# Women became Village Health Stewards

7000 rural people <u>benefitt</u>ing

The Green Health Programme – an initiative to promote the conservation of medicinal plants through sustainable use

# Context •••

Traditional knowledge of medicinal plants and herb-based home-remedy systems are popular in India. Age-old Ayurveda system of treatment and thousands of folk practices that flourished were well-accepted by the people of Kerala. Wayanad district is well-known for its medicinal plant wealth and community knowledge associated with it. Conversely, the natural population of most of the potential medicinal species and rich traditional knowledge in the region are dwindling at an alarming pace. There was thus felt a need to promote cultivation of medicinal plants. The inter-generational erosion of the community knowledge of traditional healthcare practices also needs revitalisation.

# Intervention

Since 1998, the Community Agrobiodiversity Centre of M S Swaminathan Research Foundation (CAbC- MSSRF) has been engaged in revitalising this heritage under a campaign called 'Green Health Programme', which is aimed at promoting primary healthcare traditions through conservation and sustainable use of a set of commonly known medicinal plants that have well-established use value. MSSRF, with the support of the Government of India and the Government of Kerala, selected over 420 rural women, formed Self Help Groups (SHGs), and trained them on aspects of cultivation, conservation, consumption, and commercialisation of medicinal plants under the supervision of traditional healers, Ayurveda physicians, botanists, and nutrition experts.

A total of 28 SHGs, each comprising of 10–15 women from resource-poor families were trained on various aspects of medicinal plants. The members were exposed to revitalise the practices and methods of the local healthcare systems. This included medicinal plant identification, propagation, harvesting, preparation, storage, and

# Since 1998

use of primary healthcare products. Selected groups received eight days of intensive training over a period of eight months in the preparation of a set of 36 herbal formulations grouped into five categories: choornam (powder), lehyam (colloid form), thailam (oil), gulika (tablets), and powdered seed mixtures. One of the lehyams was chyavanaprash- an ancient Ayurveda product to boost immunity prepared using 46 different ingredients. Over 500 awareness classes were conducted for the SHG members. They were encouraged to observe various vegetation types -- in particular the agricultural production landscapes -- to help them understand the distributional differences of medicinal plants according to the land-use types. They were also allowed to visit reputed Ayurveda firms for first-hand experience from the herbal gardens and drug production units, and also to learn from the doctors. The trained women were actively involved in the production and consumption of several primary healthcare products, household-level herbal preservation, and consumption of self-prepared products made from medicinal and wild edible plants. The trainees prepared these formulations for their own healthcare needs as well as to serve as an additional income source. Out of the 36 herbal products for which training was given, nine were found to have high local demand and were marketed by the SHGs. Marketing was conducted through neighbourhood sales and local fairs. One of the best-selling formulations, the Navadhanya mixture - a mixture of nine grains and pulses, was well accepted at the local level and marketed fairly well. All groups were trained on marketing techniques and developed their own marketing strategies. The income earned from sales is always divided proportionately among members.



# Outputs • • •



- \* The Green Health programme benefitted approximately 7000 rural and tribal people, including all SHG members, their families, and neighbours in Wayanad and adjoining districts.
- \* Knowledge and skills of the SHG members were enhanced considerably and families earned an additional revenue from selling the products.
- \* Expenses on medicine and consultation reduced since they started using their own products to address simple ailments at the household level.
- \* Herbal gardens at schools and public places were promoted in a participatory way.
- \* More than 300 home herbal gardens were promoted in households to address immediate primary healthcare needs using potential medicinal plants.
- \* Following project activities, people who grew less than ten essential medicinal plants species started growing many more medicinal herbs at home.

# Outcomes

: The grassroots level initiative was scaled up to establish a fully equipped and licensed factory at Wayanad in 2008 with financial support from the state government. It is being managed by one of the partnering organisations - Vanamoolika, along with women SHG members. A small-scale herbal unit managed by a trained 10-member women SHG - the Navachaithanya Herbal Unit was also started at Pozhuthana Panchayath in Wayanad district, with the full support of Pozhuthana panchayath and Government of India.

The practice of preserving medicinal plants on the premises of houses reduced the pressure on wild habitats, which in turn contributed to the sustainability and health of the ecosystem.

The Green Health Programme was successful in setting a replicable model for conserving medicinal plant species by promoting their sustainable use. The multipronged benefits achieved through the programme include long-term conservation of potential medicinal plant species, revitalisation of traditional healthcare practices, and empowerment of rural/tribal women through upskilling and enhancing their livelihood options.

#### Further Reading

- \* "Promoting Local Health Traditions and Conserving Local Food Baskets: A Case Study from a Bio-cultural hotspot of India". (N. Anil Kumar1, V. V. Sivan2, Vipindas P3)
- \* N Anil Kumar, E D Israel Oliver King, V V Sivan, Prashant Kumar Parida, Kartik Charan Lenka, V Shakeela, Jayesh Joseph, R V Bhavani, B Jayashree (2020) Promoting Local Health Traditions and Health Foods for Conservation and Sustainable Use of Biodiversity. MSSRF / 2020 / WP / 14





CONTACT US

MSSRF Science for Sustainable Development WWW.mssrf.org