



PRE LOKMANTHAN

International conference

ON

**NON-CODIFIED HERBAL HEALING SYSTEMS:
CONSERVATION, PROMOTION AND ACTION PLAN**

ORGANISED BY

**Prajna Pravah and Indira Gandhi Rashtriya Manav
Sangrahalaya (IGRMS)**

in collaboration with

**Anthropos India Foundation
Makhanlal Chaturvedi National University of Journalism and
Communication, and
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**IGRMS, BHOPAL,
MADHYA PRADESH**



CONCEPT NOTE

Plural health care is the norm in almost every country. Long before the advent of modern medicine, codified systems, like Ayurveda, Siddha, Homeopathy, Unani, Naturopathy and many others existed. Those systems, which have written text, professional degrees, scientific validity and training have been named as codified systems while many others do not have written text, and professional degrees have been classified as non-codified.

The term "non-codified" may carry an implicit bias suggesting that such systems are less legitimate or sophisticated compared to codified systems like Western medicine. Labelling diverse and complex healing traditions under a single term can oversimplify and misrepresent their cultural and historical significance. Despite the powerful lobby, commercialisation and professionalisation of biomedicine, these non-codified healing systems have survived for centuries and remain vital to many communities around the world for their cultural significance and practical benefits.

Non-codified healing systems, often referred to as 'traditional', 'indigenous', or 'folk medicine', encompass a wide range of health practices, knowledge, and beliefs that are rooted in the cultural traditions of various societies. These systems have been passed on from generation to generation through oral traditions. They have a holistic approach which focuses on the whole person, including his or her physical, mental, and spiritual aspects. These healing practices are deeply embedded in the cultural and social fabric of the community. They rely on empirical evidence and observation rather than scientific validation. They have diverse practices, which includes herbal medicine, spiritual healing, body manipulation, and dietary practices etc. These are non-commercial, service-oriented, and laced with divinity and spiritualism. They provide primary health care services at the door steps of the patients in rural and far flung areas.

As per WHO, despite the fact that 80% of the population goes to herbal healers in Asian countries, these systems are not officially recognised by governments and healthcare institutions. This leads to a feeling of marginalisation and lack of support among the herbal healers. The 'experiential' aspect of these healing methods are often discarded as lacking 'scientific' study and are therefore seen with scepticism. However, many field studies show that patients visit these healers regularly and have received substantial relief. Their repeated visits prove the efficacy of the non-codified healing systems.

ABOUT US

LOKMANTHAN • लोकमंथन

LokManthan, a colloquium of thinkers and practitioners, created a significant impact in the public discourse in 2016 and 2018. India represents a complex and diverse mix of feelings, emotions and belief systems among its people. No singular vocabulary can describe this beautiful nation, its people, and all that it encompasses. Our country is quite diverse, multi-lingual and multi-cultural, yet is bound together by the ancient bonds of shared traditions, culture and values. Such bonds need to be strengthened through enhanced and continuous mutual interaction between people from varied regions and cultural beliefs. This is essential to foster and encourage reciprocity and to secure a united and enriched value system among the diverse people of Bharat.

The first *LokManthan* focused on the theme of *Desh-Kal-Sthithi* and was held in 2016 at Bhopal. The second *LokManthan* was held in 2018 at Ranchi and comprised the theme *Bharat Bodh: Jan Gan Maan*. It was mainly intended to provide a platform for multi-layered and comprehensive discussions on topics ranging from Indian arts to the environment etc. The third *LokManthan* was held in 2022 in Guwahati, Assam. It centred around the theme of '*Lokparampra*'.

This time round, *LokManthan 2024* is based on the theme of "*Lokavlokan: Idea, Application, Systems*". The event hopes to offer a significant platform to thinkers and activists. Its aim is to bring forth a holistic understanding of the people by showcasing, presenting, and analyzing the various dimensions of the *Lok*.

LokManthan 2024 will be held on November 22, 23, and 24, 2024, at Shilpakala Vedika in Hyderabad.



Herbal healing is an experiential practice. It is a rich and culturally significant tradition that offers valuable insights into health and wellness. While it faces challenges in preservation, validation, and integration, its strengths lie in practical knowledge, adaptability, and sustainability, making it a *vital component* of holistic healthcare. Herbal healers can be viewed as custodians of traditional knowledge and practices, preserving and passing down cultural heritage and wisdom. Healers often hold a respected position within the community, fostering trust and cohesion through their role as caregivers and advisors. In some cultures, herbal healers also serve as mediators and counsellors, helping in resolving conflicts and maintaining social harmony. They often work within a network of other traditional practitioners and community members, strengthening social bonds and support systems.

In areas where modern healthcare is limited or unavailable, traditional herbal healers fill in critical gaps by providing essential health related services. Herbal remedies are often more affordable than pharmaceutical medicines, making healthcare accessible to low-income populations. Their treatments are culturally relevant and accepted, increasing compliance and effectiveness within the community. These systems have cultural heritage, represent the collective wisdom and practices of a community. In today's context, there is a threat of biopiracy, so protecting the knowledge of traditional healers and ensuring that they also benefit from commercialisation of their practices can be a difficult task. It is also important to understand whether there is a need to commercialise their practices in the first place as they are already doing great service to the nation through divine healing based on the premise of service to humanity. The healers strongly believe that with increasing commercialisation they are bound to gradually lose their powers.

These non-codified healing systems have existed for centuries, but have been given the status of 'alternative', 'supplementary', 'complementary' or 'other' healing systems. This belief, however, has been questioned by some scholars. Differences in philosophy and methodology can lead to conflicts with modern medical practices, making integration into formal healthcare systems challenging, even undesirable. In the process of documenting the healers' knowledge, there is a risk of their exploitation where traditional knowledge is appropriated without proper acknowledgment or benefit-sharing with the originating communities. Protecting the intellectual property of traditional healers is therefore challenging as the tendency is to potentially misuse and commercialise their practices without sharing any compensation by profit-driven intermediaries and corporations.

Companies may patent traditional knowledge or biological resources, effectively monopolising them and preventing the original communities from using their own traditional practices freely. Biopiracy therefore can lead to the erosion of traditional knowledge and practices as they are appropriated and commercialised without acknowledgment or respect for their origins. Having said that, claiming Intellectual Property Rights (IPR) within the non-codified herbal healing systems is complex as these systems are traditionally shared and maintained communally rather than individually. Protecting these rights involves several challenges and considerations. Addressing biopiracy and protecting the IPR of non-codified herbal healing systems requires a multifaceted approach that respects and acknowledges traditional knowledge, ensures equitable benefit-sharing, and develops legal and institutional frameworks that accommodate the unique characteristics of these culturally significant practices.

The commercialization and exploitation of herbal healers involve complex dynamics that can have more negative consequences than positive ones for traditional practitioners and their communities. The commodification of traditional practices can strip them of their cultural significance, reducing them to mere '*products for sale*'. Commercial interests may dictate how traditional knowledge is used, potentially leading to the alteration or misuse of traditional practices. Unsustainable harvesting of medicinal plants for commercial purposes can deplete natural resources and harm local ecosystems. It has been seen that some medicinal plants are grown commercially and take over others at the cost of rare medicinal plants, making it difficult for the healers to grow or search for them. The forest laws and guards also make it difficult for healers to collect the medicinal plants for treatment. Deforestation further adds to the loss of some important medicinal plants too.

Non-codified herbal healing systems have to be understood from the post-colonial lens. It involves a self-conscious attempt to decolonise the mind and re-appropriate repressed and devalued indigenous knowledges in healing practices that come from peripheries, and from the so-called 'marginalised' and 'disposed' people. The focus of *Lok Manthan* this time is to resuscitate the ancient knowledge systems, preserve, conserve and promote cultural legacy. Further, the *Pre Lokmanthan* will be a platform to question some of the taken-for-granted terminologies, text book concepts, and to critically look at the intention behind documentation and integration of the traditional knowledge base.

The *Pre-Lokmanthan* will discuss and debate some of the strategies to mitigate exploitation of healers. Questions that probably need asking include whether to establish fair trade standards that can ensure that herbal healers receive equitable compensation for their contribution and resources, or not? Further, whether to commercialise their practices or leave them untouched for the benefit of the local communities? Whether involving local communities in the commercialisation process can help ensure that they retain control over their own knowledge? How to develop robust legal frameworks to protect the intellectual property rights of herbal healers and their communities? Whether to encourage companies to adopt ethical standards and practices while engaging with traditional healers (to prevent their exploitation and to ensure mutual respect), or not? Whether we need to implement agreements that ensure a fair distribution of profits and benefits between companies and the source communities, or not? Whether the healers need protection from exploitation by Companies, or not, and so on and so forth.

Traditional herbal healers are invaluable to their communities, offering comprehensive healthcare, preserving cultural heritage, fostering social cohesion, and contributing to local economies. Their role extends beyond mere treatment to encompass education, resource management, and cultural preservation, making them integral to the well-being and resilience of their communities. *Recognizing and supporting the role of traditional herbal healers can enhance healthcare outcomes, promote cultural continuity and strengthen community bonds.*

Abstracts for Papers based on empirical research and Academic Posters are invited on any of the following Sub Themes :

- The importance of non-codified herbal healing practices in the Indian context
- Challenges faced by the healers, and lack of recognition and state support
- Climate change, preservation, conservation of biodiversity vis-a-vis herbal healing.
- Herbal healers: Promotion, advocacy and health communication
- Promotion of non-codified herbal healers: Validation, Certification, and policy recommendations
- Action plan and models for supporting “non-codified” herbal healers across the nation

IMPORTANT DATES

Date of Submission for Abstract	: 25 August, 2024
Intimation of Shortlisted Abstracts	: 30 August, 2024 (Participants whose abstracts have been peer-reviewed and shortlisted will be informed)
Date of Submission of the Full Paper	: 20 September, 2024
Conference Dates	: 21-22 September, 2024

ABSTRACT SUBMISSION GUIDELINES

1. The abstract should be a concise note of not more than 500 words in coherence with the broader theme of the Conference. It can be based on one or more than one sub-themes of the Conference.
2. It must contain a clearly defined research objective/hypothesis, research methodology as well as the major findings of the research.
3. In case any references are made to a previously conducted study or research, it should be mentioned in the footnotes.
4. The abstract should have atleast five keywords.
5. The abstract must be an original work of the author(s).
6. The format for the submission of the abstract is as follows:

Author's Name: _____
Author's Affiliation (in one line): _____
Position of the Author (student/researcher/faculty): _____
Area of Research/ Publication: _____
Keywords (five): _____
Number of Prior Publications: _____
Brief Bio of Author(s) (100 words): _____
Abstract (not more than 500 words): _____

FULL PAPER SUBMISSION GUIDELINES

- The full paper must be between 4000- 5000 words (excluding references).
- The paper can be in Hindi or English.
- The paper should be an original work of the author(s) and will be put through a plagiarism check.
- The paper will be double-peer reviewed and only the selected papers will be invited for presenting (oral and poster) in the Conference in Bhopal and published in an edited volume.
- The paper must have clearly written out sections in conformity with academic style of writing, i.e., introduction, literature review, research objectives, research questions, research methodology, observations, analysis, conclusions and bibliography.
- The paper should have footnotes to references made in the text (instead of endnotes).
- Any references made in the paper to a previously conducted study/research, must be properly cited in the APA format (see below).

(APA format – Author's Last Name, First Initial. (Year). Article title. Magazine/Journal/Newspaper Title, Volume Number (Issue Number), Page Number.)

POSTER SUBMISSION GUIDELINES

- Dimensions of poster should be 36" x 48".
- Content should include the title, author/s, and affiliation/s along with introduction, methods, results, discussion, and references.
- Formatting: Titles to be displayed in 85 pt. font, authors' names in 56 pt., sub-headings in 36 pt., body text in 24 pt., and captions in 18 pt.
- High-resolution visuals with clear labels.
- Be sure to include the abstract title, author and co-author names, and the institution(s) where research is underway.
- Mention your e-mail address, phone, and fax number, if available, in the upper right-hand corner of the poster board.
- Visual representation: 20% text, 40% graphics and 40% space.
- Posters should be environment-friendly while depicting the theme of the conference

REGISTRATION DETAILS

REGISTRATION FEE

Research Scholars, Academicians and Faculty : ₹ 2000/-

*Registration fee to be paid only after selection of abstracts

Selected papers will be published in peer reviewed journals post approval from the Editorial Team.

Three full papers and posters will be identified for the 'Best Paper' and 'Best Poster' awards.

REGISTRATION LINK



https://docs.google.com/forms/d/e/1FAIpQLSd_PIBz-aGQUVfV5d1GHXkzyMwfZcPQdt3baAmnaGiARr5QGw/viewform?vc=0&c=0&w=1&flr=0

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