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CHAPTER 7

FROM ONE GENERATION TO ANOTHER

Ruptures and Continuities in 'Traditional' Knowledge Transmission within a Southern Indian Community

ALEXIS AVDEEFF

In India, where a caste occupation is believed to be transmitted 'in the blood' (Parry 1979: 85), the traditional association of a *jāti*¹ with its occupation is deeply embedded within the caste system. Yet, this social organization that prevailed in the past is slowly but surely changing, due to social and economic changes that contemporary Indian society has to face. If one cannot deny that the relationship between *jāti* and occupation does still remain, transmission modalities of the different kinds of knowledge related to a traditional *jāti*'s occupation are nevertheless changing, whether they are discontinued, or revived in new perspectives (Mahias 2011: 34). In Tamil Nadu,² the practice of astrology and indigenous medicine has never been the prerogative of one community, even if these *tolil*,³ castes' occupations, generally fall to high castes, not to say Brahmins. However, in this south-eastern Indian state, a community that was earlier thought of as untouchable, the Vaḷḷuvar, seems to have a pre-eminent role in *cōciyam* and *nāṭu-maruttuvam* (or *nāṭu-maruntu*),⁴ the practice of astrology and indigenous medicine respectively. Indeed, Vaḷḷuvar are seen as the best astrologers, *cōciyan* as well as the traditional physicians, *nāṭu-maruttuvan*, of the Tamil country (Avdeeff 2011).

Vaḷḷuvar belong to the lowest stratum of Tamil society. They have long been stigmatized as untouchables (Avdeeff and Tambs-Lyche 2011: 70) and are now recognized as one of the seventy-six Scheduled Castes⁵ by the governments of Tamil Nadu and Puducherry. Also known locally, and with some irony, as 'the Brahmins of the Paraiyars' (Dubois 1879: 333), the Vaḷḷuvar are medico-religious specialists among the ex-untouchable communities, mainly the Paraiyars,⁶ but also beyond, as noted by Edgar Thurston in the *Madras Census Report* of 1891: 'Both men and women are employed

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as astrologers and doctors, and are often consulted by all classes of people' (Thurston 1909[V]: 305). In all of Tamil Nadu, Valluvar practitioners are renowned for their skill, seen almost as innate, in forecasting and diagnosing. Their reputation—by virtue of their supposed expertise—is such in some rural areas, that, very often, the name *Valluvar* is synonymous with *cōciyan*, astrologer, and to a lesser extent with *maruttuvan*, indigenous physician.

Nowadays, though some among the Valluvar's younger generation have continued the traditional occupation of astrology, very few of them pursue the practice of indigenous medicine. Indeed, the ways of transmitting caste knowledge is changing, and consequently caste occupation is changing too. In this chapter, then, I shall show how ruptures and continuities in the transmission of one caste's knowledge reshape the occupation of the new generation, and lead us to rethink, more generally, our conceptions of caste through its contemporary evolutions. To do so, I shall expound, in the first part of this essay, the nature and content of the caste knowledge and the traditional occupations related to it. Then, in the second part, I shall explore the hereditary transmission of this knowledge within the family group, from one generation to another (*paramparai*). Finally, in the third part, I shall analyse the *trajectory* of change (Barth 2002) in this hereditary transmission, by looking at endogenous and exogenous factors that modify the intergenerational transmission process.

VALĻUVAR 'TRADITIONAL' KNOWLEDGE: NATURE AND CONTENT

In this case study, the notion I use of a caste's knowledge overlaps in fact with multiple kinds of knowledge. Knowledge is not a monolithic concept related only to explicit and organized knowledge like astrological and medical corpora are. Following Mahias' terminological reflections (Mahias 2011: 17–18), the concept of knowledge used in this essay encompasses abilities, knowledge-based actions and experiential knowledge enabled by individual practice. Likewise, when I talk about Valluvar's knowledge, I don't intend to indicate that this body of knowledge is neatly delimited and static. As a body of knowledge passed on from generation to generation, it changes and evolves continuously. Indeed, within one lineage, *paramparai*, each generation adds its own innovations (mainly in the field of indigenous medicine and the preparation of remedies). Each generation must make its own the knowledge passed down from the previous one. Thus, the process of transmission transforms and reshapes what is transmitted. Transmission is not transferring (Debray 1997: 49). Valluvar's caste knowledge is the result of an ever-evolving transmission process, and in that sense it may be argued that this 'traditional' knowledge is in fact contemporary, and even more so in its practical aspects.

In this essay, I focus only on the knowledge related to the Valluvar's practice of astrology and indigenous medicine.⁷ In order to draw the contours of this knowledge, I have tried to collect information from several Valluvar practising astrology and indigenous medicine, in villages of various districts in Tamil Nadu (Viluppuram, Cuddalore, Nagapattinam and Thanjavur), and in a few villages of Puducherry. I have observed a number of consultations, both astrological and medical, and conducted in-depth interviews with some practitioners and their family. Thus, I have looked for empirical regularities in order to highlight the shared features on which their caste's knowledge is based.

The analysis of the data from this multi-sited ethnography reveals that Valluvar's knowledge, as I have tried to define it is, in fact, composed of a multitude of local representations as well as personal innovations, preventing me from establishing a clear model. However, as a gross simplification, I shall argue that Valluvar possess both collective and individual knowledge. Indeed, a part of their knowledge is common and corresponds to that of indigenous people: knowledge related to the environment, local beliefs, cosmological representations, etc. Most knowledge is specific to their traditional occupation, and consequently shared among community members: knowledge, both theoretical and practical, about astrology and indigenous medicine (how to cast a horoscope, how to take the pulse, etc.).⁸ But some knowledge may belong specifically to some families—we may say lineages—or even to an individual. For example, some elder Valluvar will, because of their own experience, be the only source of certain types of knowledge, like knowing how to read old palm-leaf bundles, using some specific mantras, particular divination technics, or personal medicine recipes, etc. Following this assessment, it may be argued that the Valluvar's knowledge is quite heterogeneous, both in its sources and in its practical application. In fact, what is 'traditional' in the emic discourse is not so much knowledge, but rather the caste occupation.

In spite of this heterogeneity of knowledge and practices, there do exist common features that we may observe among practitioners. First, they share what we may call a group knowledge, or in other words cultural knowledge, encompassing norms, beliefs, rituals and language. Concerning this cultural knowledge, I noticed that all my informants were literate in Tamil, some of them in English, and the elders in old Tamil. This fact is quite unusual in the context of rural untouchables, especially for the older generation. The Valluvar, unlike other ex-untouchable rural communities have a high literacy rate (Avdeeff 2011: 254–6). Indeed, literacy is necessary to practice astrology, perhaps even more than to practice indigenous medicine.⁹ Valluvar practitioners need to have a good command of Tamil, both spoken and written as all the steps of the elaboration of the horoscope necessitate reading and writing. The astrologer must first calculate the planetary positions, then

he has to refer to the almanac, and often he finds it necessary to read some astrological treatises to refine his interpretation. Then, he has to write the *jātakam*, birth chart, on palm-leaves (see Plate 7.1) or, currently, in a booklet (see Plate 7.2).

Regarding the language used during astrological consultations, some astrologers—mainly the older ones—may use a technical vocabulary borrowed from an old form of Tamil, which is no longer used by the new generations, as explained by Anbushelvan, one of my informants: ‘The language we use for astrology is *cutta-tamil* which means pure form of Tamil. It is the oldest form of Tamil . . . you can find this language in the old dictionaries.’ For example, to say ‘star’, instead of using the widespread Sanskrit term *nakṣatram* or its Tamilized form *naṭcattiram*, they would use the old Tamil form *mīṇ* (star).

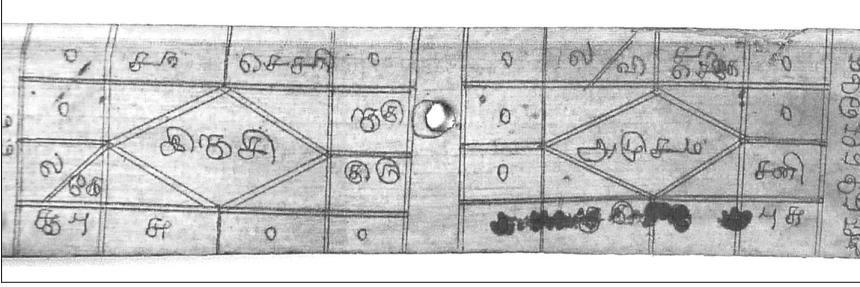


PLATE 7.1. Detail of the first palm leaf of an individual's *jātakam*.

Courtesy: Alexis Avdeeff.

காலை பகல் / இரவு மணி	நிமி
மீ ஜெனன ஜாதகம்
மீ கொல்லம் இர
..... மாதம் தேதி
..... நட்சத்திரம் பாதம்

	இராசி		

	அம்சம்		

PLATE 7.2. Blank form of a *jātakam*, from a printed booklet.

Courtesy: Alexis Avdeeff.

In the same way, for the planet Venus, instead of using *śukra* or *cukkiran*, they would use the term *velli-mīn* ‘the silver star’ as well as other Tamil metaphorical terms as *veṭi* or *viṭi-velḷi*, which mean ‘the morning star’.

Another relevant point related to speech is that Vaḷḷuvar have a secret spoken language, a *paripāṣai*. This secret language is a kind of trade slang mostly used in ‘business’ situations—not to say during consultations—so that patients do not understand what the Vaḷḷuvar say. I came to know about it, by chance, during one of my first interviews with Gurujeevan:

We have a secret language. When we don’t want others to know what we are talking about, we use this language. It is not a different language. It is just code words, which we use to communicate between us. And we don’t use these code words with people from other communities. We just use this to maintain some secrets within our community ... but, we are less using it now. In the olden days, since they [Vaḷḷuvar] were in the profession of seeing astrology and practicing medicine, they [Vaḷḷuvar] needed this language to maintain some secrets. But nowadays most of our community people are engaged in government jobs or some other jobs in the private sector, so ...¹⁰

As pointed out by Gurujeevan, and confirmed by other informants, this secret language is nowadays less and less known by the new generations, and, therefore, decreasingly used.

Concerning the practice of indigenous medicine—whether the practitioner presents himself as a *citta-vaittiyaṇ* (Siddha doctor), as an *nāṭu-maruttuvaṇ* (indigenous practitioner), or modestly as a *pacu-maruntu-vaittiyaṇ*¹¹—all informants have the knowledge of the local *Materia Medica*. They know the medicinal properties of several plants, herbs, fresh leaves (*paccilai*), and roots (*mūlikai*), which they apply directly on the body or use to prepare elaborate remedies. In order to diagnose the illness, all the Vaḷḷuvar physicians first do the *nāṭipparikṣai*, the examination of the pulse (*nāṭi*), before asking for other details from the patient. He will then confirm and refine the pulse symptoms by taking other symptoms into account. They also share the same taxonomic schemes about diseases whose causes are frequently attributed to malevolent actions, violent deaths, or bad planetary positions (Carrin-Bouez 1980: 85). Regarding the concrete practice of astrology, all the practitioners use a *pañcāṇ kam*, an almanac. They refer to it in order to cast the horoscope (*jātakam pākka*) by calculating the planetary positions at birth. They also use it to know the auspicious and inauspicious times for a particular period, which is a central concern of the daily life of the village.

PARAMPARAI: HEREDITARY KNOWLEDGE TRANSMISSION

As we have seen, Vaḷḷuvar’s knowledge is heterogeneous and multifaceted. Relying on fieldwork data and following Ingold’s reflections on enculturation

and enskilment (Ingold 2000: 36–8), I assume three distinguishable aspects of knowledge frame Valluvar caste's knowledge: a cultural, a theoretical and a practical one.

From a global perspective, encompassing the three aspects mentioned earlier, the transmission process of knowledge among the Valluvar is twofold: diachronic and politic (Debray 1997: 15–24). Indeed, it is a process over time, linking generations by establishing relationships between elders and youth. But hereditary transmission is also a community obligation, in the sense that it directly concerns the perpetuation of Valluvar group culture and identity. Thus, by its twofold nature, hereditary knowledge transmission is a long learning process for each new generation, beginning in early childhood, and spreading over years. This process is hardly directly observable in the fieldwork situation by ethnographers who have mainly worked, instead, on data collected from informants, usually old (Sigaut 1991: 33–4). Thus, this long-term transmission process is difficult to comprehend in its whole complexity, as pointed out by Ruddle: '... almost without exception, most ethnographers, if they discuss childhood at all, have little to say about how traditional knowledge of specific skills is transmitted' (Ruddle 1993: 17). In this essay, I focus on the main features framing this hereditary transmission process rather than on the detailed description of a specific skill transmission.

Thus, in order to highlight the features of this transmission process within the Valluvar community, I shall examine how informants, who have been taught in the traditional way, reflected upon their own apprenticeship process.

Cultural aspect of Valluvar caste's knowledge equals, in other words, the group culture of Valluvar. It includes local beliefs (most of them are shared with other local communities), but also community rituals, norms and values as well as language, especially the old technical Tamil related to the practice of astrology and the *paripāṣai*. The acquisition process of this kind of knowledge, as I have defined it, is enculturation. This process is mainly unconscious and informal since children acquire this group culture by immersion in the community. They learn unconsciously through day to day situations and informally through the observation of behaviour that prevails in their community culture. For example, *paripāṣai* learning is informal and unconscious and implies this continuous immersion within the elder group, as illustrated by Gurujeevan: 'From our childhood we have been hearing our grandparents and other ancestors using some of these code words and only like that we learnt.' This enculturation process is fundamental since it endows children with the fundamentals of Valluvar culture; by affording them keys to decode the theoretical knowledge as well as a basic framework for their future practice.

Acquisition of theoretical knowledge is primarily a matter of rote learning, be it related to astrology or indigenous medicine. The learner has to

memorize oral and textual materials. It is mainly a formal and conscious process, though the learned knowledge may not be fully understood. Indeed, some parts of this theoretical knowledge will become meaningful only through individual practice. For the young learner, the acquisition process of theoretical knowledge can be both formal and informal as well as conscious and unconscious as recalled by Sudarsan:

While he [his father] was preparing a medicine, he was chanting the preparation methods and the name of the ingredients. Those people were used to chant in order to prepare the recipes properly and also because chanting avoids feeling the tiredness. While they were chanting, we were hearing it unknowingly. And that stuck to our mind. Whenever we have some doubts, we often refer to the old books and also to the new modern books to clarify the doubt.

‘[. . .]. In the evening time he was clearing our doubts. When he was free at evening time, he was asking us:

- Today we have ground a medicine, what is the name of this medicine?
- How do you analyse the pulse?

This is how he did to teach us.

This example is significant in several ways. First, it reveals the use of mnemotechnics by putting recipes in the form of songs in order to memorize them easier and to facilitate the preparation of medicines. And this procedure has a direct impact on the youth who surround the practitioner. Indeed, they memorize the songs unconsciously and indirectly learn the way ahead. This sensitizes the youth to theoretical knowledge which they can then deepen by referring to textual resources. It highlights the primordial role of orality as far as codified knowledge is concerned, at least at the beginning of the learning process (and of course during the pre-literate time of early childhood). But it also appears that orality plays a continuous role in a more formal and conscious manner of learning as shown by the way the father questions his children by the end of the day. Finally, this sequence suggests that learning is collective since Sudarsan is never referring to himself alone but to his peer group (‘us’, ‘we’) and even when he talks about his father, he talks about ‘they’, stressing that transmission is intergenerational. But transmission of knowledge is not only a matter of orality, as Sudarsan revealed, later in our conversation:

It [astrological knowledge] comes hereditarily as we possess old palm scriptures which give details about everything [related to astrology]. For the past seven generations, our family has been practicing astrology, and we are maintaining these palm scriptures for the coming generations.

... There are separate palm scriptures written for maruntu. But this one [Sudarsan showed me a bundle on his desk] gives details only about astrology.

‘... I only know few things about maruntu and paccilai-mūlikai used for treatment, but my father used to practice medicine and he had a lot of palm scriptures on maruntu. He also had the palm scriptures that give details on the medicine written by the famous 18 Siddhars, the Siddha medicine.

Thus, transmission of theoretical knowledge also implies the transmission of text corpora related to astrology and indigenous medicine, formerly engraved on palm-leaves bundles, *ōlai cuvaṭi*. And as far as written corpora are involved in this process, literacy is necessary to decode and acquire the organized knowledge, as highlighted by Maiyil Vahanan, one of my informants who practices both astrology and indigenous medicine:

Siddhars have written the medicines and the recipes in the form of poems ...

For a person who doesn’t know how to scan verses, and thus identify the true meaning of words, then it will be difficult. A person who does not know grammar cannot understand.

The third kind of knowledge I have defined—the practical one—is closely related to the previous two. Indeed, though practical knowledge results from individual practice, it is framed by the group culture and supplied by theoretical inputs. Acquisition of practical knowledge is, thus, a matter of practice and enskilment (Ingold 2000: 36–8). But we can distinguish two distinct steps in this learning process: apprenticeship and individual practice. The first is related to enskilment through practice under the supervision of a knowledgeable instructor while the second is enskilment through individual practice. Thus, personal enskilment through individual practice is clearly independent from the traditional transmission of knowledge as it pertains exclusively to an individual. I shall not detail this process here since I am concerned by vertical transmission.

Apprenticeship goes through observational learning and imitation. Children learn by imitating and repeating an observed behaviour. The main situation from which a Valluvar child can learn that way is during father’s consultations, as illustrated by Gopalakrishnan:

I started learning astrology from my father when I was 12 years old. ... I learnt from my father only. From my childhood, I used to sit with him and listen to all what he was saying. Later when I was little bigger, I started to ask questions and he answered and cleared my doubts. Like this I started learning this [astrology].

Sometimes, the child assists his father by filling the birth chart booklets of a patient, learning, in that way, how to cast the horoscope. Women have also a role to play in this apprenticeship process. Indeed, the grandson of an old Valluvar astrologer, who was fifteen years old when I met him, told me that he learnt how to use and prepare some medicines through observing his mother

and his aunts in the kitchen. As endogamy prevails in Valluvar community, women are generally daughters of practitioners, and are aware of the caste's knowledge. Then as wives of a practitioner, they help their husbands in the preparation of remedies. Otherwise, as far as apprenticeship of indigenous medicine is concerned, transmission is not only a matter of observation and imitation, since, in some cases, practitioners may transmit personal notes on their own practice to their descendants, as revealed by Maiyil Vahanan:

Concerning *mūlikai*, there are several things to know. Each *mūlikai* has its unique properties to cure some diseases, but the same *mūlikai*, when mixed with two or three others, cures other diseases. By knowing these techniques coming from the Siddhars and transmitted by his ascendant, he [father of Maiyil Vahanan] himself tested the medicine by giving them to the sick who were approaching him. Then he was able to identify the good compositions of medicines and adjust them. Then he wrote those recipes in notebooks. I learn those things by reading his notebooks and practicing myself *maruttuvam*. As following hereditary lines, we are practicing medicine. It is called *paramparai aṇupavam vaittiyam*. . . . By reading the available books on Siddha medicine, my father's writings on medicine, and through my own experience, I am making medicines.

Thus, practical knowledge is foremost a matter of transmission of personal experience, which implies relationships between more and less experienced Valluvar practitioners. Besides, each generation brings its own innovations, which are passed down to the next, reshaping, in that manner, the knowledge transmitted.

WHEN A TRADITION OF KNOWLEDGE CHANGES

Valluvar caste knowledge—as we have seen it in its three interconnected aspects—is in fact an ever-evolving body of knowledge and practices, shaped by the internal processes of its own transmission. But nowadays, due to endogenous and exogenous factors, hereditary transmission is deeply changing, thus affecting both knowledge and practice.

The most salient endogenous factor affecting the hereditary transmission is the loss of knowledge concerning the way to write and read palm-leaves. Indeed, today, books have replaced palm leaves and consequently their use has been lost. Only few of my older informants were handling inherited palm leaves, and only one of them—who was more than eighty years old—was able to write in the old manner. In many cases I observed, Valluvar of the younger generation part with the palm leaves inherited from their father or grandfather because they are not able to read them. I remember that Gurujeevan, as we were talking about palm leaves, asked me to follow him behind his house near a small stream, to show me the place he threw all the palm-leaves of his father. I then saw a small mound of illegible palm leaves

decaying into dust. This example is not unique, and illustrates sharply the change in the transmission process. Palm leaves have been replaced by books in modern Tamil, and for many Valluvar these palm leaves are no longer useful, as explained by Maiyil Vahanan:

[My father] had old scriptures. I am using other books, which are available in the shops; because in the old scriptures the language used is different from current Tamil, while in those printed books the text is in modern Tamil. So, I am using those books. Furthermore, in those days measuring system was totally different from the modern metric one. Those things were converted and modified in the new books. If we go and ask the shopkeeper [the apothecary] with those old measures, he wouldn't be able to understand. In these modern books, we can find the new measures. It is helpful for us. Siddhars have written the medicines and the recipes as poems. Those old songs are now available in functional Tamil, so that everyone could understand.

To this endogenous factor—the loss of old Tamil language used in palm leaves—may be added an exogenous one. Indeed, as revealed by Maiyil Vahanan, the diffusion of printed books in modern Tamil seems to have accentuated this situation. As a result of these changes, we are currently witnessing a standardization of theoretical knowledge, a process that has begun several decades ago. Indeed, printed books in modern Tamil, on astrology and indigenous medicine, are available to all, in bookshops. Obviously, orality still plays an important role in the transmission of theoretical knowledge within the Valluvar community, but as for the acquisition of this knowledge through written materials, the hereditary transmission lineage seems broken. The theoretical written materials are now standardized and come from outside the community.

The Valluvar tradition of knowledge is also strongly affected by other exogenous factors. Since the first half of twentieth century, institutionalization of indigenous medicines is a factor which deeply transforms the modalities of medical knowledge transmission. Unlike the practice of astrology, the practice of medicine is supervised by the government through a strict policy of registration. Traditional practitioners are also subject to this system, though in Tamil Nadu, the state government seems to be more benevolent towards indigenous practitioners than the central one (Sébastien 2009: 6–8). In other words, this means that if a traditional practitioner wants to be recognized, he has to provide a medical qualification awarded by a state-recognized institution (in our case, a Siddha college). My informants regularly point out this fact as a cause of abandon of the medical indigenous practice within the Valluvar community. Indeed, a Valluvar who would like to pursue the traditional practice of *maruntu*, has to leave the village and go to a Siddha college for his training, in order to become a 'Siddha doctor' recognized officially. That way, replication system of Valluvar tradition of knowledge based relationships between more and less experienced Valluvar practitioners is broken. And as

stressed by Ingold, '... it is on the reproduction of these relationships, ... that the continuity of a technical tradition depends' (Ingold 2000: 37). At the time I was doing my fieldwork, in reaction to this institutionalization, the Valluvar Sangam, viz., The International Valluvan Community Federation Welfare Trust, was planning to set up training centres in astrology and Siddha medicine, in order to train young Valluvar in their own tradition, thus following the example of traditional practitioners' associations (Sébastien 2009). Yet, if the institutionalization of medicine has deeply transformed the practice of indigenous medicine, the recent emergence of astrology in Indian universities does not seem to have really changed the way of transmitting the astrological knowledge. At most, these new curricula allow some Valluvar astrologers to complete their traditional training, and gain an official degree.

Other exogenous factors like changes in the socio-economic context also affect the Valluvar tradition of knowledge indirectly. Indexed as Scheduled Castes in Tamil Nadu as well as in Puducherry, Valluvar benefit from the reservation policy. Indeed, the Indian government has set up a quota system whereby a part of positions are reserved in government services and in public sector units as well as state-run and sponsored educational institutions. Moreover, according to the Article 46 of the Constitution of India,¹² state governments must provide access to education for Scheduled Castes. This system, which has improved the standard of living of some ex-untouchable communities by giving them access to education, formations and jobs, has at the same time caused ruptures in the hereditary transmission process. As observed during fieldwork, young Valluvar children are going to school, and so they are not as much immersed in the group culture as they were before. They are in contact with a different tradition of knowledge, that of the modern Indian state, which shape their minds in another way. Furthermore, going to school everyday prevents Valluvar children from assisting their father during consultations, thus breaking the observational learning process. Nevertheless, I observed that in some cases, children and teenagers assist their father after school or during their day off. But according to many of my informants, this 'part-time apprenticeship' is not enough to transmit their personal experience properly. And mostly, these new generations of Valluvar, educated in schools and universities, prefer working in educational institutions or in the government jobs they can get through the reservation policy system. From a financial point of view, it is more advantageous to work in those sectors than to pursue the traditional occupation of the group. Members of the Valluvar families I met (both males and females) assume such positions at the expense of their traditional occupation. Generally, the only practitioner (generally the father, an uncle or the grandfather of the family) is also the last who knows how to practice. Nephews, children and grandchildren are usually engaged in a more 'modern life' as they put it. For this new generation,

working as astrologer or as indigenous physician, is generally seen as old-fashioned. These observations confirm the general trend highlighted by B. Sébastia concerning Tamil indigenous practitioners: 'The lack of interest in siddha in the education policy as well as the registration have incited many children of practitioners to abandon the profession of their forefathers and to take jobs in the Indian administration or, for the richest, to work as biomedical doctor, engineer, teacher, etc.' (Sébastien 2009: 8).

CONCLUSION: CASTE OCCUPATION AND IDENTITY

While, from a general point of view, the Valluvar's traditional occupations change deeply under the influence of exogenous socio-economic factors, their practice of astrology seems less affected by the other exogenous factor changing the modalities of knowledge transmission, than their practice of indigenous medicine. Though we are witnessing a standardization as well as an institutionalization of their astrological and medical knowledge—through the emergence of new modalities of knowledge acquisition—the Valluvar practice of astrology remains. Thus, knowledge of the new generation of Valluvar is no longer the result of a unique hereditary transmission process, but rather the mix of various acquisition processes external to the community.

Occupational change is the main consequence of these tremendous transformations. And the Valluvar's case is not unique; other communities throughout India see their traditional occupation changing (Heuzé 2011; Mahias 2011; Prévot 2011). In a system where professional specialization is strongly linked to community identity, one might expect the splitting of the *jāti*'s identities, and at the same time the collapse of the caste system. But this is not happening. The strength of the caste system lies in its ability to integrate changes. Traditional occupations are evolving and changing, but the communities remain and re-invent themselves. As for the Valluvar, their sense of belonging has never been so strong, in spite of these community structural changes, as illustrated by the self-assertion movement on the political scene, and led by the Valluvar Sangam (Avdeeff 2011; Avdeeff and Tambs-Lyche 2011). This self-assertion process relies on the valorization of their traditional caste occupation, and the exaltation of their 'inherited' expertise.

Identities are, thus, moving, adapting themselves to new social configurations. They are glorified, exalted, and even re-invented as needed. Thus, communities remain, even reinforcing themselves in the system. Re-invention of tradition and commercialization of local knowledge may be the keys to understand these adaptation processes. And in our case, it is perhaps in a small Tamil city that the future of Valluvar community is at stake. Indeed, the last decade has seen the development of several *Nāḍi*¹³ astrological centres in the small town of Vaitheeswaran Koil. *Nāḍi* astrology is presented as a particular form of astrology, based on the belief that lives of all human beings

have been foreseen and written down on palm leaves by the sages of ancient time. Seekers come from around the world to have a (costly) appointment with a Vaḷḷuvar astrologer in order to find their palm leaf, and receive a lecture of their past, present and future life. But according to all my informants, this *Nāḍi* astrology's tradition has nothing to do with the astrology traditionally practised by Vaḷḷuvar. This spectacular reactivation, appropriation and commercialization of a local practice by some individuals, encourage a lot of young Vaḷḷuvar to learn *Nāḍi* astrology, which is more lucrative than 'traditional' astrology, in training centres like Vaitheeswaran Koil at the expense of the astrology practised by their forefathers. Here, the invented tradition is killing the older one off.

NOTES

1. A common translation for this term is 'community of birth'. A *jāti* is an endogamous group, and is generally associated with a traditional occupation. Each linguistic region has its own *jāti*, even if we can distinguish recurrent features from one region to another. The Roman transliteration of the Tamil term should be *cāti*, but for the sake of clarity, the pan-Indian term *jāti* will be used in this essay.
2. This essay is based on data collected during three years of fieldwork in Puducherry and in rural Tamil Nadu, between 2006 and 2008.
3. The transliteration of Tamil terms used in the present essay follows that of the *Tamil Lexicon*, University of Madras. *Tolil* is a term usually used in Tamil to designate an occupation or a professional duty and, by extension, the traditional duty of a *jāti*.
4. My informants are using both expressions: *nāṭu-maruttuvam* and *nāṭu-maruntu*. According to *Tamil Lexicon*, the meaning of *maruttuvam* is the practice of medicine and *maruntu* is medicine. The prefix *nāṭu* means country and comes to reinforce the notion of indigeneity. Thus, *nāṭu-maruttuvam* can be translated by 'practice of indigenous medicine' and *nāṭu-maruntu* by 'indigenous medicine' or 'local medicine'.
5. Scheduled Castes are Indian population groups recognized by the State, mainly the ex-untouchable communities. They benefit from the policy of positive discrimination established by the post-independent State.
6. Paraiyars are the majority among the Scheduled Castes of Tamil Nadu; see Deliège (1988).
7. Indeed, regarding their recognized traditional occupation, Vaḷḷuvar are also seen as the priests of the Paraiyars.
8. Astrological and medical knowledge could be also shared, to some extent, with other practitioners from various communities, like for example Brahmins.
9. Unlike casting the horoscope, one does not need to be literate to master medical practice, since it rests on the practitioner's perception of his patient's body (pulse, symptoms, etc.) in order to establish a diagnosis, which remains oral.

10. For the sake of confidentiality, in the present essay, all the names of my informants have been changed.
11. Some of my informants prefer to present themselves as *pācu-maruntu-vaittiyaṇ* or *paccilai-maruntu-vaittiyaṇ*, which means literally 'green (fresh) leaves medicine practitioner' or also *paccilai-mūlikai-maruntu-vaittiyaṇ* that can be literally translated by 'green-leaves and roots medicine practitioner'.
12. Article 46 of the Constitution states that 'The State shall promote with special care the educational and economic interests of the weaker sections of the people, and, in particular, of the Scheduled Castes and Scheduled Tribes, and shall protect them from social injustice and all forms of exploitation.'
13. On *Nadi astrology*, see Gansten (2003).

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