



A CASE STUDY

Prospects of herbal gardens as new vistas of medical tourism in North East India

BINA PANI DEKA, RUPAM BORGOHAIN AND DIBYAJYOTI BHARALI

ABSTRACT

The medical tourism is a growing sector in India and is expected to experience an annual growth rate of 30 per cent with a projected outlay of \$2 billion industry by 2015. The Indian systems of medicine like ayurveda, yoga, panchakarma, rejuvenation therapy are among the most ancient systems of medical treatment of the world. All these types of treatments are entirely based on herbs, which have certain medicinal values and provide one-stop solutions to cure large numbers of health related problems and diseases. Being the biodiversity 'hotspot', North East India has a valuable heritage of herbal medicines and the usage of herbs in traditional medicine was recorded since time immemorial in this region. The traditional use of herbal health remedy in N. E. India provides significant nutritional, economic and ecological benefits for rural communities. A large number of ethnic people or tribes possess a vast traditional knowledge on effective herbal medicines which were acquired through the experience are usually passed on by oral traditions as a guarded secret of certain families. However, the documentation of traditional and indigenous knowledge on medicinal significance of herbal plants is yet to be initiated in a scientific manner. For this, the establishment of herbal garden as a vital component of rural as well as medical tourism to attract tourists from other parts of India and abroad is has become new vistas in the growing tourism sector. Considering above facts, a herbal garden was established in Krishi Vigyan Kendra, Kaliapani, Teok in 2012, not only to encourage the farmers to introduce the home herbal garden but also to inculcate a sense of familiarity with surrounding biodiversity and its conservation, especially herbal plants. Awareness, the basic requirements of establishing herbal gardens, uses of herbs and the issues related to employment generation avenues are studied in nearby villages of KVK, Jorhat. Results showed that people are found to be interested in herbal medical tourism but lack of awareness and acquaintance people showed apathy to start as employment generation avenues.

Key words : Herbal gardens, New vistas, Medical tourism

How to cite this paper : Deka, Bina Pani, Borgohain, Rupam and Bharali, Dibyajyoti (2015). Prospects of herbal gardens as new vistas of medical tourism in North East India. *Ann. Pharm. & Pharm. Sci.*, 6 (1&2) : 46-49.

Article chronicle : Received : 10.08.2015; Accepted : 30.09.2015

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INTRODUCTION

Tourism is travelling for predominantly recreational or leisure purposes or the provision of services to support this leisure travel. The World Tourism Organization defines tourists as people who "travel to and stay in places outside their usual environment for not more than one

consecutive year for leisure, business and other purposes not related to the exercise of an activity remunerated from within the place visited". Globally, Tourism has become a popular global leisure activity. In 2006, there were over 842 million international tourist arrivals. (Tourism, Wikipedia, the free encyclopedia).

Medical tourism (MT) is defined as patient movement from highly developed nations to less developed areas of the world for medical care by bypassing services offered in their own communities. Medical tourism is different from the traditional model of international medical travel where patients generally journey from less developed nations to major medical centers in highly developed countries for medical treatment that is unavailable in their own communities. Medical tourists come from a variety of locations including Europe, the Middle East, Japan, the United States, and Canada. Factors that drive demand for medical services abroad in First World countries include: large populations, comparatively high wealth, the high expense of health care or lack of health care options locally, and increasingly high expectations of their populations with respect to health care.

India has a potential to attract 1 million health tourists per annum which will contribute US\$ 5 billion to the economy. Patients from various countries are becoming medical tourists to India for low cost and health restorative alternative treatments. The Medical Tourists undergo health restorative treatments of a combination of ayurveda, yoga, acupuncture, herbal oil massage, nature therapies and some ancient Indian healthcare methods –such as Vedic care, an alternate healthcare service. Cost Advantage is the attractive aspect of Indian modern medicine which is 10-15 times lower than anywhere in the world.

Tourists are concerned about diseases from tainted foods or poor sanitary conditions. Herbs are used for many purposes including eating, treating, smoking, massaging, etc. Herbs have a longstanding reputation in India as a rejuvenator, helping concentration, and memory improvement. Herbal foods provide nutrients to cure or treat injury or disease. Plenty of healthy herbs have been grown in rural areas for many centuries. Thus, most of the raw ingredients used to cook and treat illness are the product of local wisdom, making rural areas a source of natural, cultural and local wisdom (Ratanakomut, 2006).

Rural tourism is tourism that takes place in the

countryside (Upadhyay, 2007; MacDonald, 2005). Because of the stress and strain of modern urban life, many people are turning to the countryside for peace and rest. However, rural areas are not only the pure sites for resident but also for large agricultural production lines. It is also an important place from which to learn about farming. Hence, travelling in rural areas creates a wonderful experience for tourists. Herbal species can grow commercially to develop tourism sites. This may lead to rural employment and thereby, generation of additional income to the farming community of rural population.

Objectives :

- To educate the farmers in identifying different types of herbs and their uses including growing them in a garden.
- To encourage them to use herbs in food.
- To grow herbal species and study their properties and to popularize the concept.
- To study the knowledge content and interest of farmers about herbal gardening.

MATERIALS AND METHODS

The above study was conducted under the aegis of Home Science component of Krishi Vigyan Kendra, Jorhat, Assam Agricultural University. The main objective of the above study was to popularize the concept of herbal garden. Therefore, one demonstration unit with 30 different species was established in the campus of Krishi Vigyan Kendra, Jorhat to make the farmers aware about herbal gardening and knowledge test was conducted for 30 numbers of rural youth representing different villages of Jorhat district who visited the demonstration unit as well as KVK, Jorhat. Knowledge test on different aspects related to the herbal garden was conducted by using specific questionnaire and subsequently data were analysed.

RESULTS AND DISCUSSION

The results obtained from the present investigation as well as relevant discussion have been summarized under following heads :

Tentative expenditure for herbal garden :

Crop : Perennial crop

Total area : 120 sqm.

Results reflect that majority of the respondents (96%) had poor knowledge regarding the uses of herbs. All respondents possessed poor knowledge regarding procedure of adding herbs in daily diet. Similarly 92 per cent respondents showed poor knowledge regarding plantation of herbal plants. Majority of the respondents (88%) showed keen interest to establish an herbal garden at homestead level. But they were perplexed in the establishment of herbal garden as a source of medical tourism to attract tourists. It is vivid from the study that the knowledge content of all respondents regarding all requisite information related to herbal gardening was not adequate.

Conclusion :

Herbal gardens are both resources for generating income for villagers and learning centers for the public. With the changes in world tourism and tourist behaviour, herbal gardens can provide an education to tourists on the vast array of herbal properties. Some kinds of herbs can also be used to cook healthy foods. Tourism and learning centers can conserve local wisdom and make the local inhabitants take pride in their community, especially herbal gardeners. Moreover, tourists can take herbal knowledge home to adapt into their lives. The challenge for herbal gardeners is maintaining gardening standards and providing correct and useful herbal information to tourists. Meanwhile, government organizations that work to develop and promote herbal growing and tourism should integrate value and conservation. Herbal garden development for tourism is a new possibility for tourism because it has the potential to develop a specific identity to serve a new current tourism trend.

Table 1 : The demonstration unit contains the following species

Sr. No.	Names of herbs
1.	Brahmi
2.	White Agiaeita
3.	Mentha
4.	Sarpagandha
5.	Mahabhingaraj
6.	Bisailyakarani
7.	Alovera
8.	Aswagandha
9.	Kasturirandei
10.	Boss
11.	Tarabagari
12.	Satmul
13.	Jamlakhuti
14.	Titabahak
15.	Kalmegh
16.	Harjura
17.	Musandari
18.	Tulsi
19.	Mahaneem
20.	Chitranela
21.	Manimuni (<i>Hydrocotyle sibthorpioides</i>)
22.	Stavia
23.	Durun (<i>Leusas aspera</i>)
24.	Bhedai lata (<i>Paederia foetida</i>)
25.	Madhu-soleng (<i>Polygonum chinense</i>)
26.	Mati-kanduri (<i>Alternanthera sessilis</i>)
27.	Man-dhania (<i>Eryngium foetidum</i>)
28.	Podina (<i>Mentha viridis</i>)
29.	Shukh-loti (<i>Mussaenda roxburghii</i>)
30.	Tengeshi-tenga (<i>Oxalis corniculata</i>)

Table 2 : Expenditure statement

Sr. No.	Particulars	Quantity	Rate (Rs./kg)	Amount (Rs.)
1.	Seedlings	25 x 5	10.00	1250.00
2.	Agro shed net	For 120 sqm	40.00	4800.00
3.	Fencing			
	Bamboo	30	60.00	1800.00
	Wire	2 kg	50.00	100.00
4.	Signboard	1		500.00
5.	Labour cost	15 man day	150.00	2250.00
6.	FYM	100 cft		450.00
	Total			11150.00

(Rupees Eleven thousand one hundred fifty) only

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