



# Indigenous Healthcare Traditions of Mountain Communities: A Perspective

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## ABSTRACT

The Indian Himalayan Region holds an unusual status in the mountain ecosystems across the globe. The Himalay, which splits the Indian Peninsula from the Central Asia, due to its diverse flora, fauna, topography, ecosystem, socio-cultural and esthetic values have great mystical and ecological implication. The entire region is rich in both biological resources and traditional wisdom. The paper deliberates on the survival mechanism of mountain communities with a special focus on indigenous healthcare practices. It discusses a diverse range of issues, including ethnobotanical facets of medicinal herbs, traditional healing techniques, etc. It attempts to exemplify diverse therapeutic methods followed by the folk healers and their implication in the life of the Himalayan people. The importance of preserving indigenous wisdom in the context of the cultural milieu of the region is crucial. From a socio-cultural viewpoint, it suggests precise interventions that must be made for the perpetuation of this knowledge.

**Keywords:** Pujari, Ojhas Tantra-mantra, cultural milieu, therapeutic procedures medicinal plants.

## INTRODUCTION

Healing evolves as an eternal response to the risk of ailment. The healing traditions have evolved over the years, adjusting to the modifications in the beliefs of society, they stayed alive. Likewise, the underlying conventions of society's healthcare system and the era in which it occurs, governs the nature, identity and role of that system. Traditional knowledge which includes, the innovations and practices of indigenous and local communities around the world have developed from the experience, acquired over the centuries and acclimatized to the local culture and environment. This knowledge is of a practical nature, mainly in the areas, such as, farming, fisheries, healthcare, forestry and natural resource management. Indigenous healthcare system has proved to be a valuable guide in screening of the contemporary drugs that have been unearthed by drawing clues from the ethno-botanical uses of plants and other natural occurring material (Anyinam, 1995). For eras, the snow-covered mountains and holy rivers have nurtured the great civilizations of the world and are the meeting ground for diverse races, ethos, and faiths. With 2,400 kilometers span and variable width between 240 to 330 kilometers, the Himalay, has three ranges-the greater Himalay, the lesser Himalay, and the outer Himalay. Amidst these mountains are widespread uplands, deep and fertile ravines. The Himalay plays an important role in shaping the climate of the entire region. Moreover, the Himalay are known for their historical, spiritual, and topographical significance. Historically, the Himalay acted like a guardian and prevented its natives from various invasions. The whole range offers audacious voyages to discover hidden treasures. Since times immemorial, the traditional knowledge and practices have been providing the basis for the wellbeing and livelihood of mountain communities, sustaining their welfare and restoring their environment. Rich and intact natural resources, which are found in its surrounding area, have not only taken care of various cultures but are significant for the survival of future generations as well. Having acted as a natural and political barricade for centuries, the Himalay have nurtured and disseminated a number of traditional knowledge systems, customs, and communities, who despite living in unapproachable valleys have maintained their cultural uniqueness. The Northwestern Himalayan region consisting of the states of Jammu & Kashmir, Himachal Pradesh, and Uttarakhand, is relatively arid thus, characterized by famine tolerant and chill resistant plants. The region exhibits a

wide altitudinal difference ranging from tropical to alpine vegetation. Nearly 80 percent of the communities residing in the region depend on agriculture and allied activities for their livelihood and are thus known to have the genetic resource wealth of crop plants, their wild relatives, and other essential plants having nutritive and therapeutic value. The rich inter-specific diversity exists for the genera contributing significantly to the sustenance and development of the traditional Himalayan agroecosystems. Wild plant resources found in Himalayan regions have fulfilled the requirements of ethnic communities, by making available, fuelwood, wild edibles, raw material for crafts, and herbs for healthcare. Around 18,440 species of plants are found in the Indian Himalayan region of which about 45 percent are having medicinal properties. The number of medicinal species in Himalay is around 7,500 to 10,000, which contribute significantly to the biodiversity of the region. The Himalay having a huge wealth of medicinal plants and traditional knowledge play a key role in the healthcare systems of mountain societies. It is assessed that 70-80 percent of the rural population depends on traditional medicine for primary healthcare, even though allopathic medicine is available in different parts (Farnsworth and Soejarto 1991; Pei Shengji 2001). Medicinal plants, being a source of rural earnings in the region, add substantially to the economic development of the communities and support modern industrial development both inside and outside the region.

Knowledge about the plant diversity and conservational efforts has placed the region on the world's herbal map, drawing the nature lovers and entrepreneurs from far, thus improving its economy. The Himalay host the three main traditional medical systems around the world: *Ayurvedic* medicine, Chinese medicine, and *Unani* medicine. The use of herbal medicine dates back as far as the Indus Valley civilization in 2600 BC. Chinese and *Ayurvedic* medicine developed by local people is used even today. This knowledge plays a very important to modern pharmaceutical research. Utilizing the traditional wisdom, numerous modern drugs, including anti-cancer drugs, antibiotics, malaria drugs, and analgesics, have been developed from animal and plant sources.

One finds numerous instances in literature, which explain the development and use of ancient healing techniques. There is a long tradition of utilizing medicinal plants both for preventive and therapeutic healthcare by the indigenous societies. Rural communities have reliable facts and effective techniques to identify, harvest, utilize and preserve herbs in their natural habitats for sustainable utilization. This wisdom is not only used for treating human ailments but to cure diseases of domesticated animals. The longstanding healing systems exist in form of oral traditions and have no scientific credentials. The ethnic mountain communities use herbs, minerals, animal products, and *tantric* practices for saving a life. According to an estimate of World Health Organization (2008), approximately 80 percent of the people in developing nations depend on traditional medicine for realizing their primary healthcare needs and a major portion of these use medicinal plants. Understanding the indigenous wisdom of the mountain people in relation to biodiversity, resource management, and cultural traditions are important for the growth of the Hindu-Kush Himalayan region, which necessitates documentation of changes management, culture, and decision-making.

In prehistoric period, and even these days, the traditional wisdom and practices remained the livelihood basis of indigenous mountain communities. In contemporary times, the two are employed by the food, pharmaceutical, and cosmetic industry. Rich in biodiversity and indigenous knowledge, the Himalayan region is actually a sacred land, where nature has conferred its outstanding treasure to the communities. Nearly forty million people living in the distant and remote valleys of Himalayan region have safeguarded their cultural individualities. Typically, Hindus of Indian heritage are dominant in Sub-Himalay and Mid-Himalayan valleys from eastern Kashmir to Nepal. In central Nepal, the Indian and Tibetan cultures have intermixed, producing a blend of Indio-Tibetan traits. The Eastern Himalay in India and nearby areas of Eastern Bhutan are inhabited by animistic people whose culture is similar to those living in Northern Myanmar and Yunnan province in China. The majority of Himalayan communities have survived by choosing farming and livestock rearing. Ethnic spectra of central and western Himalaya clearly differ from that of the northeastern region. Ethnologically, a majority of tribal communities, mainly those in northeastern regions, exhibit '*mongoloid*' features as can be observed from the physical features. Evolution, migration, and acculturation gave rise to a diversity of socio-cultural identities demonstrating tribal-non-tribal continuum.

## HEALTHCARE SYSTEMS OF MOUNTAINS

The time-tested Traditional Knowledge Systems (TKS) have evolved in the mountains and helped in the survival of people in extreme climatic conditions. Until recently, traditional wisdom offered a vast majority of people the basis for the production of daily needs, activities including, farming, irrigation, artisanal creation, healthcare, childcare, etc. Berkes (1993) defined traditional knowledge as:

“A cumulative body of knowledge and beliefs handed down through generations by cultural transmission, about the relationship of living beings (including humans) with one another and with their environment. Further, traditional knowledge is an attribute of societies with historical continuity in resource use practices; by and large, these are non-industrial or less technologically advanced societies, many of them indigenous or tribal”

According to International Indigenous Forum on Biodiversity:

“Indigenous knowledge is the essence of the identities and world views of Indigenous peoples. Traditional knowledge constitutes the collective heritage and patrimony of Indigenous peoples. Therefore, it is priceless to us, and its value cannot be calculated for economic exploitation.”

Traditional knowledge has been defined diversely but the vital theme consists of cultural beliefs and traditions passed on from the lineages to the present generation for survival while communities still live-in harmony with the ecosystems. Traditional knowledge is something that is acquired during a lifetime and identifies the interconnectedness of trees, soil, and water. This knowledge is based on the experience and observation over the years, and is concealed in folklore, oral tradition, myths, legends, ceremonies, and songs. Its legitimacy is confirmed by the survival of techniques that have been successfully used by numerous generations and need no validation of occidental sciences.

The people prescribing traditional medicines in the region as in other parts of the world lack formal scientific knowledge about the disease, but pursue their specialties, by learning through observation and imitation. Often healing is passed on from one generation to another. The folk healers use a combination of prayer, charms, and rubbing or massage; or prescribe herbal teas or decoctions of herbs or animal parts. People not only use native herbal medicines for the treatment of common ailments like cough, cold, fever, headache, body aches, constipation, dysentery, burns, cuts, scalds, boils and ulcers, skin diseases, respiratory troubles, etc., but these systems have remedies even for many incurable diseases like cancer, leucoderma, snakebite, diabetes, rheumatism, asthma, etc. the herbal remedies are often suggested by household women, elder persons, folk healers, and traditional herbalists. Magico-religious therapies make use of various procedures, to appease the local deities and supernatural powers.

Rural women for curing the common health problems of infants and children make use of household condiments and spices. Additionally, the use of infusions of Holy Basil leaves for cough, cold and mild fever; Turmeric for cuts, burns, and scalds; Black pepper fruits for cough and cold; Carom seeds for stomach troubles, etc., are few familiar household remedial measures. The village elders and priests are aware of herbal formulations, which are useful. These herbal formulations are recommended for common health disorders and normally, healing is done free of cost. Nature has bestowed its best for the mighty Himalay, the land, and water resources are plenty, but there is a need for sustainable utilization of these resources. At the same time, the importance of safeguarding and management of its resources and associated knowledge is very crucial, particularly in the context of globalization and the increasing demand for resources. This knowledge is not only important to those who are directly involved and linked with it, but also to modern medicine. This not only has implications for a perpetuation of traditional practices within the mountain communities but also for connections established outside the communities.

The Himalayan region, categorized by the varied biophysical environment, rich cultural milieu, has nurtured its ethnic groups and indigenous societies, since times immemorial. Because of its isolation and poverty, the mountain systems remained neglected. The natural settings of Himalay have shaped the resource-management giving rise to many eco-zones, within which is found a large diversity of microclimates and microenvironments. Biological resources are very varied; vegetation types are highly diverse and endemism is high. The indigenous wisdom of Himalayan communities has played a very significant role in the management of natural resources. However, the developmental activities, overgrazing, expansion in farming, etc., have resulted in the exhaustion of natural

resources and paving way for several problems such as land degradation, soil erosion, and drought, which necessitate thoughtful consideration of the scientific community.

Across the entire Himalayan Region, folk healers have an outstanding knowledge of herbs, gathered through generations and passed on through years of apprenticeship. The traditional healers in the region have been developing the healthcare traditions through constant experimentation and years of experience, which is rooted in understanding and realistic considerations. The traditional wisdom of Himalayan communities is preserved in form of folk proverbs, folklore, legends, customs, and myths. These sources reveal how troubles emerge in life and how resolved by the joint attempts of a community. In the long history of local influences, there are deformations, distraction, and alteration in the folk healing practices on the negative side, and inspiration, reviews, and improvements on the positive side. Nevertheless, the folk systems have remained receptive to local needs and prospects.

Indigenous healthcare traditions in the Himalayan region have two treatment methods: natural and supernatural. The natural method is symptomatic while the supernatural stream is etiological. The symptomatic way involves the identification of disease by investigating the symptoms followed by the management using natural medicine. The super-natural methods assign specific reasons to sickness. However, the cause or etiology is believed to be different from contemporary medicine. According to the folk beliefs, the cause could be anything like a fury of the local deity, evil-spirits or sorcery, black eye, violation of taboos, etc. In order to uproot the cause of disease certain ritualistic performances are made. In the Central Himalayan region, a magical therapy, called *jagar* is practiced against the diseases. According to people, this is the ultimate cure for several non-curable diseases, mainly psychosomatic disorders. *Jagar* is generally organized at night and takes one night or twenty-two nights depending upon the severity of the wrath of the local deity.

People classify diseases into two categories (a) related to the body (b) related to the mind and the mystical world. The bodily ailments are cured by making use of herbal medicines, together with animal parts while the psychosomatic ailments are handled by using magico-religious practices together with herbal medicines. Healers believe that the effectiveness of medicine goes if its formulation is revealed to unskilled persons. Himalayan people consider that diseases are caused by the annoyance of local deities and hence treat them accordingly. For treating such diseases, priests or mystic healers play a significant role. The mystic healers explain to people, the cause of disease and offer curative supervision. If the cause is any spell of an evil spirit, the healer treats the patient with the help of hymns and apparently drives away the spirit. Such magico-religious ceremonies can be seen in any Himalayan village, even among the educated classes. *Thau-dam*, traditional Himalayan therapy is practiced in the rural Himalayan region for managing liver troubles, stomach troubles, backache, etc. This therapy was also practiced by the ancient people and finds mention in *Ayurved* as *agnikarma*. *Thau* therapy is generally practiced by the elder people of the village and is mandatory for six months to one-year-old children. Based on the nature of disease, the people sought relief in the respective domains and this includes household medication, spiritual or faith healing and folk herbalism. Household medicine is generally the first resort to the health problem. The household condiments and spices are used for curing common health problems of infants and children. Furthermore, the use of infusions, teas, decoctions, and homebased ointments is common for treating the mild diseases. The elderly people and priests are aware of herbal formulations, which are believed to be effective. Nature has bestowed its best for the mighty Himalay.

*Sowa Rigpa*, meaning “the science of healing”, does the curing in Tibet. The basic theory is to stabilize the main energies of the body. The practitioner makes use of traditional apparatus to find the root cause of the disease. Treatment is carried out by adjusting diet together with herbal medicines. The healing is based on Buddhist principles and close association between mind and body. Gurmet (2004) gave an account of *Sowa-Rigpa*, commonly known as Tibetan or *Amchi* medicine practiced in Himalayan regions throughout Central Asia. Several studies have been carried out to document the folk healing practices of Himalayan region. Pant and Pandey (1995) studied the ethnobotanical wisdom of *Tharu* community living in Nainital district of Kumaon region. Samal *et al.* (2004) made an effort to document indigenous healthcare systems and their significance in the physical well-being of people inhabiting Central Himalayan region. Pandey (2004) gave an account of a time-tested remedy, popular among the



aborigines of Gonda, Bahraich and Balrampur districts using seed fume of *Solanum surattense* against tooth and gum disorders. Garbyal *et al.* (2005) carried out a study in Darma valley of Dharchula Himalay is situated in Kumaon region of Uttaranchal state and reported the rare herbs and shrubs. Jamir and Lal (2005) reported the traditional method of curing ailments using different vertebrates and invertebrates and/or their products by *Naga* tribes. Kala (2005) investigated medicinal plants used by the *Apatani* tribe of Arunachal Pradesh and documented more than 150 medicinal plant species used by them. The studies carried out by different researchers not only highlight various techniques and methods opted by the people for getting rid of the disease, but also focus on their traditional wisdom and skills.

Thus, the survival of the indigenous healthcare system depends on the availability of resources and is practiced among all-mountain communities for curing various types of ailments. But different communities have distinct ethno-medico-religious practices, which continue even though contemporary Medicare is accessible to them. Hence, it would be wise to grow this arena of knowledge widely to evolve a new horizon in the field of medical science.

The indigenous medical systems are still widespread in the region because of their suitability, ease of access, and appreciation, which inspire communities to make use of these systems for meeting healthcare needs. Still, a number of gaps exist with regard to the limits and prospects of traditional medicine. Understanding the vision of folk healers and linking mystic and folk healing is absent. Today's changing ecological and socioeconomic scenario are posing threats not only to herbal wealth but also to the ethnobotanical wisdom of its custodians, which is on the verge of extinction. The methods on the preservation and sustainable use of herbs are yet infrequent. Moreover, with the passage of time, the wisdom linked with the healing, if not documented, will fade into oblivion, hence call for preservation. For the future development of the region and country, the traditional system must be restored as a valuable system. The herbal preparations used by the traditional healers must be scientifically tested and long-established. The ongoing acceptance of *Ayurved* in Western countries can be made useful to promote it across the globe. The claimed curative properties of medicinal plants cited by the folk healers must be validated clinically in order to establish their validity, and evolve new medical formulations. Undoubtedly, the traditional healthcare system has endured for a very long time; its therapeutic value needs to be considered, explored and endorsed in the context of the present times, which would surely add to the scope of the medical science as well as for the benefit of the humanity.

### WHY TRADITIONAL KNOWLEDGE?

Ethno-medicine has maintained its popularity in a number of Asian countries, such as China, India, Japan and Pakistan. During the last decade, there has also been a growing interest in alternative systems of medicine in many developed countries (Eisenberg, *et al.* 1993 and Malhotra, *et al.* 2001). Traditional knowledge is being harnessed at a alarming rate by the contemporary herbal medicine, pharmaceutical, food, perfume, and cosmetics industries. Indigenous and local people are gradually becoming the targets of piracy. The point is that exclusive rights must be approved for non-original innovations that are directly or indirectly based on traditional knowledge. The curators of traditional knowledge need to establish their rights over such knowledge to ensure that they reap the real benefits of their innovations. Access and Benefit Sharing (ABS) from genetic resources is a key incipient issue in the Himalayan region. Despite official backing for the execution of the CBD by governments, civil society, and communities, the actuality is different. Consciousness about traditional knowledge has not received enough consideration. There is a need for active discussion on traditional knowledge at the local, national, and regional levels through workshops and meetings involving local communities. It is important to enabling the institution of rights of traditional knowledge associated with genetic resources by the custodians. There is a need of appraising the obscurities in the legislature on traditional knowledge and deliberation on execution issues. It would be better if we re-examine the legal gaps in intellectual property rights to reinforce the rights of sidelined, ethnic, and local communities in the fortification of traditional knowledge. Since the mountain regions have a similar socioeconomic setup and depend on traditional knowledge, it is important to develop a common understanding of the use and benefit-sharing mechanisms applicable to all. This requires the development of an access and benefit sharing agenda or policy incorporating the essential issue of traditional knowledge. The participation of local, indigenous, and marginalized people in the policy formulation and execution, including traditional knowledge, is very

important. Wherever documentation of traditional knowledge has been done, supervising the efficacy is imperative. Wherever the long-established legal provisions for the protection of traditional knowledge are operational, there is a need to closely examine them, and constitutional law should legitimize those favoring the conservation of traditional knowledge. The healing properties of medicinal plants showed by the traditional healers can be clinically tested in order to establish their validity, and also to evolve new medical formulations. In Himalayan countries, there is a need to propagate and execute laws envisioned to protect the traditional knowledge of mountain communities.

## Endnotes

*Unani* refers to a tradition of Graeco-Arabic medicine, which is based on the teachings of Greek physician Hippocrates.

*Tantra-mantra* primarily deals with the spiritual practices and ritualistic worship, which aim at liberation from the cycle of birth and death.

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