



# Rhythms in Development



Herbal-based Healthcare



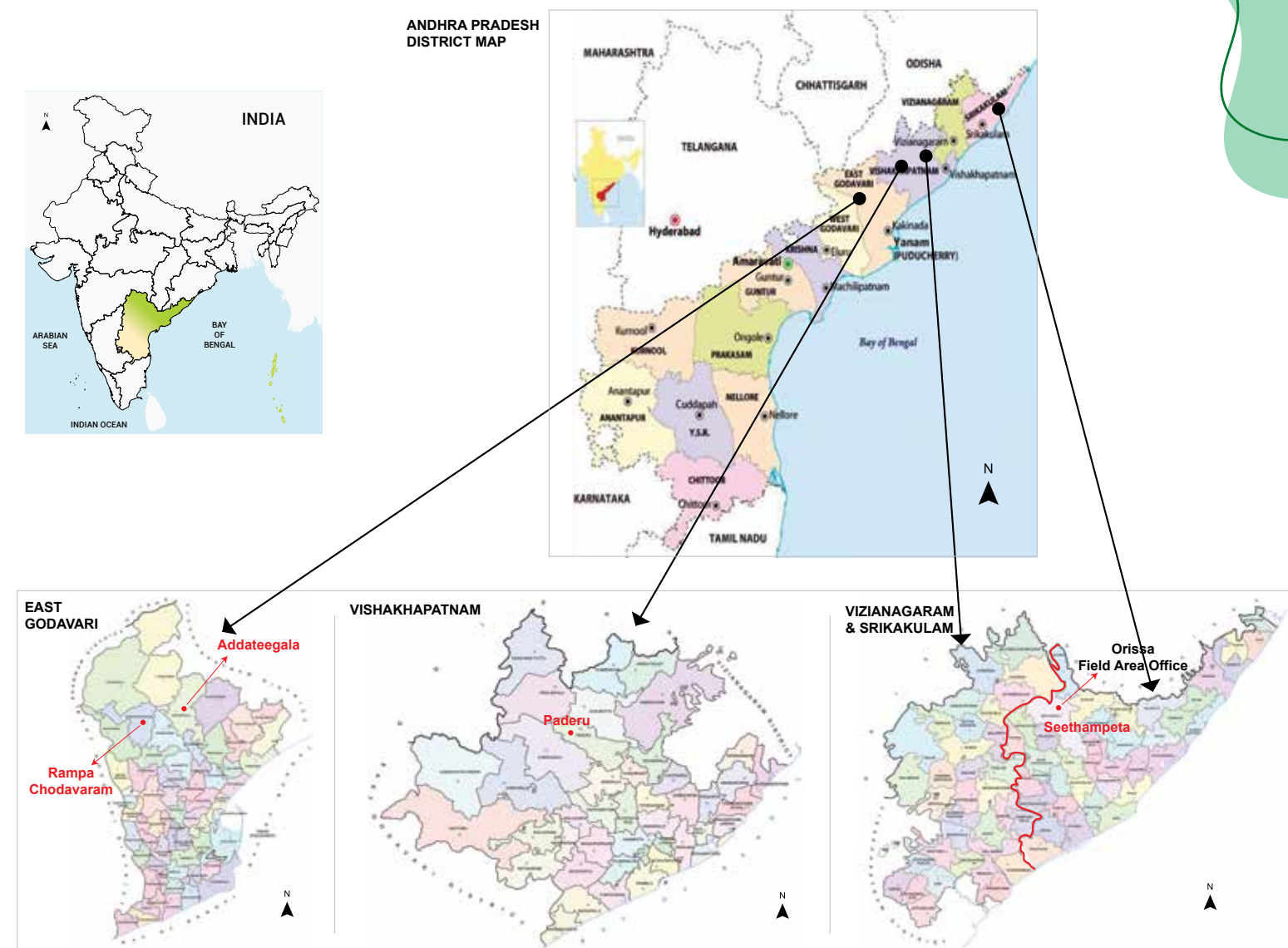


The World Health Organisation (WHO) has defined health as not merely the absence of infirmity but a state of complete physical, mental and social well-being. It is a function, not only of medical care but also the overall integrated development of society: cultural, economic, education, social and political. Each of these aspects has a deep influence on health that in turn influences all these aspects. Hence, it is not possible to raise the health status and quality of life of people unless such efforts are integrated with the wider effort to bring about the overall transformation of a society.

LAYA works in one of the most remote areas inhabited by tribals. LAYA's approach to health expresses the above-mentioned paradigm for quality health delivery. In addition, LAYA's approach is anchored around strengthening local and relevant healthcare practices, which encompasses a wide range of interventions to bring about integrated development.

## AREA OF WORK

### Areas of Influence of LAYA's Grassroot Work



Maps illustrated here are only indicative and not to scale



## HEALTHCARE SCENARIO IN LAYA'S AREA OF WORK

Despite, several health policies and programmes implemented by the Government, these tribal communities face extreme discrimination in accessing quality and timely healthcare. This is a matter of concern, which requires attention especially for day-to-day basic illnesses throughout the year. The culture and practice of traditional healthcare especially for these communities, where health and treatment are closely interrelated with the environment, seems to be diminishing because of various reasons including lack of interest from the younger generations. The absence of a responsive healthcare delivery system has led to growing exploitation by self-proclaimed doctors or quacks.



## GENESIS OF LAYA'S ENGAGEMENT ON HERBAL-BASED HEALTHCARE AND INTERVENTION PERSPECTIVE

For LAYA, while working for the development of these tribal communities, we understood that mainstream healthcare had very little impact on the well-being of these communities. We began to understand that if we had to make a positive dent to the well-being of the communities, we would have to develop our own expertise and knowledge drawing from the traditional wisdom and the natural resources available within the communities. It was in early 2000s that we seriously began to view the area of health with a focus on Herbal-based Healthcare as a complementary intervention to mainstream healthcare.



## WHY HERBAL-BASED HEALTHCARE

The approach to herbal-based healthcare has been situated in the context of existing development realities including gradual loss of local biodiversity.

Access to quality health infrastructure and services has been a long challenge for these remote tribal areas. The challenges include lack of holistic health education together with poor health governance. This situation has led to increased dependence on quacks, who are technically unqualified, self-proclaimed 'doctors', also called as Registered Medical Practitioners (RMP), who often prescribe life-threatening treatment for easily treatable illnesses and charge exorbitantly as well.

Increased land grabbing and overexploitation of selective herbal species by outsiders including corporates has also caused the depletion of natural resources, which were primary sources of healing and preventive care, including income source for these communities.

The problem of growing dependence on the Government's Public Distribution System (PDS), which has not only weakened local farming systems but is also leading to nutritional deficiencies.

Further, the growing disillusion related to unemployment among the tribal youth was a growing cause of concern.

It was in this context that LAYA has taken the initiative to popularise and promote Community Herbal-based Healthcare in North Andhra Pradesh, because Herbal-based Healthcare is culturally relevant, affordable, accessible, reliable, effective, creates livelihood options for youth and conserves the medicinal plants.



# HERBAL-BASED HEALTHCARE

The general theory of change recognises that change at the community level is driven by empowering local stakeholders to take action at their level while also seeking accountability from the local Governments.

## INPUTS

- LAYA'S approach to:
- The community
  - The health practitioners
  - Government institutions
  - People's institutions

## ACTIVITIES

...to include interventions with the stakeholders' capacity building for health education, skill training, provision of medicines and medical camps...

## OUTPUTS

...to improve the health conditions of Adivasi communities through nutri & herbal gardens, health centres and availability of safe drinking water along with increased access to traditional healthcare...

# OVERALL IMPACT

Adivasi communities have access to improved health facilities and conditions for enhanced well-being.

Specific theory of change  
The community

| IMPACT     | ...so that communities have an enhanced well-being and enjoy access to affordable and legitimate traditional healthcare.  |
|------------|---|
| OUTPUTS    | ...so that communities can access traditional medicines and take up preventive measures like cultivating nutri-gardens, providing safe drinking water and improved cooking methods. |
| ACTIVITIES | ...to build capacity, enhance nutrition especially for women, provide healthcare, health education and introduce low-carbon technologies.   |
| INPUTS     | LAYA reaches out to Adivasi communities experiencing morbid conditions like unsafe drinking water, unclean sanitation facilities, and limited access to healthcare.                 |

Health practitioners

| IMPACT     | ...so that more Community and Traditional Health Centres are established & reinforced, more herbal gardens are raised, more medicines are prepared, preserved & dispensed, records are maintained and networks with other Traditional Health Practitioners are strengthened. |
|------------|--|
| OUTPUTS    | ...so that Adivasi youth can establish Community Health Centres and become Traditional Health Practitioners in order to increase their livelihood opportunities.   |
| ACTIVITIES | ...to provide skill training to youth as Community Health Practitioners and expand the Traditional Health Practitioners network.   |
| INPUTS     | LAYA engages with Community Health Practitioners, Traditional Health Practitioners and interested Adivasi youth.   |

Government institutions

| IMPACT     | ...so that the children, women and community at large enjoy access to herbal based healthcare and improved well-being at their doorstep.  |
|------------|---|
| OUTPUTS    | ...so that Government officials support our work by providing medicines & doctors and respond positively to promote herbal-based healthcare in Adivasi areas.                     |
| ACTIVITIES | ...to conduct curative and preventative health camps, collaborate on disbursements of medicines and training initiatives.   |
| INPUTS     | LAYA showcases its approach and clear evidence of efficacy in improving health outcomes of Adivasi communities, especially women, while also encouraging Government institutions. |

Peoples' institutions

| IMPACT     | ....so that Adivasi children, women and communities are able to easily access affordable, timely and genuine healthcare.   |
|------------|--|
| OUTPUTS    | ...establishing quality healthcare services to cater to the increasing demand and urgent basic healthcare requirements thereby complementing mainstream healthcare systems which are often unable to reach remote areas. |
| ACTIVITIES | ...to safeguard local knowledge systems and natural medicinal resources and build capacities for qualitative healthcare services within the community.   |
| INPUTS     | LAYA builds capacity on health issues & rights, and creates awareness, especially with the Traditional Health Practitioners.   |



## REASONS FOR ALTERNATIVE HEALTHCARE PRACTICES

- Affordability
- Accessibility
- Close proximity to community
- Community health practitioners visit regularly
- Non-availability of medicines in PHC
- Lack of medical staff at the PHC

## COMPONENTS OF LAYA'S HEALTHCARE DELIVERY

### Components of LAYA's Herbal-based Healthcare Delivery

#### Training and Practice

- Skill upgradation of THPs and CHPs
- Intensive skill-based training for youth
- Training of NGO personnel
- Intensive training for Community Ayurvedic-herbal Practitioners (CAP)

#### Documentation

- Photos and herbarium
- Digitisation of Telugu Ayurvedic books
- Library
- Documentation of traditional health knowledge

#### Outreach

- Vanantharam training centre
- Mother gardens and nursery
- Community Health centres
- On-site herbal gardens
- Traditional Health Practitioners' networks
- Health camps

## ESTABLISHMENT OF VANANTHARAM – LAYA'S HERBAL HEALTHCARE CENTRE

It was important for LAYA to develop an identity of its initiative on Herbal-based Healthcare. In 2004, Vanantharam became the face of LAYA's work on Herbal-based Healthcare. As part of an outreach strategy it serves to bring Herbal-based Healthcare directly to tribal communities in the region. From here the healthcare team can also travel across the region to conduct health camps and training programmes for the communities. Vanantharam also houses the mother herbal garden where plants and saplings are transported to various other herbal gardens as well as used for making medicines.



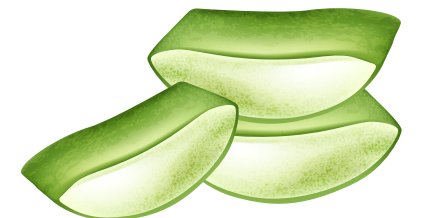
The centre is aimed to improve the practices of the Community and Traditional Health Practitioners (CHPs and THPs) and standardise medicines. It thus has become a platform for peer group learning among them.

Through the Vanantharam Pharmacy, which is licensed, we are able to produce and disseminate a number of Ayurvedic medicines.



## PROMOTING THE PRACTICE OF HERBAL-BASED HEALTHCARE

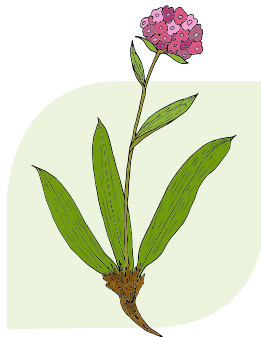
- Established Herbal Medicine Resource Centre (Vanantharam) in central location with the facilities of primary healthcare, training programmes, established a licensed pharmacy, mother herbal garden etc.
- Established 155 Community Health Centres (CHC) providing healthcare to 222 villages
- Creation of standardised herbal-based medicines
- Manufacturing license and GMP certificate for preparation of 25 types of herbal medicines from the Government of Andhra Pradesh
- Conducting health camps during epidemic seasons in collaboration with the AYUSH Department (10 to 12 health camps annually covering over 50 villages)
- Providing healthcare to 12,000 to 14,000 patients annually





## PROVIDING TRAINING FOR PRACTICE

As the number of Traditional Health Practitioners (THPs) is decreasing over time, LAYA has facilitated a new group of young motivated tribals, Community Health Practitioners (CHPs). These are tribal youth (mostly school dropouts), who have expressed interest in Herbal-based Healthcare. They have been trained with the assistance of qualified Ayurvedic doctors. This was a six-month course, which has now been upgraded as a year-long course with an intensive learning process that includes personality development (life skills), diagnosis skills, medicinal plant identification, propagation, sustainable harvesting of medicinal plants, medicine preparation and preservation skills. Of the 175 CHPs, who have been trained, 85 CHPs have established Community Health Centres with Herbal Gardens in their respective villages.



- Provided skill upgradation training to 255 Traditional Health Practitioners
- Provided intensive skill-based training (six-month course) to 175 tribal youth on herbal medicine preparation and healing to sustain the knowledge base, create livelihoods and a science-based approach through the Ayurvedic system
- 19 trainees have successfully completed the CAP (Community Ayurvedic Practitioners) one-year course
- CAP has been developed from the experience of the skill-based training held over of considerable period of time. It is a professional employment oriented course with a written curriculum including objectives, relevant content, methodology and expected outcome for each session of the six modules. Each module is mostly approximately six days (or more if needed). Field-based practice assignments are given after each module and the results of the participants are analysed in the subsequent modules. Planned exposure visits are also included during the course. Of the total number of approximately 36 days (Eight sessions per day of 2-hour duration, each), Six days are dedicated to life-skills development and 30 days are oriented to develop work-skills
- Provides demand-based trainings to other NGO teams/staff and colleges

“ LAYA is doing something good by providing this skill upgradation training for practitioners like me. Since the training I have found a change in my practice. Earlier I only treated patients in my village but now I am able to provide treatment in 6 villages. My specialisation is in treating snake bites and gynecological problems. Thanks to LAYA, I also have an identity card from the THP Network and regularly attend Mandal Network meetings.”



**Kakara Sanukurumayya**, who is 60 years old from the Konda Reddy tribe, hails from Chikilinta village, East Godavari district. He is a Traditional Health Practitioner (THP) and has participated in LAYA's skill upgradation programme in 2018.



**Gokuruboina Pandamma** from the Konda Reddy tribe was 23 years old when she participated in the Community Health Practitioner's Training in 2003. Over the years she has participated in the skill upgradation training on herbal medicine preparation and healing organised by Janasikshana Samstha (HRD Ministry) and LAYA.

“ LAYA's work with herbal medicine has reduced the expenses on common illnesses. I am now working as a Community Health Practitioner in two villages. As a result of my work I have earned credibility with the community, and now I am the elected Vice-president of Somannapalem panchayat, Addateegala mandal, East Godavari district.”



**Gammeli Chittibabu** from Kujjali village in Visakhapatnam district hails from the Bhagatha tribe.

*“ I participated in the Community Health Practitioners training in 2006 as I was always interested in herbal-based medicine. After my initial training I only used to work in my village. As I continued my engagement with LAYA by attending several skill upgradations I began to develop the confidence to offer my skills in surrounding villages as well. Today, I treat patients in more than eight villages and my practice and income is growing. ”*



**Gammeli Soujanya** completed the six month Community Ayurvedic Practitioners (CAP) programme in 2020. She is a resident of Kujjali village, Visakhapatnam district and belongs to the Bhagatha tribe.

*“ As a part of the programme, I learnt how to prepare medicines and required skills to diagnose and treat common illnesses. Before the training programme, I was not confident in my ability to speak in public. The training programme, particularly the sessions related to life skills, helped me overcome this fear. Today, I feel much more confident in my ability to communicate and carry out my work. These days, I assist my father who is a Traditional Health Practitioner. ”*

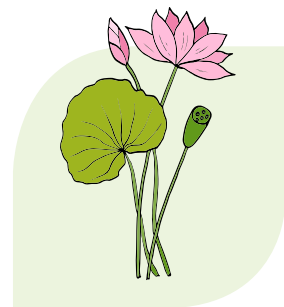


*“ I participated in the Community Ayurvedic Practitioners training programme in 2019. I was an apprentice with my father who was a Traditional Health Practitioner. The training I received helped me build my confidence to develop my own independent practice. Today, I have built my own health centre with an herbal garden and my practice extends to two other villages. ”*

**Korra Bheemanna** from Jamiguda village, Visakhapatnam district.







## DEVELOPED DATABASE ON MEDICINAL PLANTS AND TRADITIONAL HEALTH KNOWLEDGE ON HERBAL MEDICINE

- Information on practice expertise of over 140 THPs
- Developed photos and herbarium of over 300 medicinal plants
- Digitised over 150 old Telugu Ayurvedic books for reference preservation
- Library established and three publications circulated



Dr. Krishna Mohan, BMS,  
Medical Office, Addateegala.

“I was introduced to Vanantharam in 2017 by my colleagues. I was very impressed with the diverse work that is being done by the team to facilitate treatment to tribal communities in the area. I am able to learn about several new rare plants and their healing qualities. I am always happy to help as a resource person or to conduct health camps and help in the dissemination of herbal based healthcare in the area.”



## ON SITE HERBAL PLANT PROMOTION THROUGH HERBAL GARDENS AND NURSERIES

- Established and maintaining two Mother Herbal Gardens (Arogya Vanalu) with over 250 medicinal plant species in each garden to incubate species as learning tools, create medicines and provide direct access to make medicines
- Established 95 Community Herbal Gardens (Arogya Vanalu) in four districts of Andhra Pradesh: East Godavari, Visakhapatnam, Vizianagaram and Srikakulam
- Nurturing nurseries for medicinal plants with 80 plant varieties for use by Traditional Health Practitioners, Community Health Practitioners, Schools, Colleges and other Government Institutions in various locations
- Vulnerable plants are grown in the Community Health Gardens

Over the years LAYA has played a role with the tribal community to create a value base for medicinal plants, contain culling and overexploitation in the region. The problems posed by warming temperatures, disrupted seasonal events, extreme weather and other effects of climate change, on the other hand, cannot be so quickly and easily resolved. Raising awareness of climate change to the communities by focusing on local or regional impacts is a crucial step in order to inspire individual and community action. Furthermore, conservation of these medicinal plants in their native habitat is also an important response approach. To achieve this, LAYA encourages growing of herbal medicine gardens among the communities and around their settlements.

## **SUSTAINABLE HARVESTING AND REDUCING OVEREXPLOITATION / SUSTAINABLE EXTRACTION**

This has been a long-standing process for advocacy at LAYA to prevent the over exploitation of medicinal plants by agents of the pharmaceutical industry.



## **POPULARISING HERBAL MEDICINES**

- Conducting three to four botanical tours annually for students of Pharmacy Colleges, Degree & Junior Colleges and High Schools
- Assisting and providing access to rare medicinal plants for researchers and scholars
- Organising Herbal Melas (exhibitions) of rare and endangered medicinal plants, live species of tubers, seeds and prepared medicines, the main purpose of which is to expose the value of herbal medicine to the general public
- Organise local herbal melas in various places in the region



Apart from treating patients locally for various illnesses with a variety of locally sourced and prepared medicines, popular herbal and ayurvedic medicines produced at Vanantharam are:

| Name                | Purpose  | Production per month |
|---------------------|--|----------------------|
| Triphala Churna     | <ul style="list-style-type: none"><li>Helps in reducing constipation</li><li>Helps in digestion</li><li>Helps improve eyesight</li><li>Controls blood pressure</li></ul> | 25 kg                |
| Aswagandha Churna   | <ul style="list-style-type: none"><li>Reduces stress</li><li>Sound sleep</li><li>Improves general energy level through the day</li></ul>                                 | 20 kg                |
| Hingvastika Churna  | <ul style="list-style-type: none"><li>Helps in digestion and gastric related issues</li></ul>  | 10 kg                |
| Samasharkara Churna | <ul style="list-style-type: none"><li>Clears phlegm</li><li>Clears the throat</li><li>Relieves throat infection</li><li>Reduces dry cough</li></ul>                      | 10 kg                |
| Vishatinduka Oil    | <ul style="list-style-type: none"><li>Reduces pain/discomfort at various joints</li><li>Can also help those parts of the limbs to increase circulation</li></ul>         | 5 litres             |
| Karpuradhi Oil      | <ul style="list-style-type: none"><li>Reduces pain/discomfort in muscles</li></ul>   | 5 litres             |
| Brungamalaka Oil    | <ul style="list-style-type: none"><li>Helps in hair follicle rejuvenation</li><li>Provides relief from persistent headaches</li></ul>                                    | 2 litres             |

Note: These powders/oils do not require a licensed prescription



### LEGITIMISATION OF HERBAL-BASED HEALTHCARE PRACTICE

Adivasi Sampradaya Mulika Vaidyula Sankshema Sangam (Regd. Number: 709/2005)  
Established and registered under the Societies Registration Act in 2005 at East Godavari district, with its current membership of 130 Traditional Health Practitioners. The network members have established 50 Community Herbal Gardens.

Sri Modakondamma Vana Mulika Vaidyula Sankshema Sangam (Regd. Number: 498/2007)  
Established and registered under the Societies Registration Act in 2007 at Visakhapatnam district, its current membership is 95 Traditional Health Practitioners. The network members have established 60 Community Herbal Gardens.

LAYA facilitated the registration of 4 districtwide Traditional Health Practitioners’ Networks with over 350 THPs. These network members have established Community Herbal Gardens in their areas with 60-70 types of relevant medicinal plants, some of which are endangered. They are also involved in actively campaigning against the extraction of medicinal plants from the area.

Girijana Vana Mulika Vaidyula Sankshema Sangam (Regd. Number: 263/2016)  
Established and registered under the Societies Registration Act in 2016 at Vizianagaram district, with its current membership of 65 Traditional Health Practitioners. The network members have established 30 Community Herbal Gardens.

Girijana Vana Mulika Vaidyula Sangam (Regd., Number: 275/2017)  
Established and registered under the Societies Registration Act in 2017 at Srikakulam district, with its current membership of 60 Traditional Health Practitioners.



**Mattam Chinna Malam Naidu,**  
Mattam village,  
Visakhapatnam district.

“The Traditional Health Practitioners’ Network was established in 2006 with 30 members to protect, legitimise and promote the practice of herbal-based healthcare. I served as the President of this network for seven years. During my tenure, I was able to extend the membership base to 90 members. I was happy to meet and build a relationship with many of my fellow practitioners, political leaders, Government officers and Ayurvedic doctors. These relationships and exposure have helped me and my network members to effectively legitimise and promote herbal-based healthcare. I am thankful for the support we have received from LAYA to help us in our cause.”

## AWARDS

In 2019, the Andhra Pradesh State Biodiversity Board awarded LAYA the ‘Biodiversity Conserver Award’.



## CONCLUSIVE REMARKS

This initiative, which began in the early 1990s, has now blossomed into a full-fledged locally relevant healthcare system complementary to mainstream healthcare services. It offers an additional choice for treatment especially for basic day-to-day illnesses and ailments. This is a paradigm of healthcare which is environmentally integrated into the existing plant biodiversity while also safeguarding the rich traditional knowledge systems prevailing in the area.

### The process has:

- Led to nurturing the environment
- Contributed to the standardisation of traditional knowledge systems in the area
- Produced self-employment opportunities for community herbal practitioners while offering an effective treatment opportunity for basic health issues







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