THE ALTERNATIVE FOR SURVIVAL*

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ABSTRACT: The need of the time is to develop the traditional health care systems as a people oriented health care system. The factors that dominated the health care structure of our nation has been systematically pushing the traditional systems of medicine away from the people. In this background, an attempt has been made to reflect upon one’s own experience, to understand the pattern of domination and to probe and suggest further on what could be the possible alternative development strategy and suggest specific tasks that would help define the development problematique in a meaningful manner in order to progress further in a self-determined manner.

Perspective

In 1979 at the ICTAM held at Canberra I had postulated the following:-

i) Prejudice has always vitiated the appreciation of the achievements of our traditional systems of medicine.

ii) The foreign domination and internal strife drained not only our coffers but also the rich treasures of our culture – the science and technology, of which Ayurveda as a science of life was a vital part of our peoples’ lives.

iii) The false values that was introduced and later perpetuated by the colonial powers made us look down upon with contempt on our own systems of medicine.

iv) With the advent of national independence, the based leadership at the political, bureaucratic and technocratic levels set about perpetuating the colonial ways by establishing medical institutions throughout the country in the colonial lines and accepting the Allopathic medicine as the panacea of all our ills except that now the health map of our country is dominated by the interests of the commercial medical establishments (with the multinationals as the powers centre).

v) The domination of this model and its perpetuation has led to the neglect of our rural health services which were starved of resources and the technical and professional content of the health care delivery system remaining
solidly apathetic to the real health needs of the society.

vi) In view of the fact that western medicines and models have proved an utter failure in our health care system it has become very clear that to meet the health needs of our rural population an alternative health care delivery system has to be evolved.

vii) Any health care system to be really meaningful and effective must be culturally, socially and environmentally closer to the masses of the people. Ayurveda our traditional system of medicine, is admirably suited to be the most viable alternative health care delivery system.

viii) The dominant medical system now seems to be full of contradictions.

ix) The gradual erosion of faith in the biomedical model and its institution, the growth and popularity of different systems of medicine, the imaginative bold policies and programmes of bodies like WHO, tailoring traditional systems of medicine to meaningful projects to the maximum extent possible, all these show in which direction the wind blows.

x) The one argument that the dominant interests advanced against Ayurveda is that it has not kept pace with modern scientific teaching and as such it is not scientific.

xi) The so called modern medical science poses itself scientific and condemns other sciences as unscientific, when this science itself is in an almost never ending process of controversies, proofs and disproofs, is adequate proof of the authoritarianism and intolerance.

xii) To expect western system of medicine riddled with limitation and high cost, to deliver goods to meet our peculiar health needs is indeed a fallacy.

Since then five years have gone by. It is for us now to reflect on our experiences and chart out the future course of action in a decisive manner. Our experiences in these years have further strengthened what has been mentioned above. It is all the more imperative that we assert ourselves and initiate struggles to liberate the traditional systems of medicine from oppression and make it a viable alternative for our people.

**On Research**

The history of science is replete with instances of faith in reason and vision of truth. At every step from the conception of a rational vision to the formulation of a theory, faith is necessary—faith in the vision as a rationally valid aim to pursue faith in the hypothesis as a likely and plausible proposition, and faith in the final theory, at least until a general consensus about its validity has been reached this faith is rooted in ones own experience, in the confidence of one’s power of thought, observations and judgement. While irrational faith is the
acceptance of something as true only because an authority or the majority or those who count, says so. Rational faith is rooted in an independent conviction based upon one’s own productive observation and thinking.

Freedom is the necessary condition of happiness as well as of virtue; freedom, not in the sense of the ability to make arbitrary choices and not freedom from necessity, but freedom to realize that which one potentially is, to fulfill the true nature of man according to the cause of his existence. If freedom, the ability to preserve one’s integrity against power, is the basic condition for morality, has man in the modern world not solved his moral problem? Indeed the freedom attained in modern democracy implies a promise for the development of man which is absent in any kind of dictatorship, regardless of their proclamations that they act in man’s interest. But it is a promise only and not yet a fulfillment. We ignore that fact that we too bow down to power, not to that of a dictator and a political bureaucracy allied with him, but to the anonymous power of the market, of “Common sense” – or rather, of common nonsense – and of the machine whose servants we have become.

Claud Bernad, the great French Physiologist said “Good methods can teach us to develop and use to better purposes the faculties with which nature has endowed us, while poor methods may prevent us from learning them to good account. Thus the genius of inventiveness, so precious in the sciences, may be diminished or even smothered by a poor method, while a good method may increase and develop it”.

With good faith in Ayurveda and good intention and belief that good methods will help to develop and improve Ayurveda we approached the world bodies. In collaboration with WHO/ICMR we had started a research study on the Efficacy of Ayurveda in Rheumatoid Arthritis at our Centre at Coimbatore in 1977. This study attracted world wide attention and threatened to open the flood gates for the resurgence of traditional systems of medicine as a whole rather than some medical products (in this case based on traditional medicines). In July 1984, even before the final analysis was over, the mass media in our country came out with the startling report that Ayurveda, after all, has no cure for arthritis referring precisely to this very same study and that these findings and other informations given were released by the Indian Council of Medical Research (ICMR). This incident is indicative enough of the kind of opposition the traditional systems of medicine faces and that the vested interests who have entrenched themselves would go to any extent to subvert any serious and sincere attempts to develop these systems which they clearly perceive as a threat to their domination. Subsequently ICMR ‘as an institution’ denied this report described it as incorrect.

The lessons one must learn from this are:-

a) The existing bureaucratic power structure of our medical research system who is supposed to guarantee the integrity of scientific research has lost its autonomy and has become a tool of the vested interests.
b) Ideas get accepted because their protagonists are members of the elite and more seriously good ideas may be ignored because their advocates have poor standing in the social structures of science.

c) The social structure of science is determined by the dominant interest that creates, controls and governs the general movement which is detrimental to the well being of our people in general.

On Development

The very idea of progress is called a childish illusion and ‘realism’ a new word for the utter lack of faith in man, is preached instead. The idea of the dignity and power of man which gives men the strength and courage for the tremendous accomplishments of the last few centuries, is challenged by the suggestion that we have to revert to the acceptance of man’s ultimate powerlessness and insignificance. This idea threatens to destroy the very roots from which our culture grew. Rational authority has its source in competence. The source of irrational authority on the other hand is always power over people. The paralyzing effect of power does not rest only upon the fear it arouses, but equally on an implicit promise – the promise that those in possession of power can protect and take care of the “Weak” who submit to it. Power on the one side, and fear on the other, are always the butteresses on which irrational authority is built, criticism of the authority is not only not required but forbidden. Rational authority is based upon the equality of both authority and subject, which differ only with respect to the degree of knowledge or skill in a particular field. Irrational authority is by its very nature based upon inequality, implying difference in value.

One of the world bodies requested us to draw up a major development project of global relevance which would not only have helped the growth of Ayurveda but also other traditional systems of medicine as well. In face, this project would have ensured the strengthening of the essential base of traditional systems of medicines, especially the area of medicinal plants resource development which in itself is a major step. The relevance and the seriousness becomes all the, ore evident in the background of the systematic destruction of our forests and environment which is already reaching a crisis stage.

The success of this venture would have given us a new dimension for growth and progress and strength to stand against the onslaught of those who perceive a threat to their narrow interests. Our draft proposal drawn up with meticulous care and foresight was received very well by the UN body. To be approved, this proposal would have to be cleared by the national bureaucracy. This project was considered to be of no relevance by them and scuttled out rightly. The point here is not that we lost a project but the chances to revamp a new area which have served the needs of millions of people if not the world over, at least of the Asian countries.

The lessons one must learn from this are:-
a) The existing bureaucratic power structure of our national development programme who is supposed to ensure that decisions are made catering to the needs of the people has lost its autonomy and has become a tool of the vested interests.

b) Programmes get accepted because their protagonists are members of the elite and the powerful and more seriously good ideas may be ignored because their advocates have poor standing in the power structure of the society.

c) The development programmes are determined by the dominant interest that creates, controls and governs the general direction of “progress” which is detrimental to the wellbeing of our people in general.

On Planning

In authoritarian ethics, an authority says what is good for man and lays down the norms of contract. In humanistic ethics man himself is both norm given and the subject of the norms, their formal source of regulative agency and their subject mater. The unforgivable sin in authoritarian ethics is rebellion, the questioning of the authority’s right to establish norms and of it axiom that the norms established by the authority are in the best interest of the subjects. Humanistic ethics is based on the principle that only man himself can determine the criterion for virtue and sin and not an authority transcending him it is based on the principle that ‘good’ is what is good for man and ‘evil’ what is detrimental to man, the sole criterion of ethical value being man’s welfare. Where as in authoritarian ethics even if a person sins, his acceptance of punishment and his feeling of guilt restore him to ‘goodness’ because he thus expresses his acceptance of the authority’s superiority.

Man can adapt himself to slavery but he reacts to it by lowering his intellectual and moral qualities. He can adapt himself to a culture punctuated by mutual distrust and hostility, but he reacts this adaptation by becoming weak and sterile, but in achieving this adaptation he develops, neurotic symptoms. He can adapt himself to almost any culture pattern, but in so far as these are contradictory to his nature he develops mental and emotional disturbances which force hi eventually to change these conditions since he can not change his nature.

If man had adapted himself to external conditions autoplastically, by changing his own nature, like an animal, and were fit to live under only one set of conditions to which he developed a special adaptation, he would have reached the blind alley of specialization which is the fate of every animal species, thus predicting history. If, on the other hand, man could adapt himself to all conditions without fighting those which are against his nature, he would have had no history either. Human evolution is rooted in man’s adaptability and in certain indestructible qualities of his nature which compel him never to cease his search for conditions better adjusted to his intrinsic need.

Our institution ha the privilege (if can be called that) to be a member of a committee
of a very important national body where the nation’s next five year plan in health and more precisely in the traditional systems of medicine is formulated, discussed, reformulated and decided. Almost all the members of this committee, with their all too obvious show of self-importance, unleashed a plethora of ideas and justification for assistance for the traditional systems of medicine. From our side we too suggested some concrete proposals on the need for the development of medicinal plant potential of the nation, because after all this is a prime necessity for the practice of our systems. The members unanimously supported the proposal. To our utter dismay we find a bureaucrat- the member secretary of this committee, who deciding to recommend a miserable sum of money for the proposal which would not even suffice for fencing the estimated area for this project. Incidentally and most interestingly unlike other member secretaries of other committees of this national body, he was neither an expert in the area in which he was to judge nor competent and experienced enough with the subject and issues involved. This is proof enough of the utter disregard of traditional systems of medicine.

The lessons one must learn from this are:--

a) The existing bureaucratic power structure of our national planning system who is supposed to guarantee that plans are appropriate to the needs of the peoples has lost its autonomy and has become a tool of the vested interests.

b) Plans are accepted because their protagonists are members of the elite and the powerful and more seriously good plans may be ignored because their advocates have poor standing in the power structure of the nation.

c) The social structure of planning and decision making is determined by the dominant interests that creates, controls, and governs the general movements which is detrimental to the wellbeing of our people in general.

Of course, there are large-hearted personages among bureaucrats as well as scientists and Doctors of Western medicine, but most often, by virtue of their large heartedness and tolerance, do not wear the robes of an autocrat and are helpless to push through their ideas and so much so, even though they have a soft corner for our system they are incapable of giving any substantial worthwhile contribution to our system.

I am not tarnishing the image of our great country, as is won’t with the unpatriotic and anti-national elements in the country. Far from that, we are striving to do our best in an area where the Government is expected to do a lot more for the furtherance of our great science. The seven year Ayurvedic Course we are offering at out college in Coimbatore where education is provided absolutely free and the students are trained meticulously, aimed at bringing out a new class of Physicians committed solely to the science and nation is proof positive of my loyalty to my country and our science and I do not claim any credit or recognition for this because, as a true and royal citizen of our country I deem it only my duty to do
what little I can for the cause of our country, our people and the science. When I point out Government’s lapses it is meant only to rectify them.

**What now?**

If this is the fate of traditional systems of medicine in a progressive and democratic country like ours, I am sure the situation cannot be different – possibly worse in other countries. Experience of countries like the peoples Republic of China and North Korea clearly establishes the fact that change is possible. It has been possible through struggle and liberating the nation from the dominant interests which is to be viewed from a global perspective and has its arms extended in determined frontal attacks of nations everywhere especially the developing nations.

The need now is to stop the rhetoric and act. The action is essentially through a conscious and sustained struggle.

**Towards a new development strategy**

Traditional system of medicine exists and its significance lies on account of it being an alternative system. If we are coopted by the dominant system, it loses its relevance as an alternative system. On the other hand, if we follow the dominant trends of development in an attempt to keep up with the so called ‘modernisation’ under the false premise that that is what mankind needs, then it again results in the loss its relevance as an alternative system. Then the system itself loses its fundamental base and strength and degenerates into another set of products to be produced by the big industries, to be marketed by the big business for consumption by the rich, all business for a comfortable profit. The obvious way to combat this menacing prospective and to maintain and strengthen these systems as viable alternative system in health sector is to move decisively towards a new development strategy.

The thrust of this new strategy is through an alternative conception of its development which gives due regard to its endogenous character and to autonomy or self-reliance with self-control and focussed towards fulfillment of the needs of the people. This implies our willingness to reassert our rights to determine and act upon our needs and priorities. This is possible more for non-governmental organizations (NGOs) involved in traditional systems of medicine to forge strong horizontal linkages at the local, national and the global space. The NGOs are in a position to take up the leadership precisely because of their freedom to move out into newer areas with newer insights through innovative methods.

The need now is to broaden participation in the development discussion by the creation of a platform to the ‘third system’, that is concerned individuals; research, educational or people’s organizations as distinct from the inter governmental (or intra-governmental as the case may be) organization (the first system) and the transnational corporations (the second system). The role of the third system has by now been acknowledged as a hope for humanity in recent times, in the struggle for a more humane alternative in areas of alternatives as information and media, health
care, energy science, technology, finance, development etc.

It is indeed time that we open ourselves from the narrow confines for which none else but we are responsible and rise to extend our hands within this third system and this alone will ensure the survival of our traditional systems as systems itself in its pristine glory, vitality and social relevance. This is all the more vital for Third World Countries.

The task ahead

1. The formation of a collective self reliant network of organizations involved in the development of traditional systems of medicine at the national and the global space.
2. The development of an information network though this formation to provide for an easy flow and access to available informations and the systematic development of information that has hither to been ignored especially in the area of the political dimensions of the development of traditional systems of medicine, and their exchange.
3. Establishing linkages with similar networks elsewhere with those involved in development alternatives to initiate a process of dialogue to develope strategies and approaches, mechanisms and code of conduct, and programmes of action in the area of traditional systems of medicine.
4. To consolidate the above through the implementation of a project to analyse and develop the building blocks for alternative development strategies for the traditional systems of medicine which would form the guidelines for action at the global, national and local space. Naturally, this would define in an objective way the development problematique in a wider perspective and provide wider areas for concerted, coordinated and sustained action through the dialectics of confrontations and negotiations.

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