

Thematic Concept Note

HEALTH AND BIODIVERSITY

Biodiversity in the form of plants (>8000 species) and animals form the resource base of Indian Health Traditions (folk, Ayurveda, Unani, Siddha & Tibetan systems). The applications of these resources cover prevention of diseases, cure and promotion of health. Poorer sections of society are especially dependent on biological resources for health requirements, and women in rural areas use herbal remedies for their special gynaecological, pregnancy, and related needs. An inventory of the resources used by these systems would be a necessary and basic step for their conservation.

Local, eco-system specific wild vegetables, grains, animals, fish as well as other biological forms and biological products have contributed to local food and nutritional needs. Again, this is particularly true of poorer sections of society. Women in their traditional roles have been especially mindful of the contributions of biodiversity to food security. These resources and practices need to be identified and conserved so that their sustainable use can continue. There is also a critical two way relationship between local food traditions and biodiversity (wild and cultivated) viz. on the one hand food traditions, depend on available biodiversity and on the other the traditional diet patterns contribute to continued cultivation and conservation of biologically diverse crops.

Forest ecosystems and biodiversity in other ecosystems also contributes to the psychological and mental well being of communities and thus to their health care. Destruction and degradation of natural habitats probably contributes to ill health of individuals and communities. There may not be very many empirical studies on this relationship between mental health and biodiversity, but it is another area that needs to be examined.

In the above ways, biodiversity in India has served the 'health' needs of our people and therefore its conservation is of concern to individuals and institutions concerned with 'health care' needs. Planners and policy makers need to be sensitive to this 'utility' aspect of biodiversity while preparing conservation plans.

Given the above, the Working Group should:

1. Examine and describe our current understanding of the relationship between biodiversity and human health (individual and community, men and women); and identify gaps in this understanding;
2. Assess the current status of health care based on biodiversity, in particular on medicinal plants and animals, amongst different sections of India's populations, and differentially amongst men and women;
3. Identify critical traditions and knowledge of health care based on biodiversity, both oral and written, folk and classical, and differentially amongst men and women; in particular, assess the extent of plant resources and related knowledge used by local health cultures all over India based on published ethno-botanical literature.
4. Identify the sites and populations in which the relationship between health care and biodiversity is still very strong;
5. Assess the specific relationship between biodiversity (in the wild and agricultural) and nutritional needs of communities and individuals (men and women through their life cycles);

6. Assess the threats to health care based on biodiversity, including to the medicinal plants and animals, and to related traditions and knowledge; Identify and assess ongoing efforts to revise or strengthen the relationship between health care and biodiversity, and gaps therein; this should include attempts to safeguard ethno-medicinal knowledge and gaps therein;
7. *Explore the relationship between pharmaceutical industries and biodiversity concerns, including investments by them in R&D and conservation/sustainable use related activities, and the gaps therein.*
8. List measures (short and long term) to plug these gaps;
9. Prioritise these measures in term of their importance and immediacy;
10. Identify resources (human, institutional, and economic), necessary to carry out these measures.

In the above topics, the WG should link up with other relevant WGs, to avoid duplication, and to synergise the efforts.