Panel ABSTRACT

Panel 02: Engaging Plurality, Negotiating Diversity: Sowa Rigpa Practices and Perspectives in/on a Changing World

Organizer: Stephan Kloos, Barbara Gerke

Abstract: Over the past decade, Vienna has established itself as a global, vibrant hub for interdisciplinary medical anthropological research on Sowa Rigpa, encompassing Tibetan, Himalayan, and Mongolian traditions. This panel brings together – and into conversation with each other – scholars based in or connected to Vienna and their diverse Sowa Rigpa perspectives. We actively seek to expand this network internationally by inviting contributions from scholars and practitioners, drawing from anthropology, Tibetan studies, medical and social history, medical sociology, and related disciplines that explore or visually illustrate Sowa Rigpa pluralities. The panel aims to explore how Sowa Rigpa practices and perspectives operate dynamically in a rapidly changing world, shaping each other and intersecting with larger social ecologies, political economies, and multispecies environments. Starting from the premise that diversity – across practices, perspectives, scholarship, and medicine – is an asset and a strength, we ask how Sowa Rigpa pluralities are negotiated in both past and present.
Key questions include: How do Sowa Rigpa practices shape and are shaped by particular worldviews? What role do plural academic perspectives of scholarship on Sowa Rigpa play in our understandings of this medical tradition? How might the practices of scholarship and medicine be connected or even influence each other? By addressing these questions, this panel contributes to broader discourses on plurality, encouraging interdisciplinary dialogue on the global manifestations and trends of Sowa Rigpa's pluralistic landscapes of health and healing.

SESSION SCHEDULE

18.09.2025 | Slot 3 & 4| 4-0-3
Elizabeth Turk: Searching for the 'root cause' of illness and moral aetiology in Mongolian health settings

Kei Nagaoka: Herbs, Senses, and Sowa Rigpa: An Ethnographic Study of the Embodied Experience of Herbal Medicine in Arunachal Pradesh, the Eastern Himalayas

Stephan Kloos: Rethinking Participant Observation: An Exile Perspective on Tibetan Medicine

Barbara Gerke: Negotiating Legitimacy and Healing: Plural Landscapes of Sowa Rigpa and Governance during the COVID-19 Pandemic in India and Bhutan

Stacey Van Vleet: Bonesetting between Tibetan scholarly medicine and Mongolian "common knowledge"

Patricia Mundelius: A Paradoxical Kind of Suffering: Negotiating Emotional Care within Sowa Rigpa Consultations in Europe

Isabella Würthner: The Female Reproductive System And The Role Of Gender-Specific Infectious Diseases In The Tibetan World

Dara Bramson: Braiding Knowledges: Ethnographic Case Studies of Sowa Rigpa in Exile

Searching for the ‘root cause’ of illness and moral aetiology in Mongolian health settings

Elizabeth Turk

From practitioners of traditional and bio- medicine to shamans, their patients and lay people, many Mongolians stress the importance of identifying the underlying ‘root cause’ (ündsen shaltgaan) of illness as distinct from diagnosis. Whilst this search can take patients to a variety of healers and ritual specialists, identifying and treating the 'root cause' of illness is often associated with traditional medicine (ulamjlalt anagaakh ukhaan), the re-made contemporary form of Gelukpa medicine that dominated regionally for centuries. This ‘root cause’ approach stands in contrast to biomedical perspectives and practices that now predominate, following the introduction of Soviet scientific and medical traditions in the early 1920s which took hold across the country in the post-WWII period.

Reflecting the regional legacy of Gelukpa medicine (or Sowa Rigpa), ‘root cause’ as analytic helps tease out and make explicit the often-concealed connection between fact and value, or the moral dimensions of medical facts when assessed meta-causally (Taussig 1970; Evans-Pritchard 1976). Whilst recent literature in medical anthropology highlights the co-constitutive relationship between biological and social life, attending to meta-causal narratives such as 'root cause' sheds a different, moral-semiotic light on bio-social entanglements. The biological and social do not just make each other. The body tells us about social life through its symptoms and signs: where social relations are neglected or exploitative, have broken down or failed to meet normative expectations, or relations that should not have existed in the first place.

Herbs, Senses, and Sowa Rigpa: An Ethnographic Study of the Embodied Experience of Herbal Medicine in Arunachal Pradesh, the Eastern Himalayas

Kei Nagaoka

This study explores the sensory experience of herbal medicine among the Monpa through an ethnographic investigation of Tawang in Arunachal Pradesh, northeastern India. Since the Buddhist revival onset among the Monpa in the 1990s, activists have emphasized Sowa Rigpa, alongside Buddhism and the Bhoti language, as integral to Monpa culture. Practitioners, called amchi, who graduated from Sowa Rigpa institutions hold recognized social status. Despite the absence of a hereditary amchi tradition in Tawang villages, the Monpa incorporate various Sowa Rigpa herbs into their daily lives. Moreover, local healers prepare specific herbal medicines to treat witchcraft-related ailments. The relationship between the Monpa and Sowa Rigpa is embedded in their bodily sensitivity to herbs and the historical context of Tawang, Tibet, and Indian border politics. I argue that the Sowa Rigpa experience encompasses the perceived potency of medicine and the sensations, emotions, and values affected by herbs. This study introduces the perspective of bodily sensibility in human-plant relationships to the discussion of Sowa Rigpa plurality. Rather than framing Monpa herbal medicine practices as a "periphery" of the institutionalization of Sowa Rigpa by amchi, I explore the rich sensory worlds of Sowa Rigpa, where humans, organisms, deities, and medicines are intertwined. Based on intermittent fieldwork conducted between 2010 and 2016, this study contributes to Sowa Rigpa studies, the medical anthropology of the senses, and ethnographic research on health in the more-than-human world.

Rethinking Participant Observation: An Exile Perspective on Tibetan Medicine

Stephan Kloos

Anthropological fieldwork on contemporary Tibetan medicine, also known as Sowa Rigpa, can be challenging for several reasons. One of them is that its busy institutional context does not easily lend itself to participant observation. As living or even "hanging out" with the doctors is often not an option, research mainly takes the form of interviews and conversations. Besides, anthropologists cannot claim any privileged position as "observers", since Tibetan practitioners themselves are continuously and critically observing Sowa Rigpa's developments. I argue that in such contexts, "participant observation" takes on a different, more literal meaning: through conversations as well as analysis and writing, we participate in the Tibetans' act of observation, i.e. their intellectual efforts to witness, reflect, and understand. Participation in this sense is not a method, nor an act of representation, translation, or hermeneutics; rather, it is a mode of engagement that encompasses all aspects of our academic labor.

Beginning with a problem of ethnographic method, the focus of this paper thus expands to theory-making. This goes beyond the usual anthropological attention to cultural or historical context, or even the "sowa rigpa sensibility" suggested by Adams, Schrempf and Craig (2011). I argue that on this level, "participant observation" entails sharing a fundamental Tibetan positionality of displacement, that is, exile as a unique perspective to think critically about Sowa Rigpa's role in the contemporary world. In conclusion, this paper will propose that rather than theorizing exile, a more productive, participatory

approach involves theorizing with exile.

Negotiating Legitimacy and Healing: Plural Landscapes of Sowa Rigpa and Governance during the COVID-19 Pandemic in India and Bhutan

Barbara Gerke

The COVID-19 pandemic presented a critical moment for reconfiguring the roles, visibility, and legitimacy of traditional medical systems worldwide. This paper examines how Sowa Rigpa practitioners in Buddhist communities in India and in Bhutan navigated competing medical paradigms, state restrictions, and shifting public expectations in the context of pandemic governance. Based on ethnographic fieldwork (2020, 2023–2025), I analyze how divergent relationships between government institutions and traditional medicine shaped practitioners' capacities to act, adapt, and maintain trust.

In India, Tibetan exile institutions such as the Men-Tsee-Khang (Tibetan Medical and Astro Institute) distributed Sowa Rigpa formulas for immune support and COVID-19 symptom management, working alongside the Central Tibetan Administration and biomedical health services. In Bhutan, by contrast, Sowa Rigpa practitioners were not permitted to treat COVID-19 patients. Instead, they promoted mental well-being through online exercises rooted in Vajrayāna Buddhism and supported public health efforts, for instance, through managing quarantine centers.

Through two comparative case studies this paper explores how Sowa Rigpa practitioners engaged with distinct political-medical spaces across different governance systems. I investigate how trust, legitimacy, and confidence were negotiated within these plural health worlds, and how traditional practitioners reconciled therapeutic exclusion with their permissible roles in religious and preventive health domains. Findings contribute to broader conversations on how Sowa Rigpa practitioners adapted and negotiated intersecting paradigms of science, religion, and state authority in times of crisis.

Bonesetting between Tibetan scholarly medicine and Mongolian "common knowledge"

Stacey Van Vleet

This presentation will examine two related manuscripts on bonesetting, both illustrated with Tibetan captions, dating from the 18th or early 19th century. On the one hand, these manuscripts were likely produced within a Buddhist institutional context, at the medical college (Tib. sman pa grwa tshang) of Labrang Tashikhyil monastery in the Tibeto-Mongolian region of the Blue Lake (Tib. Mtsho sngon, Mong. Kokonor). On the other hand, bonesetting had not been a major part of the Tibetan scholarly medical tradition of the Four Tantras (12th century) and its commentaries before this period. Rather, scholars have associated bonesetting expertise with the vernacular skills, or "common knowledge," of Mongolian physicians who came to play a great role within central military and medical institutions at the court of the Qing Empire (1644-1911). Examining these bonesetting manuscripts in terms of their content, linguistic and artistic features, and

historical context, we will consider how they bridged Tibetan and Mongolian cultural traditions, scholarly tradition and "common knowledge," and Buddhist and imperial institutional contexts. Attending to these overlaps, I argue, reveals significant historiographical blind spots that have rendered the central role of Tibeto-Mongolian medicine and Buddhist institutions invisible within histories of medicine and governance in "Qing China."

A Paradoxical Kind of Suffering: Negotiating Emotional Care within Sowa Rigpa Consultations in Europe

Patricia Mundelius

In recent decades, Sowa Rigpa practitioners gradually extended the reach of their practice, and today more and more amchi are travelling regularly as itinerant doctors to treat patients outside South Asia. While treatments are being sought by patients for various reasons, there is a common agreement among practitioners that western patients are 'more needy' in terms of emotional care and mental health support. This relates to the general understanding of a high prevalence of rlung disorders in western countries due to various outer and inner conditions. This increased need for emotional support, however, appears as a kind of 'paradoxical suffering' that is born out of relatively comfortable livelihoods and is thereby at times difficult to relate to from a Tibetan worldview that is based in specific Buddhist understandings of suffering and agency. Some practitioners, however, specifically respond to this need and negotiate this diversity by reframing their consultations and providing more space for emotional care.
This paper looks at the pluralistic landscape of Sowa Rigpa consultations in European countries and asks to what extent this perceived difference in suffering and the need for emotional care shape Sowa Rigpa consultations with European patients and how practitioners attempt to establish relationalities within different worldviews. The aim is to show that the emphasis on emotional care lends Sowa Rigpa practice in the west a particular cosmopolitan character.

The Female Reproductive System And The Role Of Gender-Specific Infectious Diseases In The Tibetan World

Isabella Würthner

In Tibetan medical literature from around the 8th century, we find the category of disorders due to 'microorganisms' (srin) in the context of reproduction and women's health care. In balance, these 'microorganisms' contribute to bodily development and metabolism, but their imbalance negatively impacts health. This presentation focuses on the type of 'microorganisms' found in the uterus, exploring whether they represent sexually transmitted diseases. What classifications, causes, symptoms and treatment methods are associated with them? Are there prescriptions for preventive measures such as behavioral and nutritional recommendations? How do these theories relate to those of other infectious diseases in Sowa Rigpa? These questions will be examined mainly on the basis of a critical translation and analysis of the relevant passages of the classical Tibetan medical compendium, the Four Treatises (rGyud bzhi), traditionally attributed to gYu-thog Yon-tan mgon-po (12th century), as well as commentaries such as the Blue Beryl (Vaiḍūrya sngon po) by Sangs-rgyas rgya-mtsho (17th century).

Insights into the development of the description of uterine disorders caused by srin are provided by one of the earliest medical texts, the Moon King (Zla ba'i rgyal po), which, as far as is known, was written or translated in the 8th or 9th century. The textual research will be complemented by anecdotal evidence and the perspectives of contemporary Tibetan physicians obtained through oral interviews. The aim of this presentation is to provide basic knowledge of the female reproductive system in relation to gender-specific infectious diseases.

Braiding Knowledges: Ethnographic Case Studies of Sowa Rigpa in Exile

Dara Bramson

In the past decade, Robin Wall Kimmerer popularized the notion of “braiding” in Braiding Sweetgrass: Indigenous Wisdom, Scientific Knowledge, and the Teachings of Plants. Her work has become increasingly relevant in the context of environmental stewardship and offers important applications to cross-cultural integrative medicine. Considering the distinction between the process that Mi’kmaq peoples call "two-eyed seeing" and the method of "braiding knowledges”, this paper engages these concepts in the clinic based on research conducted on Tibetan medicine in exile in North India. This exploration aims to illuminate the tangible practices, successes, and challenges of the braided methodology. What are the ways in which indigenous knowledges (IK) and western science (WS) can unite and coexist as different but equal knowledge systems in response to an increasingly global healthcare landscape?