



# International Journal of Advanced Research

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### REVIEWER'S REPORT

Manuscript No.: IJAR- 53830 **Date**: 15/09/2025

Title: Diseased Selves and Social Others: Cultural Constructions of Epilepsy and Leprosy in India,

# **Recommendation:** Accept

Rating	Excel.	Good	Fair	Poor
Originality		$\checkmark$		
Techno. Quality			$\sqrt{}$	
Clarity			√	
Significance			$\sqrt{}$	

Reviewer Name: Dr Abdul Haseeb Mir Date: 15/09/2025

### **Reviewer's Comment for Publication**

The article makes a significant and timely contribution to the interdisciplinary study of illness, stigma, and cultural imagination in the Indian context. By bringing epilepsy and leprosy into a single analytical frame, the author highlights the deep entanglements of medical knowledge, religious belief, and social practices in shaping perceptions of disease. The work is ambitious in scope, drawing upon a wide range of sources including Vedic and Ayurvedic texts, Puranic and epic narratives, colonial records, folklore, and anthropological evidence. This cross-textual and historical approach enables the author to trace not only the medical understanding of epilepsy and leprosy but also the moral and cosmological layers of meaning that made these conditions powerful cultural symbols of impurity, curse, and "otherness."

### **Detailed Reviewer's Report**

The article under review, "Diseased Selves and Social Others: Cultural Constructions of Epilepsy and Leprosy in India", offers a richly textured exploration of how two historically stigmatised illnesses—epilepsy and leprosy—were represented and understood in Indian traditions, while also linking them to broader global narratives of disease.

The author sets the stage by situating disease within the evolution of culture and tradition, emphasizing that illnesses have never been interpreted solely in biomedical terms but also through cosmological, moral, and symbolic frameworks. This framing is effective, as it allows the discussion of epilepsy

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(apasmara) and leprosy (kushtha) to extend beyond medical history into questions of exclusion, morality, and cultural imagination. The paper's interdisciplinary approach—drawing on Ayurvedic texts like the Charaka Samhita and Sushruta Samhita, religious narratives, medieval hagiographies, colonial ethnographies, and oral traditions—demonstrates impressive breadth.

The discussion of epilepsy is particularly strong in tracing its earliest mentions in Mesopotamian, biblical, and Indian texts, showing how seizures were interpreted as signs of possession or divine punishment. Similarly, the section on leprosy skillfully combines archaeological evidence (such as Balathal remains from 2000 BC) with Vedic, biblical, and classical references. These historical and textual sources are supplemented with rich descriptions of myths and folk beliefs across cultures, which underline the widespread association of these diseases with impurity, sin, or divine wrath.

The conceptual engagement with stigma is another notable strength. Drawing on Erving Goffman's categories of stigma and Michel Foucault's analysis of exclusion, the author convincingly argues that both diseases became markers of social otherness, turning biological conditions into instruments of boundary-making. The linking of stigma with caste, gender, and social exclusion in the Indian context provides critical nuance, particularly in showing how women with epilepsy and men with leprosy experienced stigma differently.

However, the article sometimes slips into descriptive narration without sufficient analytical synthesis. While the catalogue of myths and beliefs is informative, it could be condensed to allow greater focus on what these narratives reveal about broader cultural and social anxieties. A more sustained theoretical framing—perhaps engaging more directly with concepts from medical anthropology, disability studies, or subaltern studies—would enrich the analysis.

Another limitation lies in the treatment of the modern era. Although the article mentions colonial medical interventions and hints at contemporary continuities, it does not sufficiently engage with present-day challenges of stigma, treatment, and social integration in India. A stronger connection between historical constructions and their legacies in current medical and social practices would significantly enhance the paper's relevance.

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In terms of style, the article is clear, well-organized, and accessible, though some sections could benefit from tighter editing to reduce repetition. The references are adequate and demonstrate solid engagement with primary and secondary sources.

Overall, this is a valuable contribution to the fields of cultural history, medical humanities, and social anthropology. It bridges textual traditions, folklore, and social theory in innovative ways. I recommend the article for publication after minor revisions aimed at improving analytical focus and linking historical narratives more explicitly to contemporary issue

Recommendation: Accept with minor revisions.

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