the respondents regarding the supernatural, where it emerged out that God was the supreme power controlling every event of a person's life. The concept of supernatural was merged with the concept of God as an authority figure and one's faith in God as the saviour and the protector.

The Sikhs were chosen as the focus of the present research work. The word Sikh means disciple. Guru Nanak Dev was the founder of Sikhism and first Guru of the Sikhs. Followed by him were nine other Sikh Gurus. The lineage of Gurus ended with the tenth Guru, Guru Gobind Singh (Singh 2008). Sikhs acknowledge these ten human Gurus. According to the Sikh code of conduct a Sikh is any human being who faithfully believes in one immortal being, the ten Sikh Gurus; beginning from Guru Nanak Dev to Guru Gobind Singh; the Guru Granth Sahib; the utterances and teachings of the Sikh Gurus; the baptism bequeathed by the tenth Sikh Guru and who does not owe allegiance to any other religion, is a Sikh. Guru Granth Sahib is the Holy Book of the Sikhs, accorded the status of the living Guru. The Holy Book is considered as a remedial manual for all the ills suffered by humankind (Singh 2005).

The context of faith healing, thus, refers to praying to the supernatural with hope of healing at the level of self, significant others or through rendering the services of healers. The ideology of Sikhism does not believe in occult beliefs and practices like *jantar*, *mantar*, *tantar*, magic, amulets, astrology, fasts, omens, ancestor worship or rendering services of oracles or faith healers for any matter or healing obtained through supernatural powers, other than God, or other such rituals (Singh 2008, Greaves 2011). Sikhs attach no importance to worship of graves or other relics (Greaves 2011). Does that mean there is no place of faith healing in Sikh religion?

Theological explanations of attaining healing are ideal. However, there is often a difference between the ideal and the real, between the normative and operative realities. In quest for everyday survival for existence, individuals often find themselves at cross roads where taking one decision may be against the normative expectations of one's society. This appears so to be the case in life threatening situations and illness experiences. Return to the state of normalcy and health would be of prime importance. The other case may be that certain beliefs and practices, which may be ideologically in opposition to expected norms, but are none the less part of the worldview of the people. In a pluralistic society give and take of cultural traits serving some purpose or utility is very common. Hence, it would not come as

a surprise to observe a Sikh believing in *pīrs* (Muslim saint) or any Hindu deity for that matter.

In Sikhism *nām* (Name of God) has always been considered as the ultimate remedy for all ill that befalls human beings. This notion finds mention not only in the theology of the Sikh religion but also in the worldview of the respondents. In prior discussion, it has been found that religion was considered to be the system of support. It was described as a way of living. All this was guided by the religious writings of the Sikh Gurus which focused on *nām* as a way for achieving whatever one desires for. Participating in regular private religious activities of reciting *pāth* (recital of Sikh religious scriptures) and/or performing *ardās* (a supplication performed formally after *pāth*) was a common yet important feature of everyday life of the respondents, both males and females. All the respondents displayed high level of religious involvement at one point or the other including their unrelenting faith in reciting *pāth*, which was a way of remembering God's name, the *nām* — the ultimate solution to all their problems and difficulties. It was like calling upon some authority to take control over their situations. Literally, *pāth* can be considered as a way of worshiping and *ardās* a way of supplicating to God. According to the four dimensions of prayer proposed by Polloma and Gallup (1991) ritual prayer activities include reading from a book of prayer or reciting memorised prayer; in Sikh religion both *pāth* and *ardās* are examples of this. Conversational prayer can be characterized as a more informal conversation or communication with God; this forms the part of *ardās*. Petitionary prayer involves requesting fulfilment of spiritual or material needs such as healing; *ardās* is an exemplified version of this form of prayer. Lastly, meditative prayer includes activities such as quietly thinking about God, experiencing or worshiping God; reciting *pāth* is a way of *nām simran*, which is, meditating on the divine name. Both *pāth* and *ardās* can be included under the gamut of prayer(s). All the respondents, irrespective of their gender, age and educational qualification, including those respondents who were not regularly involved in participating in private religious activities, believed in the healing powers of *pāth* and *ardās*.

The concept of healing of the respondents was in relation to healing of diseases to some extent, though they also accepted it to be true in very rare cases. They also held the opinion that doing *pāth* gives them inner peace and it develops a sense of attachment to something strong and above them. It creates a positive atmosphere which helps them remain stress free and in a situation of any crisis like an illness it creates a hope for them which helps to keep them strong and to “hang on”. To enjoy a good health was God's blessing and reciting *pāth* was one such way of seeking His blessings including the hope for healing in case of an illness. As has been earlier observed, what respondents believed was that they could only pray, to be blessed or not was God's will. It was not only a way of seeking blessings for oneself but others as well. An elderly male respondent, quoting the fifth Guru of

the Sikhs, Guru Arjan Dev, elucidated this notion that by remembering the God, one's whole family is saved from all sorts of ills.

*Pābrahm ārādhiye udhr̥ṣ sabh parvār ||2|| (Pannā 218)*  
(Worship and adore the Supreme Lord God and all your family will be saved as well.)

Thus, not only could one dispel one's own problems and sorrows but could also save the whole family by invoking and worshipping the ultimate saviour. A middle aged male respondent said that by praying and taking *nām*, one is able to create a protective wall around oneself and others close to them so that no harm, including illnesses, could even touch them. A middle aged female respondent quoted a verse of the fifth Guru, Guru Arjan Dev, where the Guru has clearly projected the *nām* as the healing miracle of the disease of small pox. The Guru states that

*Sadā sadā har jāpe. Prabh bālak rākhe āpe.*  
*Sīlā thāk rahāī. Bighan gaye har nāyī ||1|| (Pannā 627)*

(Forever and ever, I chant the Lord's Name. God Himself has saved my child. He healed him from the smallpox. My troubles have been removed through the Lord's Name.)

The healing of a disease like small pox had been attributed the name of the Lord. The importance of reciting path lies in this notion that it is the way of chanting and meditating the name of the God — the healer of all ills. Thus, the illness may be of body or mind but the ultimate healing medicine is *nām* and the only healer is God.

The ten Sikh Gurus were also considered to be a part of the one ultimate divine power. Although the respondents considered the *gurudwaras* to be a medium of experiencing the powers of God, but nonetheless, they also maintained that any *gurudwara* associated with any of the Sikh Gurus directly was not only a "medium" of experiencing the supernatural but was also a "source" of it. It was the abode of the Almighty because His sacred beings had made this place pious and pure by their personal visits. Since the historical *gurudwaras* are associated with important events in the Sikh history, they are deeply revered and held in great esteem. A middle age female respondent said

*Us har gurudwāre dī bahut mantā hai jithe sādē Gurū ne apne pēr dhare.*  
(Every *gurudwara* visited by any of our Gurus is known for fulfillment of the wishes of the devotees.)

Since the Sikh Gurus are considered to be the "light of the Almighty", their visits and their sayings are equated with the visit and words of the God. Many respondents said that the image of God in their mind was the image of any of their Gurus. They also believed that although the Sikh Gurus were all messengers of God and that they could and they still can grant wishes of people including healing of their

ailments. It was also maintained that performing miracles was a prohibition in Sikhism and the Gurus propounded against this practice in their teachings. The Gurus always preached how to be under the grace of the Almighty, because even if miracles happen including healing, they happen because of His will and not because of humanly manipulations. Also, visiting the *gurudwara* gives a feeling of collectivity, of being part of like-minded community. It may also set stage for interaction between self and significant others, other than immediate family members. Sharing of problems and evoking suggestions in return may be an important component of social networks fostered through *gurudwara* visits. Acting on these suggestions may actually prove to be helpful in some cases.

There was also the notion of distant healing that emerged, where the respondents also believed that if they pray for health and wellbeing of those staying physically far away from them it could also lead to possible healing of their illnesses as well. An elderly male respondent said that the Sikh *ardās* ends with the concept of *sarbat kā bhalā* — well wishes to all, therefore, prayers done by one person for well-being of another would have the healing effect for them. A middle age female respondent reiterated this belief of distant healing by stating that “Prayer is not dependent upon the distance between the one who prays and the one who is being prayed for. What is important is the faith of the people involved”. Since maximum number of the respondents were religious to a great extent, their views about religious prayer as being a precautionary measure and a way of possible healing were also very strong. Praying for well-being of the family and self was a common feature of *ardās*, whether performed at home in private settings or at a public place of worship like the *gurudwara*. Visits to the *gurudwara* are not just limited to fulfillment of specific wishes and desires, but are reflective of religious faith of the individuals. Nevertheless, when faced with some problems, the visits take form of petitionary supplications with expectation of finding solution to one’s problems.

### ***To Conclude***

Religion has emerged out to be an important aspect of health seeking behaviour among the respondents. *Pāth*, *ardās* or visits to religious places form an important aspect in the process of gaining normalcy. These practices have basis in the ingrained belief systems of the people. Religion was an essential aspect of life of the respondents, practicing certain religious activities was a regular feature for maximum of them. Thus, it was likely that taking religious recourse for seeking help for healing and health was a common yet significant aspect of health seeking behaviour of the respondents. Blessings through prayers are not only sought for healing of ailments, but for fulfilling of wishes and desires, often in form of vows.

There is constant quest in human existence to give meaning to events and happening encountered in journey of their life. Events, like an illness experience, are often interpreted in the backdrop of religious beliefs and worldview to give

some kind of semblance to nagging questions like 'why me?' or how to overcome such situations. Religious explanations and belief in supernatural power, usually God, gives an assuring hope that there is something beyond the mundane realities capable of providing solution to every quandary of human existence. Often when other available options at hand do not yield desired results, health and healing in present case, the explanations and relief is sought in the domain of supernatural and Supreme Being. Also religious places like the *gurudwaras* forged an effective medium to interact with like-minded people and suggestions from even strangers met there could prove beneficial to heal illness. Many lifestyle behaviour like smoking and drinking are also effected by religious beliefs of the people. Religious prohibitions like these have direct health ramifications. As such religious faith both directly and indirectly gives meaning and credence to trying experiences of life in turn generating hope and optimism.

Group dynamics, significant others like family, friends, neighbours, colleagues, are all prominent agents of decision making in relation to strategies dealing with an illness. People seldom become ill without their family, friends becoming aware and involved in it. Treatments for dealing with illness are not a matter of individual concern but are rather collective decisions with inputs from all main close social networks. Often family elders, especially in case of children who are not capable of making decisions relating to their treatment on their own, play the most important role in it. Rather than an individualised experience, illness is a social incident, affecting not the individual concerned but also all those closely associated. Family members, friends and colleagues and even strangers encountered at religious places like the *gurudwaras* were significant input providers in making decisions regarding the strategies to be followed to deal with illness and in providing required care and support in the entire event of illness to an individual.

Praying to the Almighty as a means of healing was based on the faith not only of the sufferer but the significant others also. In some cases it was the sufferer himself or herself praying for healing of their ailments and in some cases where the sufferer was not in a condition to do so, specifically because of their tender age, the task of praying was on the shoulders of significant others, particularly parents. But in any condition the decision to visit a place of worship or praying was not the sole decision of any one particular person but rather a collective decision involving close family members. Thus, social support and social networks in form of significant others prove to be important decision makers in case of illness experiences and subsequent actions to be taken to counter the ill effects.

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