

CONSERVING LOCAL KNOWLEDGE IN TRADITIONAL HEALING THROUGH KNOWLEDGE TRANSFER

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ABSTRACT

Local knowledge (LK) basically refers to the knowledge that people in a given community have developed over time, and continues to develop, through practices and based on experiences. Local beliefs pertaining to *ilmu*, a central concept in Malay culture that refers to knowledge, is essential among the traditional healers. The vast repository of knowledge and its relevance to locality and local situation makes the conservation of LK a necessity. However, due to the dominance of modern knowledge, diminished inter-generational knowledge transfer has led to LK being threatened with extinction. The fact that LK is practiced by only a few these days could be due to lack of knowledge transfer to the younger generations from the traditional healers who are knowledgeable in the communities. The common transfer mode of local knowledge, usually via words of mouth, may not be sustainable because the LK could vanish when knowledgeable elders die before it is transferred or during resettlements of individuals or communities. The need to conserve LK through knowledge transfer is also pertinent for the continued sustenance of their culture by recognizing, protecting and enforcing the rights of local communities to have continued access to biological resources as well as by protecting their LK, acquired over thousand of years of experimentation and experience, about the uses of these biological resources in traditional healing. Therefore, it is important to have a governance framework to effectively protect this LK of the local communities for the continued sustenance of their culture. This conceptual paper attempts to highlight the significance of conserving LK in traditional healing via effective knowledge transfer method, which should thereafter be translated into a working governance framework that protects the knowledge as well as the holders of such knowledge.

Key Words: Local Knowledge, Knowledge Transfer, Governance Framework, Protection and Conservation, Cultural Sustenance

INTRODUCTION

Local knowledge (LK) basically refers to the knowledge that people in a given community have developed over time, and continues to develop, through practices and based on experiences. According to Canagarajah (2002), this represents the anthropological view of local knowledge. For example, he quoted Geertz's (2000) definition of local knowledge as the "beliefs and orientations emerging from social practices of a community through history" (p 243). However there are also other interpretations of local knowledge. One aspect is knowledge that remains within local circles but differs from knowledge that is established or authenticated within specific disciplines. Another type is the knowledge that practitioners develop in the course of carrying out their work that may not have been as yet recognised by authorities in their area of work. Thus, LK is seen as being confined to particular communities and context, and non-systematic in nature (Canagarajah, 2002).

Local beliefs pertaining to *ilmu*, a central concept in Malay culture that refers to knowledge, is essential among the traditional healers. They acquire knowledge about causes, treatment and prevention of disease through traditional means. Some of the treatment methods include remedies using local herbs, ceremonial rites and incantations. In many instances, Malay traditional healers also use Qur'anic verses in the healing ritual since they are Muslims (Al-Naggar, Bobryshev, Abdulghani, Rammohan and Al-Jashamy, 2012).

Herbs that are endemic in the locality are essential ingredients in the healing process. Knowledge about specific plants, their taxonomies, identification, location and preparation are some of the important components of the knowledge repertoire held by the traditional healers. Such knowledge requires a substantial amount of time and energy for its acquisition and mastery. Identification of the different plants for use in traditional healing, their morphology, physiology and life cycle, as well as their distribution are important aspects of traditional use of herbs in healing. Such knowledge enables these traditional healers to identify herbs correctly, and choose the right plants for specific ailments. This knowledge is also valuable in ascertaining the availability of the necessary herbs within a certain locality, and for a particular time of the year. When the healing recipe requires the flower of specific plants, the practitioner will know whether the time is suitable for treatment, which means it should be congruent with the flowering period of the plant. Similarly if seeds are required, then knowledge of the specific time that certain plants set seeds is important, as some plants may be seasonal in the flowering and seeding period, while others may not be so.

Knowledge of plants alone is insufficient for the practitioners to perform the healing procedure. They also need to have the procedural knowledge of preparing herbal remedies. This knowledge also

include the specific ratios of the components of a particular remedy, suitable time of day for its preparation, length of time to produce the desired product, precautions and taboos. When the product is ready, there may be specific rules to follow in its application.

The vast repository of knowledge and its relevance to locality and local situation makes the conservation of LK a necessity. Much of local knowledge is not documented. Most of the local knowledge is passed from one generation of practitioners to another orally. Furthermore, modernisation and globalisation has changed the values and beliefs people hold in relation to healing practices. Traditional healing practices is losing its appeal among some sections of the general populace, especially with the advancement of medical knowledge and the improved availability and affordability of modern medical services. Such a situation does not augur well with the younger generation, who may not consider practicing traditional healing as attractive, and especially not lucrative. The older generation of practising traditional healing will have no pool of new recruits to inherit their knowledge and practices. This in turn leads to the local knowledge within a community to decline and eventually disappear.

Thus, due to the dominance of modern knowledge, diminished inter-generational knowledge transfer has led to LK being threatened with extinction. The fact that LK is practiced by only a few these days could be due to lack of knowledge transfer to the younger generations from the traditional healers who are knowledgeable in the communities.

The common transfer mode of local knowledge, usually via word of mouth, may not be sustainable because the LK could vanish when knowledgeable elders die before it is transferred or during resettlements of individuals or communities. However the global movement towards herbalism and use of herbal therapies, looks promising in the conservation of local knowledge. Government efforts to make Malaysia the top exporter of herbs and herbal products may be able to encourage greater use and knowledge transfer of herbal remedies (Othman Yatim, 2013).

The need to conserve LK through knowledge transfer is also pertinent for the continued sustenance of their culture by recognizing, protecting and enforcing the rights of local communities to have continued access to biological resources as well as by protecting their LK, acquired over thousand of years of experimentation and experience, about the uses of these biological resources in traditional healing.

Using audiovisual media to capture use of traditional medicine has been explored as a means for knowledge transfer (Bidwell, Winschiers-Theophilus, Koch-Kapuire and Chivuno-Kuria, 2011). However

the researchers cautions that at best this method can represent the knowledge only within the “social-relational spaces that contextualise knowing, doing and moving, linked to corporeal and felt-experiences”.

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ACKNOWLEDGEMENT

The authors wish to thank funding support from the Long Term Research Grant Scheme, Ministry of Education, Malaysia.

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