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Healing as Social Practice: Magic, Religion and Cure in Rural Amritsar

Dr. Tajinder Kaur[1], Dr Avinash Verma[2], Dr Bhawna Kashyap[3]

[1]Assistant Professor: Khalsa University, Amritsar
Email ID:- Sandhutaj89@gmail.com
[2]Assistant Professor: Khalsa College for Women, Amritsar
Email ID:- avinashverma752@gmail.com
[3]Assistant Professor: VMS College of Law, Batala
Email ID:- meet14786@gmail.com

ABSTRACT
The study was undertaken to identify the role of magico-religious folk healing in maintaining health and disease at local level. The term "magico-religious" includes belonging to or having the character of a body of magical practices intended to cause a supernatural being to produce or prevent a specific result. The present study was conducted in the rural areas of Amritsar district. The observation, case study and interview methods were used to gather information with the ultimate objective of comprehending factors contributing to the enduring prevalence of magico-religious folk healing practices and its significance in meeting healthcare requirements. The analysis demonstrated that individuals continue to rely on faith-based healing techniques mainly due to two prime factors including failure of modern medical treatment and for the psychological contentment they yield, which is rooted in faith; not in ignorance. It emphasises the need for modern physicians to view health through cultural lens and address it in culturally suggested ways, wherever necessary.
Keywords:- Health, Illness, Magic, Magico-religious Healers, Religion.

1. INTRODUCTION

Health is a valuable asset for both the country and the community. The continued existence of human society depends on the health of its citizens. It is the most basic and primary need of an individual as well. Throughout the history of humanity, health and illness have always coexisted. Since health is an essential input for development at the individual, community, and national levels, societies have tried to find out the natural ways and means to eliminate disease and other forms of human suffering. Folk wisdom played a crucial role in the right use of natural healing methods and maintaining the health of its community members. Magic and religion played a vital role in primitive people's social lives. People in primitive civilizations were engaged in a variety of magico-religious practices as a result of their faith in the supernatural realm. Health is also linked to God's or Goddess' wrath, black magic, and the evil eye from the past to the present. External influences infiltrating and affecting the body explain health and sickness. Supernatural health beliefs have been there from time immemorial, and they are difficult to alter because they are so deeply ingrained in the social fabric of existence. People's attempts to pacify supernatural forces so that they remove their anger and malevolent activities laid the foundation of magico-religious folk medicine

According to the Merriam-Webster dictionary, the term "magico-religious" includes belonging to or having the character of a body of magical practices intended to cause a supernatural being to produce or prevent a specific result." Yoder (1972) defined magico-religious folk medicine "as the second branch of folk medicine, sometimes called "occult" folk medicine, which attempts to use charms, holy words, and holy actions to cure disease. This type commonly involves a complicated and prescientific worldview." Durkheim (1915) posited that magical practices involved the manipulation of sacred objects for particular clients. Brown (1922) argued that the purpose of magic was to symbolise the social importance of the desired outcome. However, Malinowski (1925) viewed magic as primarily addressing the psychological needs of the people. Pritchard (1973) posits that magic serves as a constituent of culture and religion and is used to explain phenomena that are beyond human understanding. These occurrences form a self-contained logical system, where each component reinforces the others and offers a rational theory of causation.

Prayer, the use of charms and amulets, the laying of hands on the head to ward off negative energies, visits to holy places, meditation, the recitation of sacred texts and charms, soul calling, offerings, sacrifices, etc. are the primary magical-religious folk healing practices. People associate smallpox, mental health issues, epilepsy, and child-related health problems primarily with magic, the evil eye, ancestral spirits, violations of taboos, and calamities given by God/goddess. Different rituals are performed in accordance with the respective beliefs in order to achieve

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liberation from pain and suffering. In cases where self-healing is not possible, the services of magico-religious folk healers are rendered to appease supernatural entities (O' Connor & Hufford, 2001).

Punjab is a land of saints and warriors as well as the heart of Sikhism, which explains the abundance of religious institutions such as gurdwaras (Sikh temples of worship), majars of pir-faikrs (the shrines of Muslim saints), and temples of numerous deities. People come to these holy places because they believe in the healing abilities of these sites. They carry out numerous rituals like prayer (ardas), holy bath, offering, selfless service, reciting Gurbani, and so on. Aside from religious organisations, people seek assistance from very religious individuals who are supposed to have a strong connection with God and may be able to cure ailments. These individuals have no distinct nomenclature; however, they are commonly referred to as "Baba ji," "Siyanas," and so forth. However, there is no place for magic, amulets, ancestor worship, jantar, mantar, or tantar in Sikhism, but in the case of health, returning to the state of normalcy would be of prime importance, and people prefer the magico-religious path of healing even though it is against the normative order of society (Kaur and Sinha, 2014).

2. OBJECTIVES

1. To identify the reasons behind continued use of magico-religious folk healing practices in modern era
2. To mention various magico-religious folk healing practices prevalent in rural areas

3. METHODOLOGY

The study is descriptive in nature. The present study was conducted in the rural areas of Amritsar district, Punjab. Amritsar is the second-largest city in Punjab, after Ludhiana. It has 4 tehsils, 5 sub-tehsils, and 9 blocks, namely: Ajnala, Attari, Chogawan, Harsha Chinna, Jandiala, Majitha, Rayya, Tarsika, and Verka. Out of these nine blocks, four were selected randomly: Chogawan, Harsha Chinna, Rayya, and Tarsika. In all, the study included 120 magico-religious folk medicine users. The snowball sampling technique was used for the purpose of data collection. A semi-structured interview schedule was prepared, containing both open-ended and closed-ended questions in light of the objectives. Besides the interview method, the observation method was also employed, and wherever feasible, a few case studies were also conducted to gain in-depth knowledge. To make the data more understandable, data was presented in a tabular manner. Firstly, a code design was prepared that incorporated all possible responses. After that, code cards were prepared, and each response was assigned a code number. All responses were noted in the form of frequencies, and the simple frequency tables were manually prepared. For the analysis of the data, simple statistical techniques such as percentages were used.

Locally, magico-religious healers perform a crucial role in health care. People frequently volunteer their services due to their faith and mutually beneficial connections. The believers are obligated to have faith in the magico-religious healer's curative abilities, while the healer is responsible for maintaining faith in the medium through which he administers treatment. As they view magico-religious healers as the only hope and religious authorities, believers frequently follow the instructions and perform the rites without inquiring (Ali & Bhatti, 2022).

4. ANALYSIS AND DISCUSSION

Table 1.1 Preference of magico-religious healers

S. No.	Responses	Number of Respondents	Percentage
1.	**Faith-based healers (Jhar-phook wale sianey, baba ji, hath-hola karan wale sianey)**	60	50.00
2.	**Pastors**	33	27.5
3.	**Spirit-mediums (Puchhan-dene-walle)**	18	15.00
4.	**Snake bite curer**	09	7.5
	Total	**120**	**100.00**

Table 1.1 reveals the respondents' preferences for magico-religious healers. It is evident that half of the respondents in the total sample preferred faith-based healers locally known as "baba ji," "sianey," for their health problems. Respondents stated that they most often visit them on particular days, like Thursday, Sunday, "Amavasya" (the day of the new moon), and "Pooranmashi" (the day of the full moon). Another 27.5 percent of the respondents took services from pastors for the solution of their health problems. Further, 15 percent of respondents preferred a spirit medium for illnesses that they believed were the result of spirit intrusion. An insignificant proportion of the respondents, that is, 7.5 percent, preferred the services of a snake bite healer.

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It is important to mention that the number of pastors is increasing in the state of Punjab as Christianity is growing among Mazhabi Sikhs and Valminki Hindus in Punjab's villages, and there are approximately 600–700 churches in Amritsar and Gurdaspur districts where people congregate on Sundays and Thursdays to receive Jesus' blessings to alleviate their social and health problems (Misra, 2021). The disciples sing songs in praise of Jesus and shake violently; some faint and cry in the hope of miracles. There are an endless number of testimonies on social media, including YouTube, Instagram, and Facebook, where people are witnessing healing through faith. One respondent, while embracing faith in Jesus, added:

"Har mushkil de wich, mera Yeeshu mere naal hai
Maa wang karda fikar meri, baap wang krda khyal hai"

Translation (Jesus is with me in all my problems; he worries for me like a mother and cares for me like my father).

Another respondent ardently claimed that:

"Paapa de dawa Yeeshu denda hai bimara nu
Aajao mere kol awaza maare oh hazara nu
Uth paapi bandeya tu kyu layi der oye
Eho jeha mauka tainu labhna nahi pher oye
Denda hai nizaat yeeshu lakha te hzara nu
Ajao mere kol awaza maare oh hzara nu"

Translation (Jesus gives medicine for sins to the sick; he calls thousands to come to him; get up, sinful man, why are you so late? You will not find such an opportunity; Jesus gives salvation to thousands and lakhs; he calls thousands to come to him).

Further the respondents were requested to specify the name of diseases for which they preferred magico-religious healers in the below table.

Table 1.2 Names of health issues as reported by respondents

S. No.	Responses	Number of Respondents	Percentage
1.	**Infertility**	54	45.00
2.	**Mental health conditions**	34	28.33
3.	**Snake bite/septicity/shingles**	09	7.5
4.	**Others**	23	19.17
	Total	**120**	**100.00**

The above table illustrates the names of health problems for which respondents preferred the services of magico-religious healers. It is surprising to know that the majority of the respondents, that is, 45 percent, preferred magico-religious healers over other systems of medicine to address their infertility issues and wish for a baby boy. The reason stated for the desire for a baby boy was that he would continue the family lineage. The majority of them said they would give their child the name that a magico-religious healer would suggest. Further, 28.33 percent of the respondents sought the services of magico-religious healers for problems related to mental health conditions, including madness, sleep disorders, sudden unconsciousness, and disruptive behaviour. An insignificant proportion of respondents, that is, 7.5 percent reported that in cases of snake bite, septicaemia, or shingles, they preferred the services of a snake bite curer. Of the total, 19.17 percent of respondents stated that they preferred magico-religious healers for minor health issues like jaundice, typhoid, cysts and fibroid, stones, headaches, skin problems and prolonged health diseases. It may be due to the fact that in Punjabi society, fertility has a high social value as it helps women rank up in the family, and the social status of women rises with the birth of a child, especially a male child. In order to rank themselves higher in society, infertile couples adopt all kinds of possible measures, ranging from modern medical facilities to magico-religious folk healing methods. Women, as compared to men, suffer more from the negative social impacts of infertility in the form of domestic violence, social stigma, anxiety, depression, and low self-esteem. On the other hand, stigma is always associated with mental health issues, especially marriage and the conduct of society towards patients, that is why people do not want to disclose their mental health issues and prefer to seek help from magico-religious healers. The findings were consistent with the findings of **Basumatary et. al. (2020)** that caregivers preferred treatment from the informal group to the formal group due to the stigma attached to mental health. The above analysis shows the declining fertility rate in the study areas and increasing mental disorders. Both the SRS (Sample Registration System) and the NFHS (National Family Health Survey) showed a decline in the total fertility rate in the period between 1993 and 1999 in Punjab. The TFR (total fertility rate) of Punjab was 2.7 in 1993 and 2.9 for rural Punjab (Punjab Development Human

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Report, 2002). As per the recent survey report of the economic survey of India (2023), Punjab's fertility rate decreased from 1.8 percent to 1.5 percent between 2018 and 2020, against the national average of 2.2 percent. According to the World Health Organisation (WHO, 2022), one in eight people globally had a mental illness in 2019. Within one year after the COVID-19 epidemic, this number has significantly increased. Even though there are treatment options available worldwide, only one-third of people with depression get formal mental health care. Lack of access to quality care is the biggest barrier to mental health care. Health systems are unable to adequately satisfy the requirements of those with mental health issues. While recognising the importance of mental health, WHO (World Health Organisation) launched the Mental Health Action Plan (2013-2030) including four major objectives:

To improve the effectiveness of leadership,
To provide comprehensive, coordinated, and responsive mental and social care services in community settings,
To implement strategies effectively,
To encourage evidence-based research in mental health.

This programme also includes non-specialised health-care providers because they play an important role in mental health care at local levels. A special provision has also been made for the training and guidance of doctors, nurses, and non-specialised health workers in managing mental health issues (WHO fact sheet on mental disorders, 2022).

Table 1.3 Stage of illness

S. No.	Responses	Number of respondents	Percentage
1.	**In the beginning**	47	39.17
2.	**At the last**	73	60.83
	Total	**120**	**100.00**

The analysis given above depicts that only 39.17 percent of the respondents preferred the services of magico-religious healers in the beginning stages of illness, while the majority of the respondents, that is, 60.83 percent, preferred magico-religious healing in the last stages of illness. It may be inferred that ineffective treatment in the past acts as a driving force for magico-religious healing. In order to transition from a sick role to normalcy, individuals often develop hope and optimism through non-scientific healing techniques.

Table 1.4 Source of information

S. No.	Responses	Number of Respondents	Percentage
1.	**Friends/relatives/neighbours**	48	40.00
2.	**Family**	36	30.00
3.	**Social media**	29	24.17
4.	**Advertisement**	07	5.83
	Total	**120**	**100.00**

Table 1.4 reveals the sources of information regarding magico-religious healers. It can be observed that 40 percent of respondents learned about magico-religious healers via friends, relatives, and neighbours. In rural areas, people are observed to rely more on word of mouth. Another 30 percent of respondents revealed that their family members have given them information about magico-religious healers. Further, it is interesting to note that social media worked as an important source of information regarding magico-religious healers for 24.17 percent of the respondents, especially those who were taking the services of pastors. There are so many testimonies of Christian faith healing on various social media platforms like Facebook, YouTube, Instagram, etc. Even live healing sessions can be seen on various television channels. They influence people's minds, and they start believing in the power of faith-based healing. Finally, only 5.83 percent of respondents opined that they came to know about magico-religious healers via advertising in the form of television commercials and wall posters. The above analysis shows that social networks influence the health-seeking behaviour of concerned individuals, as illness is not an individual but a social incident affecting both the individual and significant others like family, friends, relatives, and neighbours. Social media is also emerging as a new form of information source.

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Table 1.5 Mode of treatment

S. No.	Responses	Number of Respondents	Percentage
1.	**Prayer (Dum/Fanda)**	43	35.84
2.	**Amulet (Taweet)/ Black thread**	33	27.5
3.	**Holy water (Jal/ amrit) and bhabhuti (Sacred ash)**	22	18.33
4.	**Jhar-phook/ to call a spirit**	22	18.33
	Total	**120**	**100.00**

Further disclosure about the mode of treatment followed by magico-religious healers revealed that the prayer method was used by 35.84 percent of the healers who lay hands on the heads of people and try to connect with the supreme world by praying for the patient's recovery. It is worth mentioning that prayer as a mode of treatment is mostly used by pastors, and dum/fanda (the practice of blowing air after reciting verses) is done by locals referred to as baba, siyana, and snake bite curers. According to the respondents in the present study, it is no longer necessary to visit the healer in person for healing prayer; it can now be conducted over the phone and is equally effective. Another 27.5 percent of the respondents stated that magico-religious healers gave them amulets, sometimes black thread, each of which was designed according to the specific problem. It was observed that there were various kinds of amulets: one that is consumed with water; another that is tied on the wrist, shoulder, or worn around the neck; and others that are intended to be cast into moving water. According to respondents, amulets serve as a shield against malicious spirits and the evil eye. It is strictly forbidden for those who wear amulets or black thread to enter the home where an infant is born. Furthermore, an equal majority of the healers, that is, 18.33 percent, opined that they used the jhar-phook (locally known as jhada) method of treatment and gave chanted holy water to drink and bhabhuti to eat/drink or to apply on the affected part in case of wounds. It was observed that the jhar-phook method is performed in cases of spirit possession. A spirit that is believed to inhabit the victim's body is called upon by magico-religious healers by uttering mantras, and then the healer asks the spirit, who are you? why are you pursuing him/her? what do you want? how will you leave her body? The victim then vehemently moves his head, answers the questions, and, in some cases, faints as well. The magico-religious physician then moves peacock feathers while spelling magic and sprinkles chanted water on the victim's body to restore him/her to normalcy.

Table 1.6 Form of payment

S. No.	Responses	Number of Respondents	Percentage
1.	**Cash**	09	7.5
2.	**Kind**	41	34.17
3.	**Free of charge**	70	58.33
	Total	**120**	**100.00**

When further queried about the form of payment to magico-religious healers, an insignificant number of respondents (a meagre 7.5 percent) revealed that they paid magico-religious healers in the form of cash, and it is not a fixed amount; it is totally dependent on the person's affordability. Another 34.17 percent of respondents stated that they pay in the form of kind. The researcher also observed that the majority of the respondents came with fruits, garments, and sweets etc. It is important to mention that magico-religious healers do not demand anything in the form of cash or kind; respondents do it on their own as a matter of devotion. It is surprising to know that a huge majority of respondents (58.33 percent) of the respondents reported that magico-religious healers have given their services free of charge because they think that they are chosen divinely to serve humanity.

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Table 1.7 Curability of the disease

S. No.	Responses	Number of Respondents	Percentage
1.	**Yes**	78	65.00
2.	**No**	42	35.00
	Total	**120**	**100.00**

Table 1.7 depicts the responses regarding the curability of the diseases. It is evident from the above table that a whopping majority of the respondents, that is, 65 percent, witnessed healing through magico-religious folk medicine, and the majority of them were infertile couples. While 35 percent of the respondents denied the same and mentioned that it was a mistake on their part as they had not followed the instructions. One female respondent, aged 31, narrated her experience as follows:

"Mera panj saal pehla viah hoea si par bachedani vich rasolia hon karke mere bacha nahi ho reha si. Asi bhut sare doctra kol gye te harek ne sanu surgery karvon de slaah diti par ghar de halaat maare hon da karke asi ilaaz da khracha nhi chuk sakde si. Phir sade ek rishtedar ne sanu slaah diti k tusi ek war pastor Vijay kol jao. Mai apne gharwale naal slaah kiti. Sade kol hor koi chaara nhi bachea c te asi pastor Vijay kol jan da faisla lea. Usne meri tandrusti layi prarthna kiti and ultrasound krvon layi keha te bhrosa dwaya k reports vich kujh nhi aawega. Eh koi chamatkar to ghat nahi c kyuki meria reoprta vich kujh nhi aaea. Phir mai fainsla lea k mai har aitwar church jaya krugi te yeeshu diwa duwawa de naal mere bacha hon wala hoea. Hun mera bacha rabb da bacha howega".

(Translation: "I was married five years ago but was not able to conceive as I was suffering from uterine cysts. We visited so many doctors, and everyone advised us to go for surgery, but due to poor living conditions, we were not able to afford the treatment expenditure. Then one of our relatives advised me to go to Pastor Vijay at least once. I discussed this with my husband. We had no other option left, so we decided to go to the pastor. He prayed for my recovery, asked me to go for an ultrasound, and assured us my reports would be negative. It was not less than a miracle, as my reports were negative. Then I decided to go to church every Sunday, and with the blessing of Jesus, I got pregnant. Now my child will be the child of God.")

As many as 42 respondents reported no improvement in their health problems even after taking the services of magico-religious healers. They were further asked to state whether they would use the services of another healer or continue with the same healer in Table 1.8.

Table 1.8 Other sources of treatment N= 42*

S. No.	Responses	Number of Respondents	Percentage
1.	**Services of another magico-religious healer**	19	45.23
2.	**Continue with the same**	23	54.77
	Total	**42**	**100.00**

*N= 42 as the remaining 78 respondents witnessed healing

It was stated by 45.23 percent of the respondents that they would seek out another magico-religious healer because they are the only ones who can assist us. Further, 54.77 percent of the respondents responded that they would continue with the same treatment as serious health issues like infertility and mental illnesses take time to cure. They had a firm belief that not medicine but only the magico-religious path of healing could help them. The above analysis shows the deep faith of respondents in the healing powers of magico-religious healers.

Table 1.9 Reported reasons for availing the services of magico-religious healers in the modern era

S. No.	Responses	Number of Respondents	Percentage
1.	**Easy availability**	11	9.16
2.	**Cost effective**	15	12.5
3.	**Due to faith**	53	44.17
4.	**Unsuccessful treatments in the past**	41	34.17
	Total	**120**	**100.00**

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Table 1.9 enlists the various reasons for availing of the services of magico-religious healers in the modern era. Of the total sample, easy accessibility was cited by 9.16 percent of respondents as a reason. Further, 12.5 percent of the respondents reported that it is very cost-effective and everyone can afford it. While the majority of the respondents, 44.17 percent, stated that, due to their faith in the curative powers of the magico-religious healers, they approached them. Lastly, 34.17 percent of the respondents opined that unsuccessful treatments in the past was a reason that led them to seek the services of magico-religious healers since no other hope was left. It is noteworthy that a minority of respondents cited accessibility and affordability as reasons for utilising the services of magico-religious healers in the present era. Sharma, Vohra, and Khurana (2003), who studied the health-seeking behaviour of mentally ill patients in the villages of Beri Block, Rohtak, Haryana, India, reached the same conclusions. They cited belief in the supernatural domain as the primary reason for choosing magico-religious healing rather than the healer's accessibility or reputation.

Table 1.10 Belief in the supernatural/extraordinary powers of magico-religious healers

S. No.	Responses	Number of Respondents	Percentage
1.	**Yes**	89	74.17
2.	**No**	31	25.83
	Total	**120**	**100.00**

The above table depicts the perceptions of respondents regarding supernatural/ extraordinary powers possessed by magico-religious healers. It was claimed by 74.17 percent of the respondents that magico-religious healers have supernatural/extraordinary powers that an ordinary person cannot have; they are people of God. On the contrary, 25.83 percent of the respondents denied the same, stating that they approached magico-religious under the influence of significant others.

Table 1.11 Experience of negative effects

S. No.	Responses	Number of Respondents	Percentage
1.	**Yes**	38	31.67
2.	**No**	82	68.33
	Total	**120**	**100.00**

Furthermore, an attempt has been made to learn about the negative effects of magico-religious folk healing practices in Table 1.11, and it was revealed by the majority of the respondents (68.33 percent) that they have not experienced negative effects. Thirty-eight respondents reported that it had negative effects on them. It is important to note that adverse effects were observed more in situations of mental health conditions, as respondents opined that the prior healers made their mental health conditions worse, that is why they approached a new healer. The respondents held themselves accountable for adverse effects because they did not adhere to the precautions and rituals suggested by the magico-religious healers. It may be due to the belief that magico-religious folk healers possess charismatic personalities and supernatural abilities; if they speak negative about them, it would have a negative effect on them, as they are divinely chosen to serve people. It may be the reason why there are few studies that project the negative effects of faith-based healing. Flamm (2004) was the only author who attempted to demonstrate in his work that faith-based healing could cause severe damage and mortality. He suggested that such manuscripts should not be published in scientific journals, although he advocated that prayer results in miraculous cures.

Table 1.12 Perception of modern medicine

S. No.	Responses	Number of Respondents	Percentage
1.	**It is unable to cure diseases caused by supernatural powers**	52	43.33
2.	**It has side-effects**	23	19.17
3.	**Temporary relief**	23	19.17
5.	**Profitable business**	17	14.17
6.	**It is good in an emergency situation**	05	04.16
	Total	**120**	**100.00**

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The above table pertains to the views of respondents regarding modern medicine. The majority of respondents (43.33 percent) reported that modern medicine cannot treat diseases caused by supernatural forces, particularly mental health conditions and smallpox. In addition, the same proportion of respondents, that is, 19.17 percent, stated that modern medicine has more adverse effects than positive outcomes and provides only transient respite. Further, 14.17 percent reported that physicians have turned their profession into a business and are progressively losing patient confidence. A negligible proportion of respondents, that is, 4.16 percent, mentioned that it works wonders in emergency situations. As this field of medicine has achieved a high level of technological advancement, it is a second God to them in life-threatening situations. The above analysis demonstrates that people are progressively becoming aware of the adverse effects and deteriorating ethical standards of physicians.

5. CONCLUSION

The above analysis shows that magico-religious folk medicine still plays a prominent role in maintaining health. The findings show that modern medicine has failed to meet the health needs of people, particularly those related to infertility and mental health. As a result, people turn to religious people (siyanas, baba ji, pastors, spirit mediums, and snake-bite curers). Significant others play an important role in health-seeking behaviour as they are the main source of information, followed by social media platforms. Prayer as a method of healing is seen as popular among both the respondents and magico-religious healers. The majority of the respondents witnessed healing through the magic-religious path. Following unsuccessful treatment in the past, faith emerged as a key motivator for seeking treatment from magico-religious healers. The unwillingness of people to discuss the detrimental impacts of healing is evident. In a nutshell, magico-religious folk medicine still holds a strong foothold and continues to win the confidence of the masses

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