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ETHNO MEDICINAL HERITAGE OF SHOPIAN (JAMMU & KASHMIR): TRADITIONAL KNOWLEDGE AND FOLK HEALING PRACTICES.

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Abstract
The practice of folk medicine is not new to the healthcare of the rural populations in Kashmir, and thus, it has been practiced since ancient times in the treatment of various ailments. The high dependency on the traditional remedies is due to the fact that there are few modern medical centers in the rural areas and the high number of medicinal plant species in the region. In the current times, folk practitioners have remained critical to healthcare in most developing countries and the district of Shopian (J&K) is not an exception. The majority of the world population, estimated to be five billion, out of the seven-point five billion people, rely entirely or partly on traditional medicine, which is mainly plant-based, either grown locally or collected in the wild forests. The paper will aim to show the importance of folk and ethnic medicine to the healthcare system of Shopian district and its cultural and therapeutical importance.

Keywords: *Folk Medicine; Ethnomedicine; Traditional Healthcare; Medicinal Plants; Diseases; Himalayas; Shopian; Rural Communities; Indigenous Knowledge; Plant-Based Remedies*

METHODOLOGY

The research was carried out by carrying out large-scale field surveys on the forested terrain, the pasture land and the small villages of the Jammu and Kashmir Shopian district. A participatory method was used in order to make the information gathered authentic. The local residents, such as the traditional curers, old people and the alpine residents were asked to come with the research team on the plant collecting tours. Their expertise helped discover species that were frequently used in folk medicine as well as record their uses in medicine.

Plant specimens were taken and preserved in a good way before presenting the same to the community members in their own villages where their identities and medicinal use could be verified. In-depth interviews were held to obtain data on the conditions being treated, methods of preparation, form of dosage and route of administration. In most instances, informants were interviewed more than once, just to ensure that the dependability of the information was checked and to describe the differences in the local practices.

The method also involved:

Ethnobotanical Walks: Visit to the wild with local practitioners as they go in search of plants.

Household Surveys: Household visits to document traditional remedies prepared or administered at home.

Documentation of Oral Traditions: documenting folk narratives, proverbs and cultural beliefs related to medicinal plants.

Photographic Records: Visual records of documenting plant species and methods of preparation to facilitate identification and future reference.

Data Triangulation: Compared with information received on other sources (healers, elderly and the general villagers) to make sure that there is no bias at all.

This methodical method enabled the total comprehension of the ethnomedicinal practices in Shopian and the close interrelation of the local communities and the biodiversity that surrounds them.

Medicinal importance of Plants.

Medicinal plants have continued to play a very important role in healthcare, especially in states like Kashmir where folk medicine is very internal to the culture. In the past, the medical facilities in the valley were limited. As one of the authors of The Valley of Kashmir Lawrence wrote, there were six dispensaries in the entire valley of Kashmir and one hospital in Srinagar that was operated by the Kashmir Medical Mission. This poor infrastructure made people stick to Unani physicians in city centres and traditional healers in villages over a long time.

After the independence of India, the rural healthcare infrastructure got improved significantly. Gradually, the dispensaries and primary health centres were established meaning that the medical facilities were now available to almost all villages. In conjunction with these advances, there was an improvement of living standards, the economical background, and the level of education possessed by the inhabitants of villages, which resulted in an increased level of awareness of the health and well-being. Previously, people could not afford to buy modern drugs unless there was some necessity but over the recent years, there has been an increase in purchasing capacity and people are able to spend more on healthcare services.

In this regard, medicinal plants study of Shopian district is especially important. It does not only depict the strength of traditional healthcare systems, but also puts emphasis on the necessity of incorporating ethnomedicinal knowledge into modern health services. This kind of integration can not only make modern medicine richer, but also facilitate the sustainability of using biodiversity, as well as make sure that the rich cultural practices can be passed down to the next generations.

Kashmir Folklore with regard to Medicinal plants.

Cultural heritage of Kashmir is considered to be based on traditional beliefs and folklores about medicinal plants. These are spiritual and symbolic practices that portray the strong relationship that exists between communities and their natural resources. The following are some instances of how plants are not just treasured as sources of therapeutical value, but also as sources of veneration such as cultural, religious and protective:

1. *Allium cepa* L. (Liliaceae) -“Gande” It is said that uncooked onion must be taken in advance before going to the alpine fields to gather medicinal herbs. Otherwise, as per folklore, one might become unconscious.
2. *Allium sativum* L. (Liliaceae) -Rhoon garlic cloves are threaded into a wreath and used to protect the evil spirits by putting it round the neck.
3. *Capsicum annuum* L. (Solanaceae) -Merchagun Kashmiri Pandits string chili fruits at the doorway to their houses and on new cars in order to keep away evil spirits.
4. *Cedrus deodara* G. Don (Pinaceae) – “Deodar” Kashmiri Pandits believe in the sacredness of the wood of the deodar tree which is usually burned on Hawan (offerings).
5. *Iris nepalensis* Wall. ex Lindle (Iridaceae) -mazarmund This is a plant used to cover graves to keep off rodents, which represent protection and holiness.
6. *Juglans regia* L. (Juglandaceae) -Juglandaceae, Walnuts soaked in water ten days before Shivratri festival. They are subsequently applied in religious practices (Pooja) and given out as Prasad (sacred offering).
7. *Ocimum canum* Sims (Lamiaceae) -Baber Baber is held sacred by the Kashmiri Muslims who use the aerial parts of this plant. They are placed into water where the final ritual bath of dead people will be performed which is a symbol of cleansing.

8. *Platanus orientalis* L. (Platanaceae) -Platanusorientalis is known as booni (Religious figures) and used by Peers reciting verses of the Holy Quran upon bits of its bark, which are handed over to those who feared ghosts. The bark is a charm to evil spirits, as well.
9. *Saussurea lappa* C.B. Clarke (Asteraceae) -Kuth The root of this plant is added in boxes with expensive clothes to avoid their destruction by insects, which proves its practical household application.
10 *Rheum emodi* (Polygonaceae) -Pambachalan Folklore: It is said that its roots keep away evil spirits in the house when they are hung in the front.
11. *Artemisia absinthium* (Asteraceae) - Tethwan Folklore: burned as incense to keep away the evil spirits and cleanse the houses.
12. *Ficus carica* (Moraceae) -Anjeer Fruits are presented in the temples as a token of fertility and blessings.
13. *Coriandrum sativum* (Apiaceae) -Dhania Seeds are sprinkled at weddings and festivals to bring harmony and keep off jealousy.

Health Conditions and Role of Medicinal Plants in Rural Kashmir

Traditional Preventive Measures

The Kashmiri village people are more fortunate than the peasant classes in other India. They are normally in sufficient food supplies, have enough clothes, good houses and plenty of fuel. As a result, there are less diseases, which are related to lack of basic commodities in rural Kashmir. In the past, the valley had rarely seen infectious diseases like typhoid, malaria, hepatitis, bacillary dysentery and sexually transmitted diseases. Nevertheless, two significant reasons can explain their growing rates over the last few decades, including the inflow of a significant number of visitors of the valley and the migration of the local population to other regions of the country as servicemen and workers, which have helped to spread infections.

There is an increase in the prevalence of upper respiratory diseases especially bronchial asthma. Such a trend is attributed to lifestyle and environmental elements like smoking, use of cow dung as a form of fuel, extended exposure to smoke in kitchen places, co-incident living with cattle and extreme climatic conditions. Likewise, stomach diseases are common, most of them caused by overeating, dependence on dry vegetables, too much intake of hot tea on the empty stomach, and the combination of smoking and snuffing.

Though economic growth has taken place, the sanitary situation in villages has not changed much, and still, it contributes to health hazards. The health education programs on the hygiene, nutrition, and lifestyle change could eliminate many of these diseases.

Conventional Preventative Interventions.

The prophylaxis has been the longstanding practice used by the people in the village to reduce the incidences of illnesses. These include:

Food taboos and hunger in order to cleanse and avoid digestive problems.

Baths, massages and rewarming to keep the body in good physical condition.

Use of laxatives and special diets as therapeutic interventions to common disorders.

The practice is indicative of a long tradition of folk medicine and the art of using natural products to treat diseases and manage illnesses with a rich heritage within the community. These customs are worth taking seriously on intellectual grounds as they are good indigenous bodies of knowledge.

Medicinal Plants Documentation.

The current study is aimed at documenting the medicinal plants used by the rural communities and tribal communities living in the Shopian district. Together with botanical exploration, specific data was gathered about:

- Parts of the plant that were used (roots, leaves, bark, seeds, etc.)
- Dose and route of administration (decoctions, pastes, infusions, inhalations)

Single or compound use as exposed by village healers, herbal practitioners and traditional medicine men.

This strategy fills the gaps in the previous literature, which generally referred to the utility of the plants without the dosage, mode of preparation, and mode of administration. By recording these, the study makes the study less ambiguous and the ethnomedicinal knowledge more dependable to be used in the future.

Global Context

Herbalists still remain an important aspect of healthcare in developing countries. International estimates indicate that over three-fourths of the planetary populace of in excess of five billion individuals is not able to manage financial commitments on medication products and consequently relies on customary remedies, and these are largely vegetal-based. World Health Organization (WHO) has developed a list of more than 20,000 medicinal plant species and actively promotes their use in healthcare systems of national programmes. These efforts are in a bid to lessen the financial burden on the developing nations which in most cases use 40-50 percent of health funds on medicine. The increased awareness on the importance of herbal medicines as a vital source of healthcare is attributed to the fact that they are locally available, affordable, and relatively safer as compared to synthetic products (WHO, 2002).

Ethnobotanical Research

Ethnobotanists and ethnopharmacologists around the world are also recording such traditional medicine and effects of local medicine. The main idea of such programs is to re-qualify indigenous healing systems, raise awareness about their therapeutic value and the value of preserving medicinal plants and their natural habitats (Mudasir et al., 2009).

Conservation of biodiversity is therefore directly correlated with the accessibility of herbal medicines and sustainability of the traditional healthcare systems.

Table 1: Medicinal Plants Used for Various Diseases in Shopian, KashmirAngiosperms

S.No.	Botanical Name	Local Name	Part Used	Medicinal Usage
1	*Achillea millefolium* L.	Pahel-gas	Whole plant, root	Common cold, toothache, dysentery, gastritis
2	*Aconitum heterophyllum* Wall. ex Royle	Patris	Root	Diarrhoea, dysentery, toothache, dry cough
3	*Aesculus indica* Hook	Handoon	Fruit	Cracked heel, dandruff, hair fall
4	*Allium cepa* L.	Gande	Bulb	Bad cold, boils, hair fall, diarrhoea, male sterility
5	*Allium sativum* L.	Rhoon	Cloves	Influenza, alopecia areata, rheumatism, hypercholesterolemia
6	*Anagallis arvensis* L.	TeheriSaben	Aerial parts	Pimples, ringworm
7	*Arisaema jacquemontii* Blume	HaputGogej	Bulb	Skin eruptions, boils, abscesses
8	*Arctium lappa* L.	Phaghood	Leaves	Boils, blood impurity
9	*Bergenia ligulata* (Wall.) Engl.	Palpashand	Root	Wounds, boils
10	*Brassica campestris* (L.) Clapham	Tilgogul	Seed	Frostbite, dandruff, hair fall, abdominal pain
11	*Borago officinalis* L.	Botin	Leaves, flowers, seeds	Skin rashes, rheumatism
12	*Calendula officinalis*	HameshBahar	Leaves, flowers, root	Boils, muscle spasms, burns
13	*Colchicum luteum* Baker	Whirkin posh	Corm	Dandruff, joint pain
14	*Cuscuta reflexa* Roxb.	Kuklipot	Whole plant	Skin infections, pneumonia, dandruff, warts, epilepsy
15	*Cydonia oblongata* Mill.	Bomb chont	Fruit, seed	Asthma, bowel pain, itching, constipation
16	*Cynoglossum glochidiatum* Wall. ex Benth.	Nanzeur	Root	Boils, abscesses
17	*Datura stramonium* L.	Datur	Seeds, leaves	Asthma, boils, rheumatism, dental caries, neuralgia, blood impurity
18	*Ficus carica* L.	Anjeer	Leaves, fruit	Dermatitis, constipation
19	*Fritillaria imperialis* L.	Yemberzoul	Bulb	Fever
20	*Iris nepalensis* Wall. ex Lindle	Mazarmond	Rhizome	Boils, pimples, rheumatism
21	*Juglans regia* L.	Doon-kul	Drupe, root	Grey hair, rheumatism, constipation, frostbite
22	*Lycopus europaeus* L.	Gagermanz	Aerial parts	Skin allergy
23	*Marrubium vulgare* L.	Troped	Seeds, leaves	Skin infections, rheumatism
24	*Ocimum canum* Sims	Baber	Seeds, aerial parts	Micturition problems, skin disorders, constipation
25	*Origanum vulgare* L.	Mazren	Aerial parts	Tonsillitis, toothache
26	*Oxalis corniculata* L.	Chok-chin	Whole plant	Skin allergy, dysentery, rickets, thrush
27	*Plantago major* L.	Logout gul	Seeds, roots, leaves	Gastric ulcers, toothache
28	*Podophyllum hexandrum* Royle	Wan wangun	Rhizome, fruit, leaves	Boils, diarrhoea, cancer, constipation, stomach disorders
29	*Polygonum hydropiper* L.	Marchagangass	Leaves	Toothache, uterine disorders
30	*Potentilla nepalensis*	Panzpater	Leaves, root	Boils, fever
31	*Prunella vulgaris* L.	Kal-weeth	Flowers, aerial parts	Dizziness, high fever, rheumatism
32	*Punica granatum* L.	Dan	Fruit	Dysentery, pimples, jaundice, burns
33	*Ranunculus scleratus* L.	Good sochal	Root	Dermatitis
34	*Raphanus sativus* L.	Muj	Whole plant, seeds, root	Hair fall, jaundice, impotence, bleeding piles
35	*Rheum emodi* Wall. ex Meissn.	Pump-chalan	Rhizome	Boils, rheumatism, wounds
36	*Rhododendron campanulatum* D. Don	Wan-nas	Leaves	Cold, toothache

37	*Salvia moorcroftiana* Wall. ex Benth.	Shermatus	Roots, leaves	High fever, boils, cough, chest congestion
38	*Sagittaria sagittifolia* L.	Kew	Leaves	Skin rashes, stomach disorders
39	*Saussurea sacra* Edgew.	Zoogpadshah	Whole plant, root	Pimples, acne, boils, rheumatism
40	*Senecio jacquemontianus* Benth.	HaputGogej	Tuber	Stomach disorders, boils
41	*Senecio gracilflorus* DC.	Mongoal	Leaves, aerial parts	Skin eruptions, acidity
42	*Solanum nigrum* L.	Kambai	Leaves, fruit	Skin eruptions, cough
43	*Sonchus asper* (L.) Hill	Dudh-Kandij	Aerial parts	Fever, burns
44	*Thymus serphyllum* L.	ArdJavind	Flowers, whole plant	Asthma, skin rashes
45	*Urtica dioica*	Soi	Aerial parts, leaves, root	Skin infections, asthma, dandruff
46	*Vicia faba* L.	Bagle	Whole plant	Skin abrasions
47	*Vitis vinifera* L.	Dush	Leaves, fruit	Boils, diarrhoea, earache
48	*Xanthium strumarium* L.	Phaghood	Leaves, root	Abscesses, boils, herpes

Gymnosperms

S.No.	Botanical Name	Local Name	Part Used	Medicinal Usage
1	*Cedrus deodara* G. Don	Deodar	Resin, heartwood	Piles, skin allergy
2	*Picea smithiana* (Wall.) Boiss.	Kachul	Resin	Cracked heel
3	*Pinus wallichiana* A.B. Jackson	Kayur	Resin	Muscular pain, cracked heel

Pteridophytes

S.No.	Botanical Name	Local Name	Part Used	Medicinal Usage
1	*Adiantum venustum* G. Don	Geutheer	Leaves	Skin eruptions, pimples

Community Knowledge and Ethnomedicinal Survey.
In the ethnomedicinal survey that was carried out in both accessible and remote regions of the Shopian district (Jammu & Kashmir) it was noted that local knowledge on medicinal plants is rich and entrenched in the community life. This native knowledge is important in creating a connection between communities that live there and the biodiversity of the place. This connection is reinforced by the need to use useful medicinal plant species, which has been a measure of ecological consciousness and cultural sustainability.

Despite the fact that these plants are not able to take care of all the healthcare requirements, they have been used successfully as home remedies in treating common diseases. Their application evidences the robustness of the traditional healthcare where natural resources are used to address daily health needs. The therapeutic potential of local flora is emphasized by such practices, as well as the need to safeguard ethnomedicinal knowledge as an intangible heritage that maintains the mutual interaction between individuals and their surroundings.

Conclusion
The paper identifies the ethnomedicinal tradition of Shopian in which people and tribals depend on plant remedy to various conditions. Although the world has grown in terms of its healthcare, traditional knowledge has been a dependable, cheap, and culturally relevant source. It is crucial to retain this heritage to protect biodiversity and health in the community.

Recommendations
Medicinal plants should be conserved by growing them and engaging the communities in the conservation activities. Safe remedies need to be incorporated in healthcare and this can only be achieved by documenting and validating indigenous practices. Local healers can be enabled through awareness programs and policy support which promote sustainable livelihoods.

Future Research Directions
Future research needs to be directed at phytochemical research and standardization of dosage of widely used plants. Sustainability will be guaranteed through research on ecological effects of over harvesting and crop cultivation potential. The comparative ethnomedicinal research on Himalayan areas would help enlarge the knowledge and enhance the integration with modern medicine.

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