

REPORT



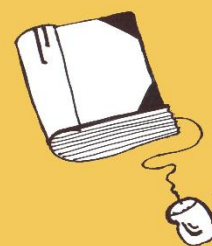
**SAMVAD
CONVERSATION**

**LOCAL KNOWLEDGE,
SOCIAL MOVEMENTS
& PARTICIPATORY
RESEARCH: INDIAN
PERSPECTIVES**

30 NOVEMBER 2021

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PRIA@40
SHAPING OUR TOMORROWS, TODAY



Building a knowledge
democracy



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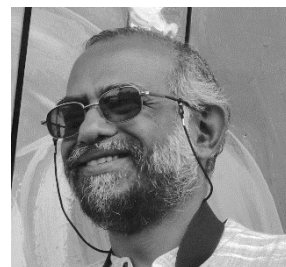
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- ***Direct democracy supports indigenous knowledge*** – Decision-making should be in the hands of people. Community needs to be the foundation of our democracy.
- ***Make indigenous knowledge more amenable to young people*** – There needs to be a well-balanced but hybrid knowledge system. A system that blends both the indigenous and traditional knowledge with modern knowledge practices to attract and respond to the young people – their needs and aspirations.
- ***Acknowledging Indigenous knowledge system in policies*** – Recognising and acknowledging indigenous knowledge as a viable knowledge needs a collective will and knowledge especially in legislative policies.
- ***Need to keep the knowledge ecosystem alive*** – It is important to keep the knowledge ecosystem relevant to enable the traditional system to flourish without the ecosystem being destroyed. It would be difficult to revitalise knowledge without the basis from which it is derived.
- ***We cannot stop our resistance*** – It is important to recognise that the sustenance of traditional indigenous and diverse knowledge systems is a part of the resistance movements. These resistance movements demonstrate the two different civilisational worldviews that emerged from some of the resistance movements. These movements are resistant to the basic structures that create inequality, injustice and unsustainability.



Shri Mohan Hirabai Hiralal is an active member of Jayaprakash Narayanji's Chhatra Yuva Sangharsh Wahini set up Vrikshamitra in 1984 in Gadchiroli District, Maharashtra. His knowledge and direction has helped the people of Mendha (Lekha) in making the Gram Sabha more inclusive, participatory and active. He helped villagers to focus on women's participation, alcohol prohibition, forest conservation and rights, fight against corruption, cultural rights, youth empowerment, sustainability, equity and security.

Shri Ashish Kothari is the founder-member of Kalpavriksh and also member of many people's movements. He has coordinated India's National Biodiversity Strategy & Action Plan and has served on boards of Greenpeace International & India, ICCA Consortium. He helps coordinate Vikalp Sangam (Global Tapestry of Alternatives, & Radical Ecological Democracy).



Padma Shri Dr. Suman Sahai is an Indian activist and the founder of Gene Campaign. She has successively worked at the University of Alberta, University of Chicago, and the University of Heidelberg, where she obtained her habilitation in human genetics. Sahai has published over 40 articles, mostly on policy issues relating to genetically modified organisms, which have been cited about 200 times, giving her an h-index of 9.

Shri Gaya Prasad Gopal, the founder of Akhil Bharatiya Samaj Sewa Sansthan (ABSSS), has worked in different positions and vocations till he was exposed to the stark realities and miseries of the Kols while working as a Rural Development Coordinator with the Sri Sadguru Sewa Sangh Trust, Chitrakoot chapter, from 1975 to 1985. He has founded a school by the name of Adarsh Bal Niketan in Atarra in 1965 which was a preliminary to his future experiments in social work.

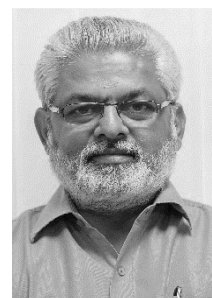


Dr. Mira Sadgopal is an obstetrician and gynaecologist living and working in rural India and an organizer of the Jeeva Project, which in part, studies an indigenous midwifery practice that uses the placenta to revive new-born babies who are unable to breathe. He is well-known for her work on mid-wives (*dais*) from the perspective of public health and indigenous knowledge. She has mentored practitioners and authored several books.



Dr. Indu Capoor is the founder-director of Centre for Health, Education, Training and Nutrition Awareness (CHETNA) based in Ahmedabad, Gujarat. Trained as a nutritionist, she has spent over three decades working with women, children and young people, particularly those from marginalised communities to improve their health and nutritional status. In 2013, Indu passed on the leadership of CHETNA and took on the role of Director, CHETNA Outreach, to upscale and mainstream CHETNA'S evidence-based approaches all over the globe.

Prof. (Dr) G. G. Gangadharan, is an expert in authentic Ayurveda methods of diagnosis, especially the pulse diagnosis and successfully treats lifestyle disorders. Dr. GG's principal contributions to science have been in the area of the genetic basis of Prakriti, the Ayurveda concept of constitutional body types, which got published in 'NATURE'. He has been with Arya Vaidya Pharmacy, Coimbatore for more than two decades, where he was renowned for his immense contributions including development of new dosage forms and novel traditional Ayurveda formulations.



Dr. Mira Shiva, Coordinator Initiative for Health & Equity in Society was a member of Central Council for Health, Health Committee National Human Rights Commission and also the Chairperson of Consumer Education Task Force on Safety of Food & Medicine. She has been over past 3 and half decades been working on issues related to Community Health & Development, Rational Drug Policy & Rational Use of Drugs, Women's Health, Reproductive Health, Gender Justice, issues of Nutrition etc.

Shri Jagdish Patel helped establish Peoples Training & Research Center (PTRC) and has consistently advocated for social justice for the victims He has helped several victims get compensation from Employees State Insurance Corporation for occupational diseases like Noise induced hearing loss, occupational dermatitis, occupational asthma, chromium toxicity, silicosis and so on. He has authored several booklets on the subject and has trained several hundred workers in Occupational Health and Safety.



Dr. Rajesh Tandon, Founder President, Participatory Research in Asia, India, is currently a UNESCO Co-Chair on Community Based Research and Social Responsibilities in Higher Education. He serves as chairperson of the Global Alliance on Community-Engaged Research (GACER) network, which facilitates the sharing of knowledge and information worldwide to further community-based research and has also served as an Advisor to the Commonwealth Foundation, UNDP, and numerous other international agencies.

As Participatory Research in Asia (PRIA) completes its 40 years, it recommits to continue institutional strengthening and capacity development support to civil society and non-profits with a special focus on new-generation civil society and non-profit groups. Between August and December 2021, PRIA will be convening [PRIA@40 Conversations](#) with communities, partners, associates, supporters, experts, investors and colleagues, drawn from civil society, government, business, media and academia, to share ideas and experiences that can help 're-imagine' PRIA, its interventions and the world in the coming period.

In this context, PRIA convened a conversation (samvad) on [Local Knowledge, Social Movements and Participatory Research: India Perspectives](#) on 30 November 2021 in collaboration with [UNESCO Chair in Community Based Research and Social Responsibility in Higher Education](#). The webinar was attended by 59 participants, was moderated by **Dr. Rajesh Tandon** (Founder- President, PRIA).

The focus questions of the conversation were:

1. What forms of experiential and indigenous knowledge have been deployed in local social movements to advance their struggles?
2. What forms of contestations during struggles to protect people and the planet have increased respect for local knowledge systems?
3. What lessons can be derived from such practices for integrating knowledge and culture in re-constructing inclusive, healthier, safe, and sustainable futures for all in the post-pandemic era?

The conversation (samvad) began with a short presentation by **Ms. Niharika Kaul** (Research Associate, PRIA) about PRIA's 40 years journey – a journey about sustaining an independent, forward-looking and energetic civil society organisation, in an otherwise rapidly disruptive and uncertain world. PRIA engages with as many stakeholders as possible, to put in place answers which are long-lasting and effective, rather than an artificial short-term fix. We work with and not for the marginalised, the youth, the middle class and governmental agencies (at local, state, national and international levels). From the days of newsletters and printed journals, we have moved on to the use of modern technology, through our website and social media handles, to influence an ever-growing group of people.

Over the past two decades, an important component of building capacity and promoting the use of participatory research has been to change the culture of knowledge generation within academia, supporting universities and colleges to recover their connection with everyday society. PRIA's engagement with higher education institutions has:

- Linked formal learning of community engagement by researchers and teachers on how to apply knowledge and skills learnt in the classroom to improve the lives of the local community.
- Supported joint research with the community, by integrating community knowledge into the design and conduct of research.
- Created spaces for academic knowledge to be shared with the community.
- Collaboration to design new curriculum and courses.
- Building capacities on community-based participatory research for the next generation of researchers.

To know more about PRIA's work, click [here](#).

Next, **Dr. Tandon** invited **Mr. Mohan Hirabai Hiralal** (Founder, Vrikshamitra, Gadchiroli, Maharashtra) to share his reflections on the focus questions of the conversation.

Dr. Hiralal believes that we need to work with people and not for people. In this context, people's knowledge becomes very significant. A programme called *Humara Raasta Hum Khud Khojenge* was designed because the common perception was that western knowledge cannot resolve the problems of indigenous people. In 1984, *Jangal Bachao Maanav Bachao Andolan* started in Gadchiroli, under the leadership of Mr. Shyam Lal Shah. This movement was in response to the mass destruction that was happening in terms of tribal life and culture, in the name of development. For instance, dams were being constructed in the region which would displace the majority of the tribal community in terms of housing and livelihood.

In the *Jangal bachao, maanav bachao* movement many stalwarts like Baba Amte, Sunder Lal Bahuguna participated but it was interesting to note that local people kept aside all their differences and participated in large numbers, even those who would have benefitted from the construction of dams in the region. As a result of this movement, the construction of the dams was stopped. This movement used participatory methods to use local knowledge of the people to empower and enable them so that they can collectively discuss their problems and collectivise.

Speaking of the democratic structure, he said that communities should be the basis of our democratic structure and not individuals namely, our elected leaders. We need to upturn the hierarchies and enable indigenous people to build their knowledge into the global power structure. People should not be looked at as only voters but as makers and shapers of their future. Politics is about taking a decision and implementing them. If decision-making power is not given in the hands of people, our democratic structure will crumble. To enable a participatory decision-making process, we need to account for every individual's consensus and not just a few. This is how we can ensure that the entire community has a say in the decision-making process. One may facilitate the decision-making process and enable a deep conversation around the issues facing the community but not decide for them. The decision must be taken in the Gram Sabha with everyone's consensus.

To strengthen this process and make it participatory where people have decision-making power, an institutional mechanism is required. This mechanism must acknowledge the language barrier. For instance, mostly at the village and district level, people speak the same language. But at the state level, some people speak multiple languages. Consequently, people who may have immense knowledge may not be able to participate in the discussions because of the language barrier. This is also one of the reasons why we are losing out on the indigenous knowledge of people. There needs to be institutional mechanisms that would enable the timely and correct translation of this knowledge so that it can be made available to a larger audience. This may be challenging but it is not impossible.

Mr. Ashish Kothari (Executive Director, Kalpvriksha, Pune, Maharashtra) said, '*India's indigenous and local knowledge systems are rich and diverse*'. This is not just with agriculture and agriculture-related occupations but also manufacturing crafts, building, and so on. People's Linguistics Survey of India that was conducted a few years earlier revealed that we have 780 living languages. In this context, he reiterated **Dr. Hiralal's** comment that our mother tongue is extremely important as it's a library of knowledge and when we teach only in a particular state language of India, enormous knowledge systems tend to be erased in the process. Post-independence with the monopoly of modern science, technology, and the education systems we have destroyed and continue to destroy our traditional and indigenous/local knowledge systems. Further, these modern education systems ignore the enormous heritage of knowledge and expertise that millions of ordinary people possess. In addition,

which, according to many development practitioners, the process of development cannot be considered as development rather it is violence against people, nature, and communities, especially those which are directly involved or related to nature and natural resources.

What are the alternatives? What are people doing to respond to this kind of process? It is important to recognise that the sustenance of traditional indigenous and diverse knowledge systems is a part of the resistance movements. These resistance movements demonstrate two completely different civilisational worldviews that emerged from some of the resistance movements like *Jungle Bachao*, *Manav Bachao Andolan*; *Narmada Bachao Andolan*, etc. These movements are also resistant to the basic structures that create inequality, injustice and unsustainability including capitalism, state-ism, patriarchy and so on. Further, he gave an example of how people have transformed their livelihoods and become more secure using and building on their local knowledge systems. For instance, 5,000 Dalit women farmers collectivised shared their seeds and knowledge while asserting their Right to Land and Right to Seeds and not only achieved food security but also food sovereignty. This distinction was important because for them food sovereignty was about complete control over everything to do with food, no dependence on corporations or the government. Also, it is important to note that during COVID, in these 5000 families there were no incidents of problems related to food, health, or livelihood. Other example is of 90 villages that had gathered together for a *maha gram sabha* to assert that it's their knowledge, culture and identity that should be the basis of any development initiatives. This was inspired by Mendha Lekha, slogan – ‘*Our representatives are the government in Delhi and Bombay, and we are the government in our village*’.

He said that many such stories of community resilience have been documented in the last couple of years. What are the key lessons that emerge from these stories? Community spirit is crucial for tackling local inequalities. One cannot talk about communities in the abstract or consider them as a homogeneous entity. We need to look at the layers of inequalities that exist in the communities based on gender, caste, etc. A certain level of collective mobilisation is also important, which includes collective rights to resources, the tools of production, land, water, etc., rather than these resources being held by governments or by corporations.

He reiterated Mr. **Hiralal's** comment that decision-making must be in the hands of people. We are all born with this right but unfortunately, we give it over to politicians and bureaucrats. People need to be at the center of democracy. We need to be mindful of cultural diversity and all forms of life. The localisation of production is more important than economic globalisation, which failed us during the pandemic. It is important how we look at knowledge within the overall transformations/ assertions/ re- assertions. There is the challenge of continued colonisation in the knowledge sector and one of the ways is to look at transformations in five different spheres of life.

- the **political** which includes radical democracy;
- the **economic** which means local productive producers control over means of production, localisation, etc.;
- the **social** that is the social justice struggles against gender inequality casteism, and so on;
- the **continuation of knowledge** and cultural diversity to ensure that the knowledge remains in the commons and does not get privatised; and
- **ecological resilience**.

At the center of this transformation are a set of values that underlies the kind of evolutionary way of looking at knowledge systems and communities. It is not about individual selfishness but the collective. It is not about privatisation but the commons. It is not about giving a superior

status to the intellectuals but giving equal status to the people who might be doing physical labour. We need to equalise a whole lot of these existing inequalities as part of our value systems.

However, there are several challenges that indigenous knowledge systems face. Firstly, indigenous knowledge systems are relevant in the current times but also connected to a lot of traditional qualities and that needs to be managed. Secondly, indigenous knowledge is also subject to co-optation. We need to assert the traditional indigenous knowledge but without falling prey to right-wing hijacking. The third is the so-called developmentalism. Western modernity continues to attack diverse knowledge systems – that's a huge challenge. Hybrid systems can go extremely wrong, as we have seen the worst of traditional and modern knowledge, or they could go very right, as is the case of the handloom revival in *Kutch*.

India has an enormous young population that's extremely frustrated right now. We need to find ways to engage with this young population. How can we make indigenous knowledge systems much more amenable to young people? In this context, the education system becomes crucial. One of the processes that we use to try and spread this a lot more is *Vikalp Sangam*, which started in 2014. *Vikalp Sangam* tries to bring together alternative initiatives across the country to share, collaborate, become more of a critical mass, and share the stories with the public. A year back we started this *Vikalp Sutra*, especially keeping in mind how the covid pandemic had affected migrant workers, casual laborers, etc. – many of them had gone back to the villages, many don't necessarily want to come back to the cities, but then they may not have options in the villages or small towns. We need to think of dignified livelihood options based on local knowledge that can be created.

Meet our panellists...



[L to R: Dr. Suman Sahai, Mr. Mohan Hirabai Hiralal, Dr. Indu Capoor, Mr. Jagdish Patel, Dr. Mira Sadgopal, Mr. Ashish Kothari, Mr. Gaya Prasad Gopal, Dr. Vaidya G G Gangadharan, Dr. Rajesh Tandon and Dr. Mira Shiva]

Next, **Dr. Tandon** invited **Padma Shri Dr. Suman Sahai** (Chairperson, Gene Campaign, New Delhi). **Dr. Sahai** said, '*There are multiple knowledge systems because people accumulate knowledge from various sources*'. The western knowledge system has been able to overpower our indigenous knowledge system because it is evidence-based. Gene campaign believes the way to move forward is that the knowledge must be accumulated from various sources. We need to change the policies of the government as far as the knowledge systems are concerned. We should advocate for making indigenous knowledge more popular after all

this is the knowledge that has been passed on from generation to generation. For instance, in Ayurveda all kinds of respiratory disorders are treated by a very simple way of making the person lie down on their stomach, and that's one of the knowledge systems that have been acquired from Ayurveda and has been passed on from generations to generations.

People, who don't understand another knowledge system, ignore that system but that doesn't mean that that system is not correct. We are also not saying that the western system should be negated. In the medical field, there are a lot of allopathic doctors who argue that Ayurveda should not be a part of the medical knowledge system. To change this mindset, we need to provide evidence from Ayurveda. The perception that a doctor with an MBBS/ western degree is superior to the one with Ayurveda knowledge completely negates the indigenous knowledge system. Gene Campaign has documented a lot of indigenous knowledge from various sources, and it is with the Ministry of Science and Technology, Government of India.

Similarly, the knowledge and the knowledge system of the Indigenous people (Adivasis) should also be recorded, saved and acknowledged and Gene Campaign has been documenting and sharing it with the government. We need to look at the issue of bio-piracy, in this context. There have been instances where certain pharmaceuticals have based their research on the indigenous knowledge systems and then patented it as their drugs. In the case of bio-piracy, the knowledge is taken away from its source (i.e., the indigenous people) and is used by someone else. There need to be stricter laws in place to deal at the national and international level to deal with the issues of bio-piracy which is destroying the indigenous knowledge system.

Mr. Gaya Prasad Gopal (Founder, Akhil Bhartiya Samaj Sewa Sansthan, Chitrakoot, Uttar Pradesh) said that earlier Indian farmers used to practice organic farming. Instead of chemical fertilisers manure (as derived from the feces of the domestic animals) was used for cultivation. He opined organic farming resulted not only in high-quality produce but also in good health and a longer life span for farmers. Further, there was no overcrowding of medical stores and doctors. However, owing to a growing need for a market to sell urea and other fertilizers, India became the target market for this product. Eventually, India became a huge market to sell urea and other chemical fertilizers. Gradually the method of organic farming was also subjected to discrimination, ill-treatment, and even labelled as an obsolete method of agriculture.

He said during his childhood it was a common practice by farmers to collect the manure of the cow in a pit, ferment and use it as a fertilizer for crops. The resultant crop yield used to be more than enough for a family. However, in contemporary India farmers are queuing up for hours to get chemical fertiliser without realising that it can be harmful to their produce. In light of this, there was a discussion in their village to identify farmers who were into organic farming. Soon villagers found out a farmer who was doing organic farming for the last 25-30 years not only had quantity and quality-wise the best produce but also relatively healthier (physically and mentally) family members in the entire village. Realising the benefits, the farmers went in favour of organic farming and motivated others in the village to adopt organic methods of agriculture. He narrated another incidence regarding *the curse (malpractice) of Anna Pratha* from the region of Bundelkhand. Thousands of villages are victims of the malpractice of *Anna Pratha*. *Anna Pratha* is a common practice of abandoning the cows once they stop producing milk. Further, these abandoned cows often invade the fields of farmers at night and destroy the crops. Thus, their organisation suggested a plausible solution that each house in the village adopt one abandoned cow this resolved the problem to a large extent.

He also mentioned the contribution of the knowledge of organic farming provided by Subhash Palekar. Subhash Palekar Natural Farming method (SPNF) has not only inspired the farmers

but had a huge impact in that particular region. Subhash Palekar who was an agriculture scientist and a practicing organic farmer gave the slogan of natural and spiritual farming, which continues to be an inspiration for many farmers. The result is around 100 farmers in 60 acres of land in the Chitrakoot region are doing organic farming. In addition, as a solution for the farmers who did not have any cow to prepare organic fertilizer from its manure, shops called natural agriculture centres were provided. The control of such centre was given to women that did not have agricultural land. Further, these women caught hold of cows abandoned due to *Anna Pratha*, prepared organic fertilizer from the urine and feces of these cows, and started selling their product to farmers through these centres.

As a result, an ecosystem was developed for collecting the feces and urine of domestic livestock to make manure. The manure was collected in a central place, which was managed and operated by women of the community. In addition, the farmers who did not have land for farming also participated in this process by running the shops where these manures were sold. These products were in turn bought by other farmers. On the whole, this practice not only improved the quality of products, curbed the malpractice of Anna Pratha but also led to the creation of employability of people without farming lands. Currently, 300 farmers follow this practice of natural farming, and the aim is to reach out to 1000 farmers in the Chitrakoot and Banda region of India. He stated that there is also a growing demand for organic produce as people are realising that it even tastes better when cooked. The demand for organic farming is growing in other regions of Bundelkhand and approximately 5000 farmers are into organic farming. He further added that to reform the malpractices such as Anna Pratha the only solution is the practice of organic farming by farmers. The objective is to reform the agricultural system by using natural resources to produce agricultural goods.

He narrated another incidence of Chitrakoot where he had a conversation with indigenous people (Adivasi). To understand their lifestyles, he asked them generic questions such as where they lived, ate, is it enough, and how they survive, etc. to this they replied in their traditional saying. The saying loosely translated is that we live amidst nature, eat what we locally produce; however, often we have to visit moneylenders when we fall short. But these money lenders give us 3 units, write 5 units in their books and we end up paying 9 units and thus get caught in a vicious cycle and becoming a slave for the rest of our lives. We live in such conditions because at the end of the day it's our home, our lifestyle and we don't have anywhere else to go. Now, this traditional saying provides a valuable insight into the lives and livelihood of the indigenous people of Chitrakoot.

Yet another incidence was a song from a region witnessing a shortage of drinking water, which states the humongous nature of the problem being faced by local women. The song explains the physical, mental and emotional aspects of the problem. Women have to walk 5 km through rocky terrain to fetch water in 4-5 mud vessels and this exercise is physically, mentally, and emotionally so exhausting that if given a choice between their husbands being dead or the safety of mud vessel with water, they would choose latter. This highlights the acuteness and the extent of the issue of shortage of drinking water being faced by the people of the region. This led our organisation to make a resolve to find a solution for the drinking water problem. While looking for the solutions we stumbled upon a natural stream where we were informed by locals that these small streams never run dry even in the summer of May and June. This gave us an idea to make these streams accessible to locals and resolve the drinking water issues of the region. Later government officials were also impressed that by using indigenous knowledge our small organisation could resolve such a huge problem to a large extent. The government officials also promised to extend their support. However, we soon realized that government bodies would not have an interest in such low-budget projects. He concluded, *'It is a long road ahead, but I am very hopeful'*.

Mr. Dilip Singh Bidawat (Unnati) said that in the last two years, they have been working on water conservation projects. To ensure innovative methods for water conservation, a participatory method was designed using the technical knowledge from local communities. A *shodh yatra* (Research Journey) was carried out in 4 blocks (107 villages) in rural Rajasthan. The purpose of the *yatra* was to spread awareness about people's knowledge. The local knowledge thus generated was useful to understand the best ways to build wells, ponds, etc. for conserving water.

Dr. Mira Sadgopal (Managing Trustee, Tathapi, Pune, Maharashtra) spoke largely about her work on fertility awareness and traditional midwifery. In this light, she said that a local labourers' movement in Bankhedi provided the space to learn and experiment drawing from people's understanding, knowledge, and skills. This included their receptivity to 'fertility awareness' around the mid-1980s. The other context for her work was the government's blindness to people's views on the shortcomings in the healthcare system and their deafness to call for strengthening maternity care. This could be achieved by accepting the knowledge of the *dais* –traditional midwives and their skill and commitment to women and communities.

Speaking of the fertility awareness education (Prajanan Jaagrookta), she said that fertility awareness is a woman's experience of her body's signs of fertility and knowing the corresponding internal changes during her menstrual cycles that pivot around the dynamics of ovulation. At Bankhedi, the fertility awareness education work was mostly with non-literate rural women and men, linking it with their bodily experience. A prominent issue that came forth during this fertility education was that women needed support from the men to practice fertility awareness, especially when the aim was to avoid pregnancy. This was difficult but a positive challenge to lessen violence against women and build a democratic mindset.

Even before the arrival of the British, there were centuries in which traditional midwives helped community women in childbirth. Unfortunately, this entire experience is unrecorded and there is hardly any archaeological evidence of the same. The 18th and 19th-century colonials vilified *dais* as unhygienic and superstitious. This attitude continued to influence *dais* training in post-independence India. The importance of traditional birth attendance for extending primary health care to women became globally accepted at Alma Ata in 1978 and the slogan *Health for All* by 2000. But at the turn of the millennium, the Millennium Development Goals (MDGs) were a huge step back from the commitment to primary health care. India's National Rural Health Mission (NRHM), launched in 2005, pushed for hospital births, excluding the *dais*. Even though the development goals have added sustainability, however, at a global level the traditional birth attendants still stay excluded. But during the pandemic, in both rural and urban communities, the *dais* had been presented to support childbirth in the homes of the marginalised women who did not have access to maternity care, and this also included some middle-class women.

Dais critique of healthcare and institutional birth include that our healthcare system is restricting; it stops women from natural birthing processes. The modern healthcare institutions hurry and conduct many internal examinations, which at times may not be required. These healthcare institutions give IV drips/ injections/ operate too often/ do C- sections without really considering whether it's necessary and disregard the postpartum complications that are likely. In addition, they don't let the *dais* help or use their traditional skills. This is now supported by a lot of scientific research from the biomedicine as well. They ridicule and forbid our rituals that have helped to ease childbirth for the woman.

We need to enable experienced and competent *dais* to continue their work of strengthening maternity care services in the communities. The government needs to recognise and also acknowledge their expertise. There is a need to establish a two-way training & learning

process and fully integrate them into the health services. *Dais* need to be provided appropriate financial support, independent of their primary relationships with and remuneration from women's families. For building an inclusive and sustainable future for all, it is important to honour the nature of our bodies. One also needs to understand the ecological connectedness of the inner and outer environment through practical and sustainable regulation of fertility in people's hands. Efforts need to be made to enhance social fertility with mutual respect, cooperation, support, and protection. For example, protection from sexual abuse, and agency for all. One of the main lessons from traditional midwifery is that the *dais* is very much relevant and essential for developing comprehensive maternal and new-born care, with its full implications and elaboration.

Dr. Vaidya G G Gangadharan, (Founder President, Centre for Innovation in Science & Social Action, Bengaluru, Karnataka) said that India is beautifully placed in terms of knowledge system. There are the Local Health Traditions (LHT) and the modern reductionist system. A country like India needs to acknowledge, without any bias, the contribution of these streams has made to the generation of knowledge in health and related aspects. Ayurveda is a *Pramaan Shastra*, which means without solid evidence nothing should be taken for granted. We have a method of knowledge creation, knowledge validation and knowledge appropriation. Everything is very minutely explained in our Ayurveda system.

Similarly, local health traditions are evidence-based and experiential. Various streams represent healing traditions of India – oral folk stream (folk medicine), codified classical stream (Ayurveda, Siddha, Unani and Tibetan medicine), allied stream (yoga and naturopathy), systems of foreign origin (homeopathy, western biomedicine). The oral folk stream is diverse and undocumented. It is not written but, in the minds, and practices of the people. It is very specific to the ecosystem where it exists and is dynamic and innovative. This is generated over centuries by tribals, farmers, artisans, barbers, housewives, wandering monks, and so on. They are the carriers of this knowledge in their diverse fields.

Some elements have been drawn from the classical codified stream. This consists of a spectrum of activities, starting from home remedies, food and nutrition, obstetrics, bone setting, treatment of poison, chronic and common ailments, and so on. Local people have adopted certain customs, which are from preventive and promotive health practices. A symbiotic relationship between local and codified traditions has been reported right from the *Charak Samhita* period. The presence of the folk stream is often unnoticed which indicates alienation from ground realities. This kind of knowledge is very vibrant. It needs to be nourished and taken forward as is carried by millions of ordinary people. A survey indicates that the largest numbers of traditional healers are women. They comprise the traditional birth attendants (TBA). Bonesetters are the second largest group of local healers in India – 50% to 60% of sprain, dislocation, and fractures are handled by them. More men practice bone setting than women (the ratio is 298:5). The third-largest proportion of the folk healers is the *Visha Vaidyas*, people who treat the poisonous bites. Annually more than 4000 deaths occur in India due to snakebites. These practices have not been studied and hence there is no legal status given to them, however, they have social legitimacy in their localities.

The transmission of knowledge has been through 'people to people' process. It is a highly decentralised method of knowledge generation and dissemination. A survey indicated that remedies for nearly a hundred common ailments are known to knowledgeable households. The knowledge of health and health-related practices such as food and dietetics has become part of the day-to-day life in the community. With time these practices have acquired religious significance and presently they are followed as rituals. There is a lack of fundamental research, resource base and collaborative research efforts to mainstream the traditions.

Talking about the relevance of folk knowledge, he mentioned that the majority of the deliveries in the world (60%) are managed by the Local Health Traditions (LHT) which includes antenatal and postnatal care. The discovery of quinine, a drug from the Cinchona tree was possible from the lead from a Peruvian LHT. A promising drug – Artemesia, was sought from a Chinese LHT. The solution for Hepatitis B and C was developed from Indian LHT (*Phyllanthus amarus*). According to the Natural Products Alert (NAPRALERT) database (University of Illinois, WHO), 95% of all modern drugs derived from plants have been based on leads provided by LHT and the modern applications are similar to the traditional ones.

There is the need for creating an ecosystem where the folk stream can flourish. We also need to come up with a system that legalises the use and practices of the folk stream. A decentralised and self-sustaining institutional support is needed so that this knowledge system can be regenerated for generations. This is the only way we can bring justice to the system.

Mr. Jagdish Patel (Director, Peoples Training & Research Centre, Vadodara, Gujarat) said, '*Science and scientific research should not be limited to the books. It should be disseminated to people*'. Drawing on his experience in the Baroda glass factory, where he learnt a lot about occupational health hazards. Over the years, many workers had died as a result of silicosis, which was an occupational health hazard. There was an ongoing worker struggle for compensation in this context. The workers were unionised and called for a meeting. When the management did not respond to their demands, the workers appealed to the Health Minister. After repeated efforts, a letter was sent to the government and a study was conducted by the National Institutes of Health (NIH) which revealed that the silicosis level was too high in the factory. They also notified Employees' Staff Insurance (ESI) to fasten the process of disbursement of compensation. However, the struggle was not easy as ESI did not cooperate. Next, they appealed to the medical tribunal. Finally, the High court ruled in the favour of the workers, they were compensated for the health hazard that they were facing. It is important to note that it took 17 years to establish the cause of the workers' death. One does not get to read experiences like this in any book or journal. These are struggles from the organised sectors. These occupational hazards gained prominence post industrialisation. The strategies for the organised don't work for the unorganised sector because the latter does not have either the preventive or the compensatory mechanisms.

Dr. Indu Capoor (Founder Director, Chetna, Ahmedabad, Gujarat) said that her very first field experience made her realise that all that she had learnt from the colonial education system, was of no use to her in the field. Our education system emphasises degree more than the experience of the students. In her experience, she has learnt almost everything from the communities that she has worked with during her field visits. Our efforts to educate or generate awareness in the community need to be contextualised in their lived realities. It is important to listen to and learn from the indigenous people about their knowledge. The knowledge of the communities must be included in our education system. Unless we know our communities well, we can do effective work. We must use our research not only to develop more resource material but also to advocate and promote the indigenous knowledge systems. We need to include/ involve practitioners in the teaching system of the schools and universities. Researchers need to share their findings and data in simple language. The emphasis was on *simple language* because often with the use of jargon, simple messages and learnings get lost. Ultimately the knowledge does not reach the stakeholders involved. We need to bring this knowledge not only to universities but also to policymakers. The knowledge needs to be shared but not exploited or appropriated.

Dr. Tandon invited **Dr. Mira Shiva** (Director, Initiative for Health Equity & Society, New Delhi) to share the closing reflections.

In her closing remarks, **Dr. Shiva** said that the issue of women's health and women's health movement has been one of the strongest. In this context, she mentioned that a book called *Shareer ki Jaankaari* was brought out by *Ajmer Mahila Samooh* in Rajasthan, and it was published by *Kali for Women*. This book was also given the UNESCO award.

Speaking of the indigenous knowledge that people have in our communities, she mentioned that back in 1979, some women from Tamil Nadu taught me that a plant called *Keelanelli* has a medicinal property that can cure jaundice, which was later patented. This plant was easily available, and people did in fact use it to cure their jaundice. Everyone except for the allopathic doctors trained in medicine did not know about this, including herself. This is because the allopathic doctors are not trained in traditional medicine during the tenure of their MBBS course, not only because of blindness to traditional medicine but also discrimination against the traditional medicines. Taking the discussion forward, she raised the issue of bio-piracy and intellectual property be it the patenting of the medicinal property of neem, turmeric or *Keelanelli*. There is a long-drawn history of hijacking indigenous knowledge and traditional medicine by the pharmaceuticals giants. This practice does not allow the local knowledge to flourish.

There is a dire need more than ever to advocate and defend the knowledge of indigenous people at the national and international levels. There is growing pharmaceuticalisation, commodification and commercialisation of traditional medicine. This is also linked to the intellectual property rights by the pharmaceutical giants from the west and predatory growth of the medical-industrial complex. In this context, the local knowledge of traditional medicine is either hijacked or discriminated against. We need to abandon the reductionist approach to visualise a better future for all. At several levels, one has to resist the regulatory and predatory model which is unsustainable. We need to resist the profit and money selling model of health care. We need to factor in the knowledge of the indigenous people and also advocate for promoting their knowledge.

The conversation ended with a vote of thanks by **Dr. Tandon** (Founder- President, PRIA).

3:00 pm to 3:15 pm

Welcome and Introduction to PRIA@40 Programme

Moderator: Dr. Rajesh Tandon, Founder President, Participatory Research in Asia (PRIA),
India

3:15 pm to 4:00 pm

Panel 1

- Sh Mohan Hirabai Hiralal (Mohan bhai)- Vrikshamitra,
- Sh. Ashish Kothari- Kalpvriksh, Pune, Maharashtra
- Padma Shri Dr Suman Sahai- Gene Campaign
- Sh. Gaya Prasad Gopal (Gopal Bhai)- Akhil Bharatiya Samaj Sewa Sansthan

4:00 pm to 4:45 pm

Panel 2

- Dr. Mira Sadgopal- Tathapi
- Dr. Vaidya G G Gangadharan- Centre for Innovation in Science & Social Action
- Sh. Jagdish Patel- Peoples Training & Research Centre
- Dr. Indu Capoor- Chetna

4:45 pm to 4:55 pm

Closing Comments

Dr. Mira Shiva- Initiative for Health Equity & Society

4:55 pm to 5:00 pm

Vote of thanks and closure

Dr. Rajesh Tandon, Founder President, Participatory Research in Asia (PRIA), India

PRIA@40 EVENTS

DATE	TITLE	THEME
12 August 2021	Youth Participation and Active Citizenship	Citizen Participation
20 August 2021	Planning for Urban Informalities	Sustainable Urban Future
31 August 2021	Accelerating Capacities in Civil Society and Non-Profits	Empowering Civil Society
2 September 2021	Nurturing Civil Society Partnerships in Uncertain Times	Empowering Civil Society
15 September 2021	Redesigning Civil Society Ecosystem: From Local to Global	Empowering Civil Society
28 September 2021	Unlearning Patriarchy: Expanding Impacts of Gender Training	Making the Gender Leap
30 September 2021	Investing in Civil Society Innovations	Empowering Civil Society
01 October 2021	Community-led Adaptations: Water is Life	Decentralised Community Governance
06 October 2021	Inspiring Leadership of Mayors and Councillors for Inclusive Urbanisation	Sustainable Urban Future
12 October 2021	Trajectories of Participation: From Development to Governance	Citizen Participation
20 October 2021	Scaling up Citizen Engagement for Inclusive Urban Governance	Sustainable Urban Future

01 November 2021	Gender Transformational Organisational Renewal: Towards Gender Equality	Making the Gender Leap
17 November 2021	Participation, Representation & Accountability: Strengthening the Movement	Decentralised Community Governance
23 November 2021	Making a difference: Adapting Impact Measurement	Empowering Civil Society
25 November 2021	Young Scientists Learning Open Science	Knowledge Democracy
26 November 2021	Institutionalising Online Citizen Participation in Public Policymaking in India	Citizen Participation
29 November 2021	Changing Contours of Development Cooperation: What Roles for Civil Society?	Empowering Civil Society
30 November 2021	Local Knowledge, Social Movements & Participatory Research: Indian Perspectives	Knowledge Democracy