

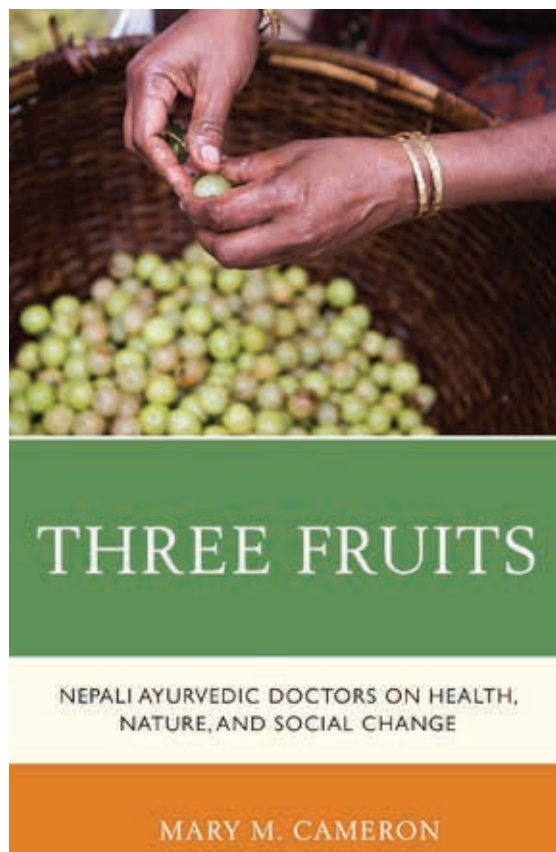
Book Review

***Review of Three Fruits: Nepali Ayurvedic Doctors on Health, Nature, and Social Change* by Mary M. Cameron**

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In *Three Fruits: Nepali Ayurvedic Doctors on Health, Nature, and Social Change*, Mary Cameron draws on twenty-five years of ethnographic engagement in Nepal to compellingly capture the transforming landscape of Ayurveda and healthcare since the 1990s. This collaborative ethnography is an example of “slow research”: it is built upon deep relationships Cameron developed with Nepali Ayurvedic doctors and patients between 1994 and 2019. It is also “slow” in celebrating a 3,000-year-old medical system, demonstrating how Ayurveda has benefited people in the specific context of Nepal, and highlighting the value of preserving what already functions in a global society that values rapid technological innovation.¹

Each chapter of the book begins with a different Ayurvedic doctor, each of whom is quoted at length. Of the eight featured doctors, five are women. Cameron demonstrates a commitment to allowing her doctor collaborators to speak for themselves, highlighting the diversity of their experiences and perspectives. The doctors’ extended quotes provide the reader with a historical and philosophical overview of Ayurveda, and an insight into the doctors’ lived experiences in a time of change. Alongside extended quotes from these doctors, Cameron weaves in her discussion. Her methodology also includes participant observation, with rich descriptions of government meetings and days spent in rural and urban Ayurvedic clinics across Nepal.

“One of Cameron’s major contributions in this book is her revealing how Ayurveda bridges the gap between medical and environmental thought“

- Mary Bannister on *Three Fruits: Nepali Ayurvedic Doctors on Health, Nature, and Social Change*

Cameron skillfully incorporates theoretical insights from medical, environmental, and feminist anthropology. A major contribution of Cameron’s work is her illustration of how Ayurveda bridges the gap between medical and environmental thought. The Ayurvedic

doctors quoted to explain that Ayurveda is based on an understanding that the same basic elements that constitute human beings are also present in Ayurvedic medical plants, thereby creating an ontological connection between humans and nature. People become ill when they “become out of balance with the physical world outside and inside them” (p. 1), and Ayurvedic medicines restore balance. Ayurveda perceives individual health as deeply connected with broader environmental health, mirroring many Indigenous holistic epistemologies of wellness. Cameron reveals that Ayurveda overcomes the nature-culture dichotomy, which is also a central focus for environmental anthropologists.

Cameron’s discussion of the environmental ethos inherent in Ayurveda connects to her previous research on conservation-as-development in Nepal. Recent development work in the Global South generally, and in Nepal particularly, has focused on “sustainable development” and the conservation of natural resources.² Cameron discusses how this development discourse has historically categorized biomedicine as “modern” and Ayurveda as “traditional”. Yet, the new environmental focus within development blurs this distinction, as conservationists increasingly support Ayurvedic practitioners who conserve endangered plant species. In her ethnographic study of Tibetan medicine practice in Nepal and China, Craig explores how notions of development and modernity are further complicated by a growing inter-

national interest in alternative medicine, particularly in East Asia, Europe, and the United States. Some people with “modern” worldviews are increasingly valuing the rural, the subtle,

and the ecological.³ Cameron, similarly, reveals changing perceptions of what *bikas* (development) means in Nepal.

Previous studies have described an association of *bikas* with urban living and

technology, including biomedicine.⁴ Cameron demonstrates how this discourse persists today, as the Government of Nepal privileges biomedicine and provides what Ayurvedic doctors perceive to be inadequate funding and institutional support for Ayurveda. Additionally, the government has also implemented increasingly stringent licensing regulations for Ayurvedic doctors. However, in describing how Ayurveda is taken up as a poster child by conservationists, Cameron adds new complexity to conversations about the meanings of “modernity” and “tradition” in contemporary Nepal.

Another significant contribution of this book is Cameron’s detailed examination of Nepali medical pluralism. Cameron shows how Ayurveda, biomedicine, and other traditional medical systems overlap to form a specifically Nepali mosaic of healthcare. Medical anthropologists have critiqued biomedical approaches for being excessively profit-oriented and reliant on prohibitory fees.⁵ Cameron reveals that in Nepal, Ayurveda serves as a crucial safety net, providing supplemental care for people with limited access to affordable biomedical healthcare, especially in rural areas.

In describing government meetings aimed at regulating Ayurvedic medicine, Cameron shows how Nepali government officials tend to characterize Ayurveda as an unscientific threat to biomedicine. This connects to discussions of metrics and a modern privileging of quantifiable and data-driven healthcare.⁶ It similarly relates to Harper’s description of the “othering” of traditional health systems in the project of promoting biomedicine in Nepal.⁷ Ayurvedic doctors, however, don’t see this conflictual Ayurveda-biomedicine binary. Most Ayurvedic doctors interviewed in the book have biomedical training and prescribe allopathic medications when necessary. Similarly, biomedical physicians in Nepal frequently supplement treatments with Ayurvedic medicines. Ayurvedic medicine tends to be comparatively affordable, accessible, non-invasive, and lacking in significant side effects. Therefore, people understandably seek out Ayurvedic medicine in addition to biomedical treatment, especially for less serious ailments.

Fortunately, the words of the Ayurvedic doctors included in the book are mostly optimistic for the future, pointing to a healthcare system that can welcome synergistic collaboration between biomedicine and traditional healthcare, if government decisions allow.

A final important contribution of this book is its focus on women Ayurvedic doctors, especially as Cameron notes the near-invisibility of women professional healers in anthropological accounts. She notes that an increasing number of women doctors is one of the most significant recent changes within Ayurvedic practice in Nepal. This change satisfies a preference by women patients for women doctors, and Cameron concludes that this increase has positively impacted women’s health. Cameron quotes women doctors who share both their successes and their struggles with sexism. She also incorporates feminist theory and notes that because Ayurveda tends to be non-invasive and does not medicalize reproduction, it circumvents some of the strongest critiques of biomedicine posed by feminist medical anthropologists concerning disproportionate harm to women’s bodies. Cameron highlights how Ayurveda has preserved its ancient principles while also embracing change. She successfully shows an Ayurveda worth protecting for the health of women, men, and all in modern Nepal.

Mary Bannister is an anthropology graduate student at the University of Hawai‘i at Mānoa. She studies the intersections of environment and health.

Endnotes

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5. Paul Farmer et al. 2013. *Reimagining Global Health: An Introduction*. Oakland: University of California Press.
6. Claire Wendland. 2016. Estimating Death: A Close Reading of Maternal Mortality Metrics in Malawi. In: *Metrics: What Counts in Global Health*. Durham: Duke University Press, 57-81; Jan Brunson and Siri Suh. 2020. Behind the measures of maternal and reproductive health: Ethnographic accounts of inventory and intervention. In: *Social Science & Medicine*. Amsterdam: Elsevier.
7. Ian Harper. 2014. *Development and Public Health in the Himalaya: Reflections on Healing in Contemporary Nepal*. Milton Park: Taylor & Francis.