



Current Trends in the Popular Sector Traditional Medicine in Sri Lanka

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Abstract: It is well known fact that Sri Lanka was able to produce a unique tradition of knowledge in the field of traditional medicine over the last two thousand five hundred years of its history. The country is placed where its inhabitants were able to develop a traditional medicine-based medical pluralism, comprising Desheeya Chikithsa, Ayurveda, Unani, Siddha, Homeopathy and various other informal traditions to as remedies cure various illnesses. In this paper, I focus on discussing major developments and trends in the popular sector traditional medicine in Sri Lanka at present. They include new trends in the use of traditional medicines as reliefs for minor illnesses, personal health and beautifying items, supplementary food substances and positive health and wellness practices. At present, traditional medicine-related items have become common consumable items among Sri Lanka public as a deterrent to control non-communicable diseases and traditional herbal products are more popular as beatification therapies. In order to minimize the problems that this sector faces, the state can take numerous measures such as strengthening the law to crack down illegal practitioners, register all service providers under the local government's health departments and conduct periodic health campaigns to educate people about the importance of this sector as a way to prevent the etiologies of illnesses and diseases to promote health behavior in the long-run to combat the spared of all types of diseases and to cut down staggering cost of health expenses that people have to face in-day-to-day life.

Keywords: Traditional medicine, popular sector, herbal medicine, non-communicable diseases.

1. INTRODUCTION

Sri Lanka is an island nation, located on the Southern tip off India, with a history of more than two thousand five years of indigenous rule (6th Century B.C. 1505 A.D) and nearly four hundred fifty years of colonial rule by three western colonial rulers, first by the Portuguese, then by the Dutch and finally by the British (1505-1948 A.D.). Sri Lanka population comprises three main ethnic groups, the Sinhalese represent seventy per cent and they are mainly Buddhist and Christian followers; the Tamils consist of fifteen per cent of the population while they practice Hinduism and Christianity; the Muslims comprise ten percent of the population and they are mainly the followers of the Islamic religion and the rest belongs to various small ethnic groups. Sri Lanka as a welfare-based society, the state provides universal health care and free education facilities to all its citizens irrespective of

their socio-economic backgrounds. In addition, the private sector also plays a pivotal role in providing all types of health services to the public to make Sri Lanka a healthy nation.

Since independence, Sri Lanka has been able to maintain a remarkable progress in improving the health status of its population. The recent human development indexes reflect that Sri Lanka has achieved the highest statuses among South Asian countries. The life expectancy of the population of Sri Lanka has been increased from 43 years in 1946 to 80 years in 2018 (81 years for females and 76 for males), maternal mortality in 2018 (6.2 per 1000 live births), infant mortality in 2018 (8.4 per 1000 live births) and literacy rate in 2018 was 92 per cent (Department of Censes, Sri Lanka). Sri Lanka's achievement is even more remarkable when considering its level of income and its low expenditure on health. It spends a total (public and

private) of approximately 4.2 per cent of GDP or US\$57 per capita on health. However, many of its health indicators are comparable to those found in South East Asian countries with income levels two to six times higher, adjusting for purchasing power parity, which spend 1.5 to 10.0 times more on health per capita “Sri Lanka Health Accounts [SLHA] 2017”.

Many argue that Sri Lanka has been able to maintain satisfactory health indicators when compared to other South and South East Asian countries because of various welfare programmes that the Sri Lankan government has introduced over the years to develop health facilities in the country. At the same time, many people are of the view that it is because of western medicine that Sri Lanka has been able to increase health statuses of its people. However, this view is partially correct because it is not only western medicine but also health and medical pluralism that the country has been practicing over millenniums has played a significant role in promoting health of its people. However, this has not been given due recognition by the state and previous researchers and scholars in the field of Sri Lankan health. Sri Lankan medical pluralism comprises multiple therapeutic traditions ranging from Western Medicine, Ayurveda, Siddhayurveda, Unani, Deseeyachikithsha, Acupuncture, Homeopathy, Religion-based medicine, Vedda’s indigenous medicine (Sri Lanka’s indigenous people recognized as the Vedda) occult practices and to numerous home remedies “Abeyrathne [1]”.

Even at present, the majority people in Sri Lanka seek more traditional medicine at time of illness but information or statistics is meager to substantiate this argument because there is no formal practice to maintain records of patients in traditional medicine unlike in western medicine (it should be highlighted that now only in the formalized Ayurveda sector patients’ details are kept at hospitals). The purpose of this paper is to discuss new trends in the popular sector-based traditional medicine in Sri Lanka. In order to contextualize the present analysis, this paper uses the framework that the American Anthropologist Arthur Klienman put forward on the provision of health care services to explain the current trends in the field.

In this framework, he divides health care

services in a modern society into three main parts, namely, the popular sector, the folk sector and the professional sector health services. The popular sector deals with the use of informal sector-based health practices that include western and traditional medicine practices to maintain health. The folk sector focuses on traditional medicine services that people use as health care provision to enhance their health. Finally, the professional sector relates to western medicine that people practice at time of illness “Helman [2]”. However, the present discussion on the new trends in the popular sector traditional medicine begins with a very brief introduction about traditional medicine in Sri Lanka and then focuses on the new trends in the popular sector-based traditional in Sri Lanka. They include new trends in the use of traditional medicine as reliefs for minor illnesses, personal health and beautifying items, supplementary food substances and positive health and wellness practices.

2. TRADITIONAL MEDICINE IN SRI LANKA

According to the World Health Organization (WHO), traditional medicine refers to health practices, approaches, knowledge and beliefs incorporating plant, animal and mineral based medicines, spiritual therapies, manual techniques and exercises, applied singularly or in combination to treat, diagnose and prevent illnesses or maintain well-being. Further the term complementary and alternative medicine (and sometimes also non-conventional or parallel) are used to refer to a broad set of healthcare practices that are not part of country’s own tradition, or not integrated into the dominant healthcare system.

As mentioned earlier, Sri Lanka provides free and universal health care coverage for all its citizens irrespective of their all socio-economic differences. Sri Lanka’s health care service consists of five main sectors: the government funded western medical sector; the government supported Ayurveda sector (traditional medicine); the privately run western medicine sector; the privately financed Ayurveda (traditional medicine sector; and what is often referred to as the privately run ‘other sector’ ”Simeonov [3]”. There are number of synonyms that scholars and researchers in this field use to refer to traditional medicine and they range from native medicine, indigenous medicine, complementary

medicine, supplementary medicine, aboriginal medicine, local medicine and traditional medicine. However, the term ‘indigenous’ to describe all varieties of traditional medicine in Sri Lanka- they do not differentiate local health traditions, known as the Deseeya Chikithsa (indigenous medicine), from other practices in the island.

Therefore, this study uses the term traditional medicine, which includes traditions ranging from Deseeya Chikithsa, Ayurveda, Siddhayurveda, Unani, Acupuncture, Homeopathy, and to various other local practices (this study reveals that the Sri Lankan government uses TM, Indigenous Medicine, and Ayurveda interchangeably. Such terms are embedded in the names of institutions and roles, such as, the Department of Ayurveda, Ayurveda Hospital, Ayurveda College, Commissioner of Ayurveda, Ayurveda Pharmaceutical Corporation, Ministry of Indigenous Medicine, and the National Institute of Traditional Medicine).

However, it should be mentioned that the Sri Lanka government uses the term Ayurveda to refer to all types of traditional medicine practiced in all parts of the country. Based on my own study findings of the subject, it is more rational, logical and scientific to use the term traditional medicine because Ayurveda is one type of traditional medicine used in the northern part of India. Nevertheless, the term, traditional medicine includes all types of local medical traditions irrespective of any cultural difference exists among them.

The early medical history of Sri Lanka is abound in legends, according to which the demon king Ravana, the prehistoric ruler of the island, was said to have been a versatile medical practitioner (he is believed to have hailed from a family specializing in folk medicine)“Kumarasignhe [4]”. It was said that his grandfather, Pulasthi Rishi, represented Sri Lanka at a Bharatha Irshi (Bharatha sage) medical conference, held in the Himalayas. According to the Lanka version of Ramayana, the Indian epic, Ravana himself allegedly participated at the conference. In addition, Ravana is believed to be the author of medical manuscripts, namely, *Arkaprakasaya*, *Nagavignanaya*, *Kumarathatraya*, and *Udishasasthaya* “Uragada [5]”.

The written history of TM in Sri Lanka goes

back to the sixth century B.C. The strategic location of the country, at the nexus of crucial maritime routes in the middle of the Indian Ocean connecting Europe, the Middle East and China to the rest of Asia, made it a focal point of population migration and trade. Diverse ethnic, linguistic, and religious groups arrived in the island and contributed to the development of TM pluralism “Hettige [6]”. Infused with knowledge from India, Arabia, and China, Sri Lanka’s diverse traditional medicine comprises the following formally and informally recognized and informal traditions: Vedda medicine, *Deseeya chikithsa*, Buddhist practices, Ayurveda, Siddha, Unani, Acupuncture, Homeopathy, and various other local practices.

In pre-colonial Sri Lanka, starting 6 B.C and ending 1815 A.D. all monarchs considered that it was obligatory for them to care for the sick and encouraged the study of medicine as well as the building of hospitals. Medicine was an esteemed profession practiced under royal patronage and some of the ancient kings were well known physicians. There was a well-known saying among the Sinhalese that “if a person were not able to become a king he should become a physician”. All available ancient medicine- related literary sources, inscriptional and other archaeological information indicate that there was a well-developed and sophisticated traditional medical system providing health care services to its citizens in ancient Sri Lanka society. For instance, the concept of hospital where a number of patients could be collectively housed in special centers with the attendant advantages to the sick was recognized as early as the fourth century BC during the reign of King Pandukabhaya (294 - 307 AD). The existence of the first hospital in the city of Mihintale on a ninth century BC site, described as being perhaps the oldest hospital in the world as shown in the Figure 1 & 2, has been verified archeologically “Uragoda [7]”.

However, in his book, *A History of Medicine in Sri Lanka*, U. C. Uragoda argues that with the arrival of western colonial rulers, traditional medicine lost the state patronage that it received under the ancient Sinhalese kings. Anyway, as a result of the ongoing nationalist activities, the British later decided to provide state financial support and legitimacy to traditional medicine. Since independence in 1948, all successive governments that came to power



Fig. 1. The ruins of ancient hospital at Mihinthale, Anuradhapura



Fig. 2. The medical trough at the ancient Mihinthale hospital

took important initiatives to promote traditional medicine as one of the main streams of medicine to provide free and quality health care service to all its citizens. In the 1990s, Sri Lanka established a separate cabinet level ministry for the development of traditional medicine and it was the first time in the world that a separate ministry was formed to enhance traditional medicine in a nation state.

At present, government and private sectors involve in providing traditional medicine services at small, medium and large scales to enhance people's curative, preventive, rehabilitative and promotive aspects of health to build a healthy nation. There are nine integrated health ministries, including the national and provincial council government ministries to promote traditional medicine along with western medicine to enhance people's health.

Sri Lanka has three state funded university level traditional medicine colleges to provide education both at undergraduate and graduate levels and annually state run traditional hospitals absorbed them into state run hospitals located in all parts of the country. In addition, there are some formally and informally run state and privately funded small traditional medical colleges located in many parts of the country to provide education and to train paramedical professionals to work in traditional medicine-related allied health centers. Now traditional medicine and western medicine works side-by-side in tandem in all parts of the country even while facing a fierce competition and integration between the two systems of medicine.

3. TRENDS IN THE POPULAR SECTOR TRADITIONAL MEDICINE

When observing Sri Lankan people's health seeking behavior, it indicates that there is a remarkable growth in the use of traditional medicine in the popular sector-related health care service when compared to the past. According to the American anthropologist, Arthur Klienman the popular sector medicine involves all therapeutic options that people use without any payment and without consulting medical practitioners. Among these options include self-treatment or self-medication, advice or treatment given by parents, a relative, a family member, a friend, para-medics and neighbour or worker. In addition, the popular sector medicine involves in providing health maintenance practices to prevent ill health in families and communities. They include the beliefs about dress, food, drink and religious prayers. This sector depends on informally trained individuals as service providers and sometimes today's patient becoming tomorrow's healer. However, the growing new trends in this sector witnesses that the use of modern technologies have transformed some of its traditional practices to be more efficient, efficacious and professional to cater to modern demand.

In the past, it was a custom for Sri Lankan people to grow day-to-day needed medicinal items in their homesteads so that it would help them use when they needed to use them because they considered frequently used medicinal material food items and food items medicine. However, with the advancement of technology, both state and private sector health care producers in Sri Lanka produce traditional medicine items in multiple forms for easy use for all age groups. They range from alepa (external applications), arista (fermented preparations made out decoctions), asava (fermented preparations made out of material), guli (pills), kalka (paste), modaka (sweet-based large bolus), nethra bindi (eye drops), thel (oil), swarasa (juice), curna, (powder), gruta, (oily paste), mallum (heated mixture of medicine material), basma, (ashes), basna, (keeping in medicinal water) and kenda (medicinal gruel). These varieties are easily accessible to people at traditional medicine pharmacies, super markets and sometimes at treatment centers throughout the country as over the counter medicinal items.

As mentioned earlier, the following discussion is focused on the new trends in the use of the popular sector-based traditional medicine by people from all walks of Sri Lanka society for enhancing various aspects of their health. Thus, the most commonly used practices include using traditional medicine as reliefs for minor illnesses, improving personal health and beautifying purposes, taking as supplementary food substances and practicing them as positive health and wellness practices.

4. POPULAR SECTOR MEDICINE FOR MINOR ILLNESSES

It is a usual practice in Sri Lanka that people maintain a mini-pharmacy with both western and traditional medicine drugs in their homes to use them as basic precautions for minor illnesses until they consult western or traditional medicine experts if required irrespective of their socio-economic backgrounds. The range of minor illnesses comprises cold, early childhood diseases, early pregnancy related ailments, fever, stomachache, tonsil, headache, toothache, diarrhea and joint pains, pimples, menstruation pains, arthritis, gastritis and various other minor diseases. Sometimes, people use traditional medicine simultaneously with western medicine as well.

As in other societies, women, mothers and grandparents in Sri Lanka also play a significant role in recognizing diseases and illnesses and providing health care services to affected members of the family and community. Sometimes, those who have suffered previously from similar symptoms, those with extensive life experience like giving birth to children, paramedical professionals and husbands and wives of traditional medical practitioners also function as resource persons to provide basic health advice to overcome minor illnesses in this sector. For instance, young pregnant women with less experience in delivering babies seek advice from their mothers and other senior women the types of symptoms that they should expect and how to deal with them.

The most commonly used such brands are produced by well-known companies, such as, Siddhalepa, Link Natural, State Ayurveda Pharmaceutical Corporation, Vendol, Nature Secret

and many other state and private companies. In addition, people in Sri Lanka still use local home remedies to cure minor illnesses and they collect required material from nearby surroundings, from home gardens or from traditional medicine pharmacies located in many parts of the country. At present, Sri Lankan people use more Indian Ayurveda products as basic remedies to cure minor illnesses and annually both local and Indian pharmaceutical companies organize promotional trade exhibitions, workshop and conferences to increase public awareness of traditional medicine. The promoters of traditional medicinal items use both electronic and print media facilities belonging to state and private sectors to popularize their products through regular advertisements, discussion, interviews and documentary programmes. Some companies have wide local and foreign clientele to purchase their products from Sri Lanka and sometime they have trade outlets in some foreign countries as well. For example, privately owned Sri Lankan traditional medicine pharmaceutical companies annually export large amount of health items to North American and European countries.

5. POPULAR SECTOR MEDICINE AND PERSONAL BEAUTY PRODUCTS

Unlike in the past, at present, both Sri Lankan men and women use more traditional medicine products for beautification and personal health and hygiene purposes. Especially, traditional medicine is more popular than western items because the former is regarded as more natural while the latter is considered artificial and causes more side-effects. There is a growing market for beautifying products in the country and people use both locally and internationally produced traditional medicine items for daily and special social occasions-related events. Thus, various local and foreign produced medicinal items are readily available at super markets, regular saloons, both traditional and western pharmacies and at beauty parlors located island-wide. Traditional medicine beauty products are used as baby care, oral care, skin care, body care and skin care. Both men and women use them on daily basis and at special occasions like weddings, graduation ceremonies, parties and other social events.

All beauty products range from powder, cream, oil, soap, die, paste, tablet, drinks, tablets, pills and

to face wash liquid. Similar to popular medicine products, large number of state and private sector companies currently engage in producing beauty products for both local and international markets and they use electronic and print media facilities to promote their products in competitive ways. At present, a significant number of women maintain traditional medicine-based beauty salons or parlors as self-employed entrepreneur business ventures in many parts of the country.

As far as traditional medicine-based personal and beauty products are concerned, the private sector plays a pivotal role when compared to the state sector. The main reasons are that the former invests funds heavily in research, technology, training, both print and electronic media, organizing local and international conferences to update knowledge and modifying traditional medicine products to match modern day needs. Many companies employ well trained scientists with foreign and local university qualifications to improve the quality of health products and maintain international standards to face any competition from other countries. Some of them even conduct joint business ventures with other countries like Germany, Japan and India to absorb updated technology and other innovative good practices in the field to popularize their health producers.

It is a usual practice for companies that produce traditional medicine items to grow and maintain herbal gardens on their own to supply raw material to minimize the cost of productions and improve the quality of their productions. However, some companies provide subsidies to farmers to grow some rare herbal plants as a livelihood and sometimes they buy some products from private farmers to use them in their own factories. On the other hand, this way they help farmers earn extra income in addition to their main other earnings. Such initiatives help companies also save money from importing material mainly from India.

The commonly grown species range from inguru (*Zingiber officinale*), katuwelbatu (*Solanum virginianum*), komarika (*Aloe barbedensis*) and to pawatta (*Justicia adhatoda*). For example, the Forever personal and Ayurveda beauty producing company organizes such farmer community-related herbal gardening programme at the Kandy export

zone and the same company has established a branch in Australia to promote traditional medicine herbal products. Similarly, the Ministry of Indigenous Medicine of Sri Lanka introduced a very similar programme in 2005, it is known as the Herbal Farmer Village (Osu Govi Gammana). Under this project, the farmers sell their products either to the State Ayurveda Pharmaceutical Manufacturing Corporation or provincial council governments to run such facilities to earn their living. At present, there is a growing trend for the state and the private sectors to organize traditional medicine trade fairs, conferences and health promotional campaigns jointly to popularize traditional medicine in the country.

6. POPULAR SECTOR MEDICINE AND FOOD BEHAVIOUR

If diet is wrong, then medicine is of no use. If diet is correct then medicine is of no need. Let the correct food to be your medicine. This is the traditional belief in food behavior in Sri Lanka. When observing people's day-to-day food behavioral practices, one can observe that there has been a growing trend at present among all ethnic groups that they are more conscious about their food consumption patterns than in the past. It has been a long tradition in Sri Lanka that people used traditional medicine-based food items as supplementary dietary items to maintain healthy lifestyle for millenniums. It is well known that people in ancient Sri Lankan society considered some traditional medicinal items food and food items medicine for a healthy living. This belief became more popular in the wake of the unprecedented spread of non-communicable diseases, such as, diabetes, cholesterol, cancer and high blood pressure among a significant percentage of its population. Especially, people who live in urban areas tend to give up unhealthy modern dietary practices and embrace traditional food items to stay healthy.

The people in Sri Lanka grow traditional medicine items as organic items at state, private sector's and privately owned lands and distribute them to island-wide established food processing companies to prepare them. These food items are manufactured by using modern technology and they are sold as drink, tea, bread, rice, curry, soup, biscuits, medicinal gruel at traditional and modern

medicine pharmacies, state and private food outlets, health food stores, restaurants, super markets, tourist hotels and community markets throughout the country. However, some people prepare them at home by using ingredients collecting from their homesteads and buying from traditional medicine outlets. In order to promote these items people widely use social media, other types of print and electronic media and periodic health promotional campaigns, such as, health campaign on the World Diabetes Day in many parts of the country. In addition to local markets, there are wider trade networks to promote these food items especially among Sri Lankan clientele living in many other countries in the world.

Recently, the state agriculture department took an initiative to promote traditional medicine food outlets in many parts of the country as a measure to control the spread of non-communicable diseases among a significant percentage of population in the country. As a result, now there is a shift among people to move away from unhealthy modern dietary practices and return to thousands of years old indigenous food practices to lower the spread of threatening non-communicable diseases. Similarly, the chains of these food places have directly and indirectly benefited women, farmers and other service providers to secure employment opportunities in running these places.

In addition, food outlets located at public places like schools, hospitals and other places, service providers are discouraged from selling unhealthy food items and artificial drinks. But, instead, they are recommended to provide healthier natural food items. For example, parents are required to provide more grain items, vegetables, green leaves, fruits and other fiber substances for their children's daily school food packages as a way to combat the spread of non-communicable diseases among school children. It should be highlighted that those who suffer from non-communicable diseases consume these dietary items as supplementary medicine as a way to control them even while taking western medicine simultaneously. For instance, the Sambodhi Buddhist temple in Colombo conducts weekly traditional medicine-based food programme known as, the Hela Suwaya medicinal gruel programme and it tests whether traditional medicine practices could be applicable to lower diabetes

patients' insulin dependency. It was conducted together with western medical practitioners to test the efficacy of such practices and the results of the test indicated that some patients with diabetes have become totally free from insulin dependency.

7. POPULAR SECTOR MEDICINE AND HEALTH AND WELLNESS PRACTICES

In addition to the above-mentioned health practices, Sri Lankans use popular sector medical practices as allied forms of health knowledge as wellness techniques to improve personal, family and community health. Wellness means a way of life and living in which one is always exploring, searching, finding ways to lead healthy living to keep the balance among three primary dimensions of health. They include the physical, the mental and the social dimensions related to health to achieve holistic fulfillment in human life. Some of the commonly used wellness practices consist of yoga, tai-chi, qigong, karate, judo, tykondo and various forms of meditations, breathing techniques, massage techniques at traditional clinics, traditional medicine resorts and traditional medicine spas. In addition, religion-based healing rituals, religious retreats, religious prayers other forms of practices include in the popular sector medicine as well. Although, these are not purely medical systems but they have been adapted as health applications and contribute to health sector immensely in many countries.

Among the above-mentioned long list of wellness- related popular sector- based traditional medicine practices, the most frequently used two techniques in Sri Lanka, namely, religious retreats and traditional medicine-related therapeutic techniques will be discussed at length in the following section, considering the uniquenesses of the two practices. As far as religion is concerned, Sri Lanka is a unique place because it is a meeting place for four main world religions, Buddhism (main religion), Hinduism, Islam, and Christianity. People practice them harmoniously side-by-side within a very limited geographical proximity. Sri Lanka is the only one country in the world where all regions' holy days are recognized as public holidays for people to engage in spiritual activities and to promote psychological and social aspects of health.

All full moon days are holydays for Buddhists, three for Hindus, three for Muslims, and two for Christians. Nevertheless, all holydays are holidays for all religious practitioners.

All religious followers have daily religious ritual that they practice either at home or designated religious places to maintain balanced health among physical, social, biological and spiritual aspects of health. Except Buddhists, all other religious groups have short retreat sessions during religious holy periods. However, Buddhists practice extensive retreats through organized and institutional manner at various Buddhist temples, hermitages and public places on short-term and long-term basis for both local and foreign Buddhist and non-Buddhist followers. As an island-nation, Sri Lanka is a well-known destination with exotic beaches as well as a rich cultural heritage, mainly Buddhist. The traditional tourism offer multiple opportunities from beach tourism to eco-tourism, adventure/wild-life and to religious experiences.

Thus, large numbers of foreign tourists, especially, from western countries visit Sri Lanka throughout the year to participate in meditation or retreat programmes at various places in the country. Some forest hermitages and meditation centers offer well organized residential retreat programmes to foreigners and local Buddhists in many parts of the country. These religious groups believe that Buddhist meditation practices help them find solutions for various etiologies of illnesses and diseases, such as, stress, anxiety, suicide, mental disorders and non-communicable diseases created by modern artificial and hectic lifestyles. For instance, research findings on high blood pressure-related studies conducted in many countries prove that Buddhist meditation positively affects to reduce drug dependency among such patients.

In addition, business executives in many successful companies worldwide highly praise that Buddhist medication has been the driving force behind their success because it has helped them cultivate right concentration for attending to all matters pertaining to running their business organizations. Even the British Royal family has professionally employed a Sri Lanka Buddhist meditation teacher to advise them on enhancing mental health of its members irrespective of them

being the leading custodians of the Anglican Church in the Great Britain. Not only the Great Britain, but many western countries use Buddhist meditation practices as one of the most common wellness programmes to restore mental health.

Moreover, Sri Lankan people use traditional medicine practices to enhance their personal, family and community health. At present, such places function in multiple forms, namely, Ayurveda clinics, Ayurveda resorts and Ayurveda spa. These places are run by professional trained traditional medicine expert with university qualifications, those who engage in this profession from family inheritance and those who have training in traditional medicine therapeutic practices. Mostly, the private sector provides wellness services to both local and foreign clients who seek help from these places for various ailments, such as, arthritis, back pain, paralysis condition, joint pains, weight loss and stress. Some places specialize in providing services to women. Women practitioners, therapeutic assistants, or male or female masseuses run these places. Treatment methods include *alepa* (external applications), *arista* (fermented preparations made out decoctions), *asava* (fermented preparations made out of material), *guli* (pills), *kalka* (paste), *modaka* (sweet-based large bolus), *nethra bindi* (eye drops), *thel* (oil), *swarasa* (juice), *curna*, (powder), *gruta*, (oily paste), *mallum* (heated mixture of medicine material), *basma*, (ashes), *basna*, (keeping in medicinal water), *kenda* (medicinal gruel) *sambahana* (massage), *Vaspha snana* (steam bath).

It should be highlighted that popular sector-based wellness programmes are very much associated with respect to medical/wellness tourism, as in other countries, there is no official statistic on how many of the tourist arrivals are in Sri Lanka for the purpose of health related tourism, but anecdotal evidence points to an increasing number of foreign patients coming to Sri Lanka for treatment. The cost of medical treatment, even including travel and accommodation, is on average, 50% cheaper than developed countries. Large numbers of holidaymakers come to Sri Lanka for the purpose of staying in resorts that offer ayurvedic spa and treatment. Ayurveda is already advertised in the Sri Lankan official tourism website.

Almost all tourist hotels located in all parts

of the country, whether they be large or medium level business ventures, maintain Ayurveda resorts and spas as an integrated part of their business to run them as profitable ventures. However, some small tourist hotels specialize in providing medical tourism-related services only to selected foreign clientele. The most well-known Ayurveda resorts and spas are located along the southern coastal belt. At these places, the most popular wellness service is the provision of Ayurveda panchakarma treatments to both local and foreign tourist groups. Panchakarma is the purification therapy used in Ayurvedic medicine. The word panchakarma means five actions and refers to five procedures intended to intensively cleanse and restore balance to the body, mind, and emotions. The five procedures include *vamana* (therapeutic vomiting or emesis), *virechana* (purgation), *vasti* (therapeutic enema), *nasna* (elimination of toxins through the nose and *raktamokshana* (bloodletting). The panchakarma process reflects the influence of Indian Ayurveda on Sri Lanka traditional medicine.

8. DISCUSSION

The details in the above discussion witness that the popular sector traditional medicine in Sri Lanka has undergone significant transformations in the recent time and in general they have impacted positively on the enhancement of people's health in the country. However, everyday newspapers and other electronic media provide information about the ignorance of the use of some medicinal items, abuses of the system by various groups merely for making more financial gains. Those who use traditional medicine as reliefs for minor illnesses, sometimes over use them until patient develop into critical conditions rather than taking them to more professional sectors to save their lives. Especially, mothers often depend on home remedies for treating their children's minor diseases and illnesses and face negative consequences because they postpone taking them to more qualified health care providers to save their lives from danger.

The other challenge that this sector faces is that some individuals and companies produce inferior products by using low quality material merely for making financial gains and they negatively affect people's health. Especially, such products are common in medicine, food products, personal

wellness-related products, beauty related health goods and tourism-related health products. There is a reckless competition among various companies that manufacture various traditional medicine-related products for making more profits by using all modern market strategies. Some companies use western medicinal substances with traditional medicine to improve the efficacy of their products.

Moreover, some service providers in this sector do not fulfill all required qualifications to practice the popular sector-based traditional medicine because daily all types of media report cases reported about illegal practitioners providing low quality services and putting people's lives in hazardous situations. In Sri Lanka, there is abundance of distorted and misleading information relating to traditional medicine in daily and weekend newspapers, electronic media and social media programs to promote it. However, some of them tend to misinform the public and eventually they exploit those who seek their help find solutions to various problems that they face. Such illegal and disqualified practitioners are common in beauty and wellness-related field and those who provide service using various religio-magical teachings in many parts of the country. For instance, there were numerous incidents in the recent past that some men and women became disfigured and they developed side-effects due to severe chemical reactions developed from the substances that they used for beautifying purposes. Sometimes, few men and women lost their lives at illegally established places run by disqualified people.

9. CONCLUSION

The popular sector-based traditional medicine contributes to improve all aspects of health of the people of Sri Lanka and minimize health expenditures in the wake of skyrocketing cost of health expenses in all modern societies. The uses of such practices have become more popular as basic remedies to control the spread of non-communicable diseases in the country. Traditionally these informally used medicinal items were looked down upon as rural poor and less-prestigious people's health habits. However, at present, people from walks of society in Sri Lanka use them as a part of their primary health care practice irrespective of the fact that they come from estate, rural and urban social backgrounds.

In addition, this sector directly and indirectly contributes considerably to provide employment opportunities to millions of people in the country irrespective of abuses by some segments of the service providers as highlighted earlier in the current discussion. Similarly, it helps people reduce their health expenditures significantly because some of the medicinal items are cheaper when compared to western medicine-related items. Not only those benefits but it assists Sri Lanka to get easy flow of new technology into the country to promote the quality of its products to compete with other drugs producing countries.

Finally, in order to minimize the problems that this sector faces, the state can take numerous measures such as strengthening the law to crack down illegal practitioners, register all service providers under local governments' health departments and conduct periodic health campaigns to educate people about the importance of this sector as a way to prevent the etiologies of illnesses and diseases to promote health behavior in the long-run to combat the spread of all types of diseases and to cut down staggering cost of health expenses that people have to face in-day-to-day life.

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