

KHAYOM LAKPA: THE CASE OF PHAYENG**¹Thokchom Tomba Singh, ²Dr. Ignatius Prabhakar**¹Research Scholar, Department of Anthropology, Arunodaya University, Itanagar, Arunachal Pradesh, India²Supervisor, Department of Anthropology, Arunodaya University, Itanagar, Arunachal Pradesh, Indiathokchomtomba687@gmail.com**Introduction**

Khayom lakpa is one of the traditional healing practices of the warding of seriously ill person by a maiba or maibee (a man or a woman who performs rituals as a priest, and as a medicine man, who can cure and act as shaman who performs magic that may be black/white and performs a ritual for the benefit of a person, a family or a community) by giving a khayom. Khayom is made of three banana leaves, an egg of duck, three buds of langthrei (*Eupatorium odoratum*), a piece of gold and a piece of silver (they are replaced by a red and white rice) inside it. This can be done in three ways viz, leithak lakpa, leikha lakpa and leithak leikha lakpa. The nature of making khayom is in different ways in three kinds of khayom lakpa. Other requirements for the ritual are heiram taret (seven varieties of fruit), leiram taret (seven varieties of flower), kabok nachal taret (seven handful of roasted rice), huibi mana (leaves of *vangueria spinosa* plant) salt, chili, pukyu (a kind of local wine), cheng (rice) sana konyai (a piece of gold), lupa konyai (a piece of silver). For the purpose of Irai Leima an other egg of hand is required. In some cases yelhing thaba is associated with khyom lakpa. Yelhing is offering of a yenbaraba (a mature cock) to the god of the four corner. For God Thajing the colour of the cock is Red, for the God Wangbren mixed of some colour, for God Marjing the colour of the cock is white and black is for the God Koubhru. In the community level, khayom lakpa is performed in the first day of Lai-haraoba festival of Meiteis.

Purpose and statement of the study

The aim of the study was to know the importance of Khayom Lakpa as a form of traditional healing practices of the people of phayeng village in Imphal West district of Manipur. The application of Khayom Lakpa is important to the lives of villagers as preventive measures for prevention of any ailments. The people of Phayeng village are much concerned about their health and rely on the practices of plural therapeutic system of treatments. Every society has a shared belief and behaviour about the prevention and treatment of illness. These shared belief and behaviour about the prevention and treatment of illness constitute the medical system of a society. Medical system may simply be conceptualized as “communities idea and practices relating to illness and health”. Health is prime concern for the people of Phayeng and that they still adhere to their traditional system of prevention and treatment of illness and ailments. One of the most common practices is Khayom Lakpa. It is an age-old practice founded on their cultural belief. Phayeng village where the present study has been carried out is a village located at the southern side in the

Uripok-Kangchup State Highway at about 30Km away from the heart of the state capital, Imphal. This village is under the jurisdiction of Lamshang police station and Imphal West district of Manipur. It is inhabited by one of the scheduled caste (SC) communities of Manipur known as the 'Loi'. Tradition ally the people of Phayeng differentiate themselves as 'Chapa Lois' from the other Lois of Manipur. The connotation of the term 'Loi' has diverse version. The term 'Loi' connotes not only the people who preserve the pre-hinduism traditions and customs of the Meiteis but also the people who were banished to the penal colonies in Sugnu, Ithing and Thanga island. The people of Phayeng speak a dialect known as Chakpa of the Sak (Loi) group of the Assam-Burmese branch of the Tibeto-Burman linguistic family. Phayeng was chosen for the present study because people are in their conservation style and they are fixed to their age-old tradition of pre-hinduism and still preserved their traditional healing systems.

Review of Literature:

In 18th century A.D. the anthropologists started to take keen interest on the non-western medical systems. It is because of the fact that medicine has been practiced one way or (clune 1976). W.H.R. Rivers published an epic making study in the field of medical anthropology entitled "Medicine, Magic and Religion" (1924) those who studied on ethno medicine owed important and basic concepts, especially the idea that indigenous medical system are social institutions to be studied in the same way as social institutions to be studied in the same way as social institutions in general and that indigenous medical practices are rational actions which viewed in the light of prevailing causation beliefs.

Clements (1932) in "Primitive concepts of Disease" did a comparative worldwide survey of the belief about disease causation that cited 229 sources, a height proportion of them ethnographic. In 1980, Arthur Klienman introduced a key concept in ethno-medicine in the book entitled "Patients and Healers in the Context of Culture". Explanatory model is related to the cause of illness, diagnostic criteria and treatment options. The explanatory model differs because of cultural ethnic or class differences. The disease illness distinction is also important conceptually in the study of ethno-medicine. And, so the concept of ethno-medical etiology. Foster in Medical Anthropology (1978) suggested personality and naturalistic medical system and distinguished the etiology of disease and illness accordingly.

Ong, Chua and Millow (2011) studied ethno-medicinal plants used by the Temuan Villagers in Kampung Jeram Kedah, Negiri Sembialand of Malaysia and reported a total of 56 species of medicinal plants with various uses, treatment and types of treatment from simple joint ache and pain to serious ailments such as diabetes, malaria, and tumours. Sujata Bhardawas and S.K. Gakhar (2005), studied ethno medicinal plants used by the tribal of Mizoram to cure cuts and wounds and found 17 species of plants belonging to 14 families. In a study of indigenous plants in traditional health care systems by the missing tribe of Assam by Ratna Jyoti Das and Kalyani Pathak (2013), 12 different plant species used in traditional health care practices.

Further researches have been carried out in the study of food items used to cure small ailments at home level such as the species fruits and vegetables as remedies for antiseptic

goitre, stomach problems, digestive problems, constipation, hypertension, sore throat, low blood pressure, diabetics, cough, cold, bleeding gums, cancer, diarrhoea, anaemia, etc. According to Hemla Aggarwal and Nedhi Kotwal (2009), the old and the aged still prefer traditional food items for preventive measures.

In 2011 Usha Lohani studies the traditional uses of animals among the Jirels of Nepal and reported altogether 49 species of animals with different ethno-zoological values. The Jirel-animal relationship was viewed both at spiritual and material levels where both domestic and wild animals are used as source of food and medicine.

Mitra (2007) has examined certain influencing factors responsible for diabetes in some portions of West Bengals Midnapur West district. In the study sedentary life style, susceptibility, environmental and lifestyle changes resulting from industrialisation and migration to urban environment from rural setting was taken as cultural variation due to industrialisation on and urbanisation that act as hindrance to ones health.

Alued and Ekewenu (2009) conducted a study on healing through music and dance, its scope, competence and implications for the Nigerian music healers relying on biblical foundation of music healing. The study revealed traditional healing does not focus only on the physical condition, but also on the psychological spiritual and social aspects of individuals families and communities.

Traditional healers can play important and valuable role in helping communities to improve their health and quality of life. They act as physician, counsellor, psychiatrists, and priest and people visit a traditional healer for problems ranging from social dilemmas to major medical illness. They, therefore, have a role to play in building the health system so far. But anthropological study in ethno-medicine will remain incomplete without the cultural aspects of rites and rituals associated with any types of healings. No study has been attempted to explain about the beliefs and supernatural of some kind that may have cause the illness and the particular ways of adopting traditional remedies. The diviner, the herbalist, the faith healer and the traditional berth that kind of music, the choice of instrument the duration of performance, the intensity of music and the setting of healing exercise are significant contributions to the overall therapeutic potency of music.

Studies undertaken by the Department of Pharmacy, Nelson Mandela Metropolitan University that was published in the South Africa pharmaceutical journal (sept. 2007) has shown the intrinsic relationship among man, culture and environment. African attendance will perform categorical rituals in carrying out their service to the society. Therefore, attempt should be made to observe (i) Religious beliefs and practices, (ii) Magical beliefs and practices, and (iii) Witchcraft and sorcery.

Seeking of treatment vary from society to society and person to person. In case of sickness the Bhotia tribe in Mana Village of Uttharkhand initially consult allopathic doctors and use the medicines prescribed by them. But when they find that the treatment is not enough, they go to 'Putter', a sacred priest, who has the knowledge of the supernatural powers. In this regard, Anjali Chauhan (2014) studies the ethno-medicine of the Bhotia tribe in Mana village of Uttarkhand. After studying traditional medicinal practices among the Raj

Gonds of Koraba district of Chatisgarh, Rajesh Shukla and Moyna Chakravarty (2010) reported that the Raj-Gonds prefer traditional healers and consult modern medicinal practitioners only when the condition becomes serious.

Their finding are contrasting and the reasons may also vary. It may be due to strong belief or lack of money, Where the needs are more and the resources and inadequate, people to make choices. The availability effect of modern medical system in the area under study is also necessary in understanding ethno-medicine.

Methods and Techniques

The present study adopted standard techniques of modern ethnographic research such as observation, case study and interview for data collection. Person to individual perspectives on issues relating to health. To supplement the interviews, informal person interview were conducted with a view to elicit discussions were held with various people. Secondary sources as archives records and libraries were also relied upon for more background information. Secondary materials ranging from newspaper articles to published scholarly text such as journals and books relevant to the topic were also consulted. In depth interviews were conducted with currently practising local Maiba and Maibee (traditional priestesses of Manipur who are believed to be the spiritual medium since day of yore)

Preparation and Procedures

The Maiba and Maibee investigates the pulse rate on the various parts of the patient and notes the symptom of the patient. After investigating, the maiba or maibee advice to arrange the requirements for the khayom lakpa to the family of the patient. The requirements are:

1. Laton ahum (three banana leaves for making khayom)
2. Nganu marum ama (an egg of duck)
3. Langthrei maton khara (some buds of Eupatorium odoratum)
4. Heiram Taret (seven varieties of fruits)
5. Leiram Taret (seven varieties of flowers)
6. Kabok Nachal Taret (seven handfuls of roasted rice)
7. Heibee Mana (leaves of Vangueria spinosa)
8. Thum (salt)
9. Morok (chilli)
10. Pukyu (a kind of local wine)
11. Cheng (rice)
12. Sana Konyai (a piece of gold)
13. Lupa Konyai (a piece of silver)
14. Utang paya (a thread made from bamboo called utang)
15. Yankok (a large rounded cane basket used to extract paddy husk)
16. Thangol (sickle)
17. Khoiru Thaomei and Dhoop (Candle and incense stick)

After the arrangement of the requirement the maiba or maibee fixed a day for the khayom lakpa that must not be tatnaba numit (a bad day). After this the maiba or maibee will make

the khayom by using the banana leaves, langthrei, egg of duck, sana konyai, lupa konyai and utang paya. There are three kinds of khayom lakpa i.e., Leithak lakpa, Leikha and Leithak-Leikha Lakpa. For the Leithak lakpa, the banana leaves will be kept in the natural position and Leikha lakpa the three banana leaves will be kept in inverse position. And for the Leikthak-leikha lakpa, the bottom one banana leaf will be kept in natural position and second one in inverse position and third one will be kept in the natural position. According to the maiba or maibee, the broader side of the egg is head and smaller/slender side is tail. Maiba or Maibee make a hole in the head of the egg. The lupa konyai, sana konyai are dropped inside the egg and three buds of langtheri are inserted in the hole of the egg. Then the three banana leaves are made into a cone shape structure and tied with the help of utang paya. The fruits, flowers, roasted-rice and salad are divided into four and kept into four pieces of banana leaf.

After preparation of the khayom and the requirements, the maiba or maibee will make Shingju (Shalad) with heibee mana, thum and morok. All will be kept in a Yangkok with a sickle. Then it will be brought to a pond or a river or a lake or a stream. Then the maiba or maibee performed the ritual at the bank by lighting the candle and incense stick. First the offering will be done to the gods of four corners of Manipur i.e., Thanjing, Marjing, Wangbren and Koubru. Then the khayom will be offered to Ipudhou Pakhangba.

First the offering will be done to Ipudhou Thangjing by saying-

He Ipudhou Thangjing, ngangi namingdi Kheirumlen Meinaiba haina kou-ido wangidamak nanai eihakna, heiram taret, leiram taret kabok nachal taret, puku, shingju, yaona naphamda tamjarakliye.

Next offering will be done to Ibudhou Wangbren by saying:

He Ipudhou Wangbren Khana Cahoba Kheirumlen nahakki namingdi hupnaiba haina kou-ido ngangidamktasu, heiram taret, leiram taret kabok nachal taret, puku, shingju, yaona naphamda tamjarakliye.

Then next the offering will be done to Ipudhou Marjing, by saying:

He Ipudhou Marjing Nangi Namingdi Khirumlen Waochrikpa haina kou-ido ipudhou ngangidamktasu, heiram taret, leiram taret kabok nachal taret, puku, shingju, yaona naphamda tamjarak-iye.

Lastly, the offering will be done to Ipudhou Koubru, by saying:

He Ipudhou Koubru ashupa, Loimanai khunda ahanba charik mapan thariba, nongthrei maru lingliba ngangi namingdi Khirumlen Kinaiba kou-ido, ipudhou nangidamktasu, heiram taret, leiram taret kabok nachal taret, puku, shingju, yaona naphamda tamjarakliye.

Finally, the offering of Khayom to Ipudhou Phakhangba is following by saying:

He Kuru, Thakta leiba soraren khada leiba prithibi ngasigi korou numitta nanai ashigi mashada chikle, nare, tourang fakta hiple, lutung khoibaknare, Amaiba, Amaibida taret shenjana wakongduna paohanglubada, khutam, shatam yenglubada pakhangba nahakka maiyoknarure hairakle nangi

nachingjak nayukhangdi, heiram taret leiram taret, kabok nachal taret, heibee mana shingju, pukyu, lina yaoradana changbi laton thakta pahapnaradana nganu pere chinpakpige yerum kanghid tamle, sana konyai hunle, lupa konyai chanle, langthrei maton ahum thetladana khayom yomle, hongla parei leire. Houjikti phakhangba nangi namingdi leinung chik-henba haina kou-ido.

The literal meaning is as translated below:

By offering the four gods of corner i.e., Thangjing, Wangbren, Marjing and Koubru by calling their name as khirumlen Meinaiba, Khirumlen Hupnaiba, Khirumlen Waochrikpa and Khirumlen Kinaiba respectively.

For thy I am offering seven varieties of fruits, seven varieties of flower, seven handful of soak-rice, pukyu and singju all offering to thou.

And then, The Supreme God, the God Soraren in the above and the God earth in the below today the patient is sick, aching lying in the bed and having severe illness. And concerned to the priest by giving coins it is due to facing of thy, the God Pakhngba. The favourite food of thy are seven varieties of fruits, seven varieties of flowers seven hand full of soak-rice, salad of Vangueria spinosa and all are placed above the changbi banana leaf and an egg of duck was also palced then sana konyai and lupa konyai are given to thou and three buds of langthrei are inserted in the head of egg and made the khayom and by calling his name as Leinung Chikhenba.

By reciting the mantras the maiba or maibee deep the khayom into water. If the khayom is totally merged in water it indicates the god accept the offering. And if the khayom is floating in water the god does not accept the offering.

Conclusion

The people of Phayeng are conservative and traditionalist by nature. For any severe disease they concerned to the local traditional practitioner (maiba or maibee). They still practice their ancient traditional medicines and are much concerned about good health. The study of their traditional healing practices reveals the use of khayom lkapa when a person is seriously ill. It is performed by a maiba or maibee.

The case presented in this paper demonstrates the experimental reality of one of the traditional ways of health seeking behaviours in Phayeng. It is evident that physical well being and mental satisfaction are two sides of a coin. One can't live in a healthy life without honouring mental aspects. They have their own system of belief, which is deeply rooted in their mental cognition and physical surroundings.

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