Broadening of consciousness: A healing process among the survivors of the Kachchh earthquake

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A massive earthquake, magnitude 6.9 on the Richter scale, hit Kachchh (a district in Gujarat state) on 26 January 2001 at 8.46 am. According to the Gujarat State Disaster Management Authority, 12,200 people died and several thousand were injured. The salient psychological, ecological and social conditions that threaten the well-being of the survivors of a massive earthquake may include the trauma of losing those near and dear to them, fear of aftershocks, the absence of basic necessities of life (food, shelter and clothes), fear of epidemics, the absence of means of livelihood, the emergence of cultural norms among the survivors (Acharya, 2000), the dehumanization implicit in taking compensation money (James, 2004; Scott, 2000), and the deformation of family and social support networks caused by the availability of compensation money (Parasuraman & Acharya, 2000).

I used the bio-psychosocial model, or the cultural psychological perspective of health and illness, and the ethnographic method to understand the phenomenon of suffering and healing under such a crisis situation in the post-earthquake period in Kachchh. In this chapter, I attempt to illustrate how the villagers’ belief in karma\(^1\) (internalized duty towards family, community and nature) aided the healing process by enabling them to transcend the boundary of the ‘I’ or the ego and making them realize that their selves were part of a pure and eternal consciousness. In other words, their belief in karma facilitated healing by ‘broadening their consciousness’.\(^2\) In this chapter, I first provide the perspective of health and illness on which this study was based. Then, after describing the ethnographic method employed in this study, I present and discuss the findings related to how the survivors’ cultural beliefs shaped the healing process as a ‘broadening of consciousness’. Finally, I also share some of my reflections on how carrying out this study has contributed to my growth as a person.

**Cultural psychological perspective on health and illness**

The bio-psychosocial model of health and illness shows how cultural beliefs shape the suffering and healing experiences of people (Kleinman, 1988). First, the...
meaning of a behavioural symptom and a sufferer’s response to it are driven by implicit cultural beliefs. For example, in Western cultures, symptoms of illness are taken to be the outcome of lack of control over the environment (Misra & Varma, 1999; Sinha, 1990). Second, every culture has moral exemplars of how pain and loss should be borne. Not adhering to such culturally-prescribed behaviour may shape suffering as a moral form of agony. In a subsequent work, Kleinman, Das and Lock (2000) have shown that political, economic and institutional power ruins collective and inter-subjective connections and thus propagates alienation among sufferers. Indeed, alienation induced by structures forms another kind of suffering.

In accordance with the culture-sensitive conceptualization of terms in the domain of health and illness, ‘suffering’ may be understood as the experience of pain or agony, within its socio-cultural, economic and political context, which is assumed to be shaped by one’s cultural belief system with regard to illness and health. Also, healing is conceptualized as gradual recovery from such an experience of pain or agony (Kakar, 1982; Kleinman, 1980, 1988; Ramaswami & Sheikh, 1996; Stacy, 1988). Palsane (1988, p. 7) indicates the roles of beliefs and customs of a culture in the process of suffering and healing, saying, ‘The belief system based on tradition helps in immunization against suffering, and in adaptation to and acceptance of suffering with equanimity. The belief together with custom provides the necessary psychological strength in times of crises and also makes available social network resources.’

Kleinman (1988) points out that cultural beliefs orient a sufferer to the questions, ‘Why me?’ and ‘What can be done?’ This orientation initiates the healing process as a reconstruction of suffering. Depending on the cultural belief, the healing process leads the person either towards better control (primary or secondary) over the situation or towards harmony with nature. As far as moral suffering and alienation due to socio-economic forces are concerned, providing emotional space to the sufferer initiates the healing process (Kleinman, 1988; Pennebaker, 1991). The verbal expression of suffering within an authentic relationship often helps reinstate a sense of self in the person (Brison, 1997; Ellingson, 2001).

‘Broadening of consciousness’ as healing: What literature says

Literature on the healing process also points to the ‘expansion’ or ‘reframing’ of consciousness as another indication of healing. According to Dethlefsen and Dahlke (1995), transcending suffering means giving up the ‘I’ or the ego, for wholeness is attainable only when one finally stops dividing off one’s ‘I’ from the rest of existence. Healing, thus, means getting closer to being ‘whole’.

Several ancient Indian systems of thought have focussed on how healing begins once a person is aware of his wrong identification with ‘I’ or the ego. Health, or healing, is a way of life, according to this tradition, where one recognizes and endeavours to realize the true nature of the human being, that is, pure or cosmic consciousness.
The Sāṁkhya system postulates two distinct ontological categories: *puruṣa*, which is pure consciousness, and *prakṛti*, which Larson and Bhattacharya (1987, p. 23, cited in Paranjpe, 1998b) have termed ‘primordial materiality’. Although conceived as a single category, the term *puruṣa* refers collectively to innumerable distinct centres of awareness, or individual ‘souls’. The basic nature of *puruṣa* is sentience, or the capacity for experiencing objects and events. In and of themselves, *puruṣas* do not act; they are passive witnesses to what goes on in the domain of *prakṛti*. The characteristic of *prakṛti* is to be the object of experience or ‘enjoyment’ (*bhoga*) for the *puruṣas* and thereby bind them within its domain, and to release (*apavarga*) them from its bonds so that they can remain in the ideal state of ‘isolation’ (*kaivalya*). *Prakṛti* comprises of three continually interacting components or ‘strands’ (*guṇas*), namely *sattva* (intelligibility, ‘enlightenment’ or lightness), *rajas* (activity, energy) and *tamas* (inertia, resistance, darkness). These strands continually supersede one another; one dominates while the others recede, thereby accounting for the constant changes in the domain of mind and matter.

According to Sāṁkhya tradition, *puruṣa* may mistakenly identify itself with the conditions of *prakṛti* and consider itself happy, sad or depressed, in accordance with the conditions of the three strands of which the mind and body are composed. As long as that mistaken identification continues, one experiences different kinds of affect—feeling happy for some time and sad or disturbed later, and back again, in endless cycles. However, it is definitely possible for the individual to use the inherent capacity for knowledge or correct discrimination and to realize that true selfhood involves being the uninvolved witness, as *puruṣa* is in its nascent state. After this insight, *puruṣa* returns to its nascent condition beyond the ever-changing domain of *prakṛti*, never again to return to the sorrowful experiences of mundane life.

Thus, as Paranjpe (1998b) points out, it is implied that the end of suffering means going beyond pleasure and pain, happiness and sadness. It is the ideal state of ‘isolation’ (*kaivalya*). After his death, the individual doesn’t return to the cycle of birth and death as he has attained release from *saṁsāra*, the wheel of life and death.

The monistic (*advaita*) school of Advaita Vedānta shares the similar goal of attaining ‘self-realization’, as observed in the Sāṁkhya and Yoga traditions. However, while both, the Sāṁkhya and the Vedānta systems, maintain that the Self is beyond pleasure, Advaita Vedāntists view it as blissful in nature.

The Vedānta tradition emphasizes that pleasure and pain, happiness and misery are a result of cognitive reconstruction, and so is the ego, which is usually mistaken for the true Self. If one performs meditation as prescribed by this tradition, the ego is cognitively deconstructed. When it is realized that the true Self does not believe itself to be a knower and agent, there is no one left to do something, to know whether the results are good or bad and thereby feel pleasure or pain.

In the Buddhist tradition, too, desire is viewed as a source of stress for several reasons (Evans, 1998). First, as in the Vedāntic tradition, it contributes to dualism
between the self and the object of desire. Instead of seeing the transcendence of the self with other persons and the natural order, desire sets up a false dichotomy of self and possessions of the self. Not only does this dualism make it hard to appreciate the source of one’s suffering, it also creates suffering since desires become self-perpetuating—one can always find more money, more food, more beauty etc. In this tradition, desire in itself is not necessarily a problem. Desire, but without attachment to its objectives, helps unlock overdependence on sensory stimuli by enabling a person to respond to pleasure and pain with equanimity.

Apart from acquiring an attitude of equanimity, Mahāyāna Buddhism provides the concept of mindfulness (Sattler, 1998). Mindfulness is becoming aware of how the law of cause and effect functions. Everything we encounter is caused by our former actions. These, in turn, affect the present situation, so we do not look for causes for our karma and situation other than in our own past actions. This minimizes our projecting of guilt on others, reduces stress between each other, and encourages mindful behaviour. With this realization, we may expand on these thoughts by becoming aware of all the countless beings we may have related to in our countless lives. As human beings, we depend materially and spiritually on other beings’ kindness. By gratefully remembering their kindness, we are moved to repaying it through developing bodhicitta (the mind of the enlightened) to help all beings.

It is important to note that Sinha (1990) points out that the belief in karma and fate and an attitude of acceptance have their basis not only in the religious-philosophical tradition but also in the nature of the physical environment and the climate that characterizes the Indian subcontinent. Many studies carried out to understand the attribution of illness in India and the Indian subcontinent have revealed karma and/or other metaphysical beliefs such as God’s will and fate as causal factors for illness or disability (Dalal, 2001; Desjarlais, 1994; Joshi, 1988; Naidu, 1986; Ojha, 1986).

Before we try to understand how the survivors of the Kachchh earthquake were able to overcome the impact of trauma by the broadening of consciousness, here is the method used for this study.

**Method**

I adopted an ethnographic approach for this study. It was planned that 20 adult members of earthquake-stricken families (in which at least one death had occurred) in each of Selari Village and Bhachau town would be followed up in three phases (fieldwork of 45–60 days once a year over a period of at least three years). The rationale behind selecting these two research sites was that one being rural and the other urban, they differed in their community life and cultural beliefs and customs. Another rationale was the difference in the number of people they lost to the earthquake (thirty three in Selari and several thousand in Bhachau).

I began the fieldwork in November 2001 in Selari. Although I had initially participated in a rehabilitation programme (run by the University of Delhi in the areas of health, earthquake resistant housing, education etc.) as a volunteer, I had
to take up the role of a teacher in the high school at the village. Through the relationship I developed with the students there, it became possible to build trust with the villagers. Throughout the research process, the villagers considered me a resource person in education. Similarly, in Bhachau town, I began fieldwork as a volunteer at ‘Child Line’, an NGO. It helped me in getting connected with the affected families.

**Participants**

Of the 20 families that participated in all the three phases of the study at Selari village, 19 were Hindu families and 1 a Muslim family. Of the 13 survivors who were farmers, 5 had pump sets to use underground water for irrigation. The other 8 farmers were solely dependent on rainwater for irrigation. It may be noted that a ‘good monsoon’ that is ‘sufficient’ for cultivation comes to Kachchh once in every three or four years. Therefore, these families have to work in the fields of other farmers. Their poor economic condition sometimes leads them to borrow money. The 7 non-farmer families belonged to the lower socio-economic strata. Their traditional occupations were tailoring, sheep-rearing, manual labour and shop-keeping.

Among the survivors in Bhachau, 2 were Muslim and rest 31 were Hindu. They held a variety of occupations, including business, manual labour, government employment (teacher, engineer and water-motor operator) etc.

**Data collection and analysis**

The interviews were conducted in Selari and Bhachau, in family settings in which other family members also voluntarily shared their experiences. In Selari, one of the key informants, Sudhakar Bhai, helped the researcher by acting as a translator (Gujarati to Hindi and vice-versa). The interviews in Selari were conducted during the evening hours, when the men in the family returned from work. In Bhachau, interviews with students were conducted in a school. In the first phase, interviews were tape-recorded; in the subsequent phases, notes were taken during interviews. The interview guidelines were:

1. What were the experiences and constructions of suffering and healing among the survivors?
2. What was the influence of cultural belief systems (about earthquakes, health, life and death) on the experiences and constructions of suffering and healing?
3. What was the role of social support networks (family, relatives, social groups and NGOs) in the healing process?
4. How did the socio-economic conditions influence the support networks and shape the healing process?

Besides the semi-structured interviews with survivors, focus group discussions and participant observations among the survivors and semi-structured interviews of key informants (journalists, social workers, creative writers etc.) were also conducted.
in order to provide a holistic understanding of the suffering and healing process, utilizing different data sources through theoretical sampling.

I analysed the experiences of suffering and healing in the light of the cultural beliefs and constructions of health and illness, which is in accordance with the meta-theoretical framework of the bio-psychosocial model (or cultural psychological perspective of health and illness) adopted for this study. A combination of thematic analysis and constructionist grounded theory was utilized to analyse the narratives. The approach of constructionist grounded theory (Charmaz, 1995, 2001; Pidgeon & Henwood, 1997) also enabled me to recognize the influence of my perspective (of existential philosophy) and experiences on the development of themes and categories through an empathic understanding of the experiences of the survivors.

The following section presents constructions of health and illness among survivors in the village, which has been shaped by their belief in karma.

Constructions of health and illness in Selari village

The interview with Mansingh Baba (a priest of Selari village and one of the key informants) was of much value as it helped in gaining a better understanding of the phenomenon of suffering and healing.

When I asked him what he understood of the reasons for the suffering caused by the earthquake, he said,

According to me, the earthquake occurs because gases get accumulated inside the earth and it has to come out due to pressure. But the gases get accumulated inside the earth due to the result of our karma (one’s duty towards oneself, family, community and nature). Tell me, who saved us (pointing towards himself and Amrit Bhai, the interpreter) from the earthquake? It was nothing but our karma. If people lead their lives according to dharma (principals of virtue)—and by dharma, I mean mānava dharma (humane religion), which is above all caste, religion and community—they will achieve ānand (joy). If they don’t do it, they will suffer.

It was evident from the interviews of Mansingh Baba and the survivors that the notions of ‘suffering’ and ‘healing’ were constructed and experienced around their ‘theory of karma’, which centred on the following themes. [Themes (a), (b) and (c) emerged from the narratives of all the survivors, and theme (d) emerged from the narrative of a priest who was one of the key informants]:

(a) Exercising one’s potentialities to the fullest
One of the survivors, Amba Bhai, while sharing his construction of sukh (health and/or happiness) and dukh (illness and/or sorrow), said, ‘mānava dharma says that we must do our karma by doing utmost labour we can to earn our livelihood to take care of our family and serve the society’.

Almost all the men in families where one or more deaths had occurred were back to work after a month or two. Among them were Naresh Bhai, Amba
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Bhai, Kailash Bhai and Pravin Bhai, whose families had lost two or three of their members.

(b) Diffusion of boundaries between self and other ‘beings’

Thus, action should be oriented towards the welfare of not only the self, but also the other ‘beings’ of nature.

In our interaction about how he construed *sukh* and *dukh*, Jayendra Bhai said, ‘Our *karma* should be directed not only towards the welfare of our family and the poor but also towards the birds and animals which are a part of our living. I regularly give *bājrā* (millet) to the birds.’

In this connection, it would be pertinent to take note of the common practice in the village of feeding birds, cows and other animals, apart from helping fellow human beings. This is not merely a ritual to be completed—several survivors (for example, Jayendra Bhai, Maya Ben, Nirmala Ben and Vira Bhai) expressed their serious concern with keeping animals fed. They said that such a practice gave them *santoṣa* (satisfaction) and *śānti* (peace of mind).

(c) Possessing just enough for a ‘healthy’, non-luxurious living

Amba Bhai told me,

> The disasters like this earthquake take place due to the fact that we commit *pāp* (wrong deeds in violation of *karma*). Having plenty for myself and not bothering about the poor is ‘not following my *karma*’. We should have only that much *dhan* (material possession) with which we can take care of our family members. The rest should be given to the needy people and be utilized towards the welfare of the society.

During the days of scarcity two or three days after the earthquake, despite being poor and suffering a death in the family, Vira Bhai distributed all of his stored *bājra* to the homeless. Paras Bhai, a farmer who had lost his 13-year-old daughter, built a bus stop in the village with the money he had received as compensation for her death.

(d) Forces of nature (that cause happiness and sorrow) are beyond human control

How much these forces oppress a human being depends on the nature and intensity of the wrong deeds of his/her past and present lives. Through exercising one’s potentialities to the fullest in this life and living in harmony with the forces of nature, one can rise above these forces and merge with the *paramātmā* (the Almighty) to end the cycle of life and death.

The survivors had a firm belief that carrying out one’s *karma* (which intricately relates one to family, society and nature through one’s duties towards them) is the necessary condition for the attainment of *śānti* (peace of mind) despite one’s experiencing *darad* or *dukh* (agony, pain, illness). *Karma* was taken as the key means of maintaining *śānti*. For example, a farmer, who was prevented from farming due to severe asthma, expressed his *śānti* as he was able to perform his duty of
‘guarding the house’. That *Karma* or *pravṛtti* is the only medium for śānti in their lives is captured well by the following saying:

*Bhūtkāl no bhuli jāo,*  
bhaviṣya ni chintā nahin karo,  
vartmān mā pravṛtti karo.*  
(Forget the past, do not worry about the future and perform your duties in the present.)

Let us now find out how their belief in *karma* aided healing through the ‘broadening of consciousness’.

**Healing through ‘Broadening of Consciousness’: Some evidence**

An analysis of the narratives provided certain themes about the healing process. They pointed out that (a) with their belief in *karma*, they could *re-organize their selves as a continuous process across time* and this process gave them new and positive meaning in life; (b) carrying out their *karma* (internalized duty towards self, family, community and nature) made them experience śānti (peace of mind or equanimity); and (c) the death of a loved one became an *inspiration for them to follow the path of karma*. These themes that show the healing process as a broadening of consciousness are presented and discussed below with verbatim accounts or my observations in their support.

**Healing as reorganizing self as a continuous process across time**

Survivors construed self as a continuous process across time by attributing their present condition of illness and health to performing *karma* in the past. Krishna Bhai, 38, who lost his 12-year-old daughter, said,

> We are experiencing dukh due to our indulgence in pāp in the past or in *pūrv jaṃm* (previous birth). In this life also, in the past, we committed pāp (sin or non-adherence to *karma*). For example, when the Kargil war took place, people of Kachchh didn’t give any financial support but, now in troubled time of Kachchh, people from outside have come to provide all kinds of support. I have decided that I am going to build a structure where animals like cows and birds can have some cereals to eat. Let us do something for others. What shall we take with us after we die?

Most participants in the focus group discussion also shared a feeling that the pāp they had committed in the past had led to the earthquake and the resulting dukh. One of the participants said, ‘Our dukh is a result of our own pāp that we committed by becoming selfish and not caring about poor and weak. If we carry out our *karma*, God will provide us with the strength to endure the difficulties produced by the earthquake.’

It was evident that their belief in *karma* had facilitated a *cognitive restructuring* of their state of loss. Almost all the men of those families where one or more deaths had occurred were back to their work after two to three months. Among
them were men like Naresh Bhai, Amba Bhai, Kailash Bhai and Rama Bhai, whose families had lost two or three members. All said that through their work, they attained some *santoṣa*, or satisfaction, that they were taking care of their families. Also, they considered their involvement in *karma* to be the only way to face and transcend *dukh*. Naresh Bhai said,

> *Duḥkh* is there and it will subside only with time but our *karma* is in our hands which is the only *truth* or the *way* out. It is perhaps because of our *pāp* only that the family members have expired. Through doing our *karma* only, we may attain some *santoṣa* in present and in future.

It is quite clear that health for them is to ‘move on’ or to carry out their duties towards their families and the society, despite suffering the sorrow of losing their near and dear ones. Atwood and Maltin (1991, p. 375) have noted a similar pattern of healing among Easterners: ‘The best way for [Easterner] patients to handle unpleasant feelings is to recognize them, to accept them, and to go about their business. In time, unpleasant feelings will pass …. Just as one cannot hold on to positive feelings forever, one cannot hold onto negative feelings forever. Feelings are temporary experiences.’

Omprakash (1989) points out that belief in *karma* has important psychological implications. These include an uncritical acceptance of misery and hope for a better life in the future through ‘right’ actions. The patterns of feelings and behaviours observed during the second and third phases of the study indicated that most of the survivors engaged actively in their daily activities. Even those farmers who had to depend solely on the monsoon worked hard in the agricultural fields of others (who could afford to have alternate means of irrigation) to earn their livelihood. They expressed a sense of satisfaction that they were able to earn.

Amba Bhai, a tailor, who suffered an injury in his pelvic joints, said that he had to work for double the hours he used to work before the earthquake because he had to get his sister married and repay the debt he had incurred. It is apparent that the belief in *karma* enabled the survivors to accept their suffering and move towards a *positive meaning in life*, which was to get involved in their work so that they could take care of their families.

Belief in *karma* is widely accepted as a causal explanation for suffering not only in the Buddhist and Hindu philosophical traditions (Radhakrishnan, 1926), but also among contemporary Indians (Kohli & Dalal 1998; Sinha, 1990). Also, as evident from the examples quoted above, it did provide a space for the survivors to reconstruct their loss and move towards a positive meaning in life.

**Śānti through karma**

The survivors expressed a strong sense of self located in relationships with family, society and nature by carrying out their internalized duties towards them. They also shared experiencing *śānti* or peace of mind or equanimity through carrying out their *karma*. Maya Ben, 48 years old, lost her husband in the earthquake and lives with one of her granddaughters in her house. She wanted neither to live with
her son, who does some business in Mumbai, nor tried to persuade him to stay with her in the village. She told us that while her son did all the rituals associated with his father’s funeral and stayed with her for two weeks, she didn’t ask him to stay back as she didn’t want him to stay against his wishes. She told us,

My only son, who lives in Mumbai, calls me there feeling that I would be lonely here. But I do not like to leave this place. I have brought back one of my granddaughters from Mumbai and I look after her. Living in this place, I would be able to do some puṣya like, sevā or service to animals, birds, cows and poor people. Living here, doing this gives me Śānti.

Vira Bhai, 52 years old, and respected in the village, lost his mother in the earthquake. He said,

Due to health reasons, I am unable to go to the field and work hard. Therefore, I stay back at home, guard and manage it. All the rest in the family, my children and my wife are there in the field to contribute to farming. Dukh has reduced among them too. Śānti chhe (I have peace of mind).

Through their belief in karma, survivors experienced śānti as they could reorganize (or meaningfully define) their selves in harmony with their family members, community and nature. In some cultures, as in Selari village, a harmonious relationship with other human beings and nature is considered important in order to experience positive health. For example, Torsch and Ma (2000) found that among elderly Chinese-Americans, ‘inter-personal harmony’ was regarded essential to healthy living. Inter-personal harmony was characterized as caring for others, sharing among people and maintaining a strong family system. Pachuta (1996) emphasized that healing in the Eastern system is circular, that is, the universe as well as the individual can be conceived of as a circle that contains every explicit duality as an implicit unity; where oneness with the universe is a given, and one continually seeks balance and harmony within this oneness. Jensen and Allen (1994) noted that ‘wholeness’ with the world is associated with the experience of health. Similarly, Tolle (2003) emphasized that every form of existence in the cosmos is intricately related. One cannot understand what role a seemingly senseless event may have within the totality of the cosmos, but recognizing its inevitability within the vastness of the whole can be the beginning of an inner acceptance of what is and thus a realignment with the wholeness of life. Thus, a socio and eco-centric health belief may help reorganize one’s self within a harmonious relationship with some form of existence (family, society or the entire cosmos).

Lewis-Fernandez and Kleinman (1994) and O’Nell (2004) have pointed out that in some cultures, cultural beliefs of health and illness are based largely on a socio-centric ideology, that is, the experience of suffering and healing are situated in the networks of social relationships. Similarly, survivors’ belief in karma is one such socio-centric cultural belief that also locates one’s experiences of suffering and healing in relationship with one’s society and ecology. Also, it is generally believed that in the Indian cultural tradition, no sharp boundaries are drawn between the individual and his environment. A healthy individual is one who has a
harmonious relationship with the community, surroundings and the supernatural world (Paranjpe, 1998b; Sinha, 1990).

**Departed family member as an inspiration to performing one’s karma**

Some survivors also shared their feeling a sense of self through carrying out their internalized duties towards family, society and nature out of an inspiration gained from the death of a family member. It was evident in the case of Paras Bhai, a 42-year-old farmer who owned a *sūkhī khetī* (farmland completely dependent on rainwater) and who lost his 13-year-old daughter.

Paras Bhai, being a manual labourer, had received Rs 80,000 as compensation for her death. I was filled with a sense of reverence for him when I came to know that he had added Rs 20,000 to this amount and had spent the entire sum in rebuilding the village bus stop, which had been severely damaged in the earthquake. He told us that he had not earned the compensation money, and therefore didn’t want to use it for himself. And since the money was associated with the death of his daughter, he wanted to spend it on a good cause. He said, ‘My daughter Fuli Ben was very dear to me. She is no more (physically) with me but she still inspires me to do my *karma* which is meant to do good to all the people around us. So, she has inspired me to build this bus stop.’

In the third phase of our interaction, Paras Bhai reiterated the change in his approach to life that was brought about by the death of his daughter. He said,

> The death of my beloved daughter showed to me that our lives and those of our loved ones won’t last for ever. Therefore, whatever time we have in this world, we must try to do whatever we can for the society and humanity. That is real *prem* (compassion). Building the bus stop for the village is a small step in that direction.

As maintained in various traditions of Indian thought (Śāmkhya-Yoga, Advaita Vedānta, Buddhism etc.), we are not merely bodies or minds: we are a part of, or a manifestation of, a cosmic or pure consciousness (Evans, 1998; Paranjpe, 1998a; Sattler, 1998). A crisis situation like the death of a loved one may, besides inducing a sense of loss, lead to the realization that the sense of loss is because of the belief that we exist only as bodies or minds. Once we realize that we exist as a manifestation of a higher or pure consciousness, we may experience that, irrespective of existing or not existing as bodies or minds, we are *one* as we are the manifestations of *one*. And this experience or realization may be an inspiration that enables us to devote our lives to contributing (or doing our *karma*) to harmony among all beings of nature. This inspiration is reflected in the above-mentioned case of Paras Bhai.

Ramesh Bhai, a 45-year-old businessman in Bhachau town, lost his 38-year-old wife and 14-year-old son in the earthquake. Although he didn’t belong to a village and shared a health belief based on *karma*, he considered himself and his loved ones as part of a larger ‘process’ or consciousness that is continuous over time. That is probably why for him his departed family members became a source of inspiration to do something positive in life by looking after his daughters. He and his surviving daughters, in their constant struggle against standing losses and
fighting the discrimination by authorities, had apparently accepted their trauma. They wrote the following couplet below the photographs of their departed family members:

\[\begin{align*}
Tāme āwyā nahotā kain \\
thodā ghanā varas laīne \\
tame to jāwso ḫṛdaymā \\
bhavo bhavni taras laīne
\end{align*}\]

Couldn't you come (to this earth)
for some more years?
You shall remain in my heart making me long deeply
(for your physical presence) for eras to come.

Ramesh Bhai said, ‘This couplet is a mark of what they (the departed souls) mean to us. They are still a part of our existence and give us strength to face this difficult time and that is why they will be missed.’

When I met him again in the third phase, he looked much calmer and more active. He told me that he had got one of his daughters married and was planning to get another daughter married within a year.

The themes outlined above indicate that healing may be considered a process of broadening of consciousness which enables a person to think of all forms of existence as manifestations of a higher consciousness (continuous over time and space). And the death of a loved one may, in fact, provide an opportunity (despite a feeling of loss) to experience “being a manifestation” of that higher consciousness. It is also evident from these themes that such a realization leads one to act towards the harmony or well-being of all beings of nature, which provides a person the experience of equanimity (\textit{sānti} or \textit{santoṣa}).

**Reflections: How I felt ‘expanded’/harmonized during the research**

In the ‘Method’ section, I had mentioned that my own subjectivity as a human being was also affected during the process of data collection and analysis. Qualitative methods do accept and provide space to the idea that we, as researchers, cannot remain ‘neutral’ to or detached from the process of research. I must share with the reader that my inclination towards existentialism did shape the coding process, which made the patterns in the narrative intelligible. It is evident from the themes such as—how a crisis situation re-affirmed the survivors’ belief in \textit{karma} with which they could \textit{re-organize their selves as a continuous process across time} and this process gave them new and positive meaning in life. Besides this, the fact that I could empathize (to whatever extent possible) with the experiences of loss of some of the survivors also lent meaning, or authenticity, to the coding process. Besides aiding to the authenticity of analysis, an empathic understanding of the survivors’ experiences also became for me, a harmonizing experience (of painful personal experiences of the past and the present that were revived in the process of research).

During the first phase of the study in Selari village, I recall sitting in the
house of the middle-aged, childless Nirmala Ben, whose husband had died in the earthquake. An ex-sarpanch (a relative of hers) and Sudhakar Bhai (my interpreter) were sitting with me. After speaking with the ex-sarpanch about whether she had received compensation, I tried to initiate an interaction with her by asking her about the work that she was doing. After a silence of about two minutes, she slowly said something that I took to mean, ‘Something ... I do something’. Then tears came in her eyes and none of us spoke for more than 10 minutes. With tears in our eyes, I indicated to Sudhakar Bhai to tell her to rest, and that we would come again. She responded that we would have to take tea, which she then went to make. The intensity and nature of the pain that that single sentence of Nirmala Ben contained was far greater than any pain I have faced till now in my life. It was extremely difficult for me to empathize with the pain she was feeling. Her sorrow and her silence made me feel once again the grief and loneliness that I had felt when my mother was seriously ill (and had to be hospitalized in a different town) following the death of my eldest brother in 1982. I was five or six years old then. I do not remember crying, but I can still feel the loneliness and the peculiar sense of ‘meaninglessness’ associated with that time. My interaction with Nirmala Ben made me realize the ‘littleness’ of my suffering in life.

I was, however, happy to see Nirmala Ben in Phase II of the study, when she was managing her life in a much more positive way by regularizing her daily routine, which consisted of worshipping, rendering services to a priest, Mansingh Baba, and organizing religious activities such as satsaṅg. In line with what Ellingson (2001) said, this participatory research also provided me the space to positively and compassionately re-experience my own trauma while empathically relating with Nirmala Ben’s suffering.

Having met and interacted with Vira Bhai and Paras Bhai (who contributed towards the well-being of others while themselves being in crisis), I was filled with reverence for them. I realized that I too was in search of a positive meaning in life. It was probably that search that led me to the earthquake-affected area in expectation that the survivors would also move towards some positive meaning in life after the crisis. I could empathize with them when they said that they experienced śānti by carrying out their duties towards family and society. I, too, had a harmonizing experience—that of being able to contribute towards the healing of traumatized people by providing them, to the best of my ability, with emotional space through our interactions.

Endnotes

1 In this study, although I found the belief in karma to be quite prevalent in Selari village, some urban survivors too shared their realization of the temporariness of worldly objects and activities. Furthermore, their action (for example, nurturing younger ones to give a new meaning to life) showed a commitment towards contributing whatever they could to nature’s “beings”. So, in some of the urban survivors, too, I observed a tendency to transcend the boundary of their ‘I’.
2 Although in this paper I have written about how the metaphysical beliefs of the survivors made healing possible, I also found that healing was rare among those survivors who held on to materialistic beliefs. Particularly in the urban setting, I found threatening post-earthquake socio-economic events (e.g., development of the boundaries of caste and class) that were impeding the healing process, as there the individualistic lifestyles and materialistic notions of health and illness disabled them from positively re-constructing their sorrow. I have reported these findings elsewhere (see Priya, 2004).

3 These participants are referred to as ‘survivors’ throughout this paper. Because of ethical concerns, the names of these survivors and other key informants that have been reported are not their original names.

4 ‘Kargil war’ is a popular term given to an Indian Armed Forces’ military operation in 1999 in the state of Jammu and Kashmir to drive out infiltrators from Pakistan who had crossed the Line of Control into India. These infiltrators had constructed bunkers in the Indian state of Jammu and Kashmir from where they waged a mini-war on the Indian armed forces.

5 It took my mother almost a year to recover from meningitis and another year to completely recover from the loss of memory resulting from the disease and its treatment.

References


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