Recently the *Kalarippayattu* Federation of India in association with *Wayanadu Kayikabhyasa Kalari Sanghom* initiated a ‘rejuvenation’ of the centuries-old tradition of *kalarippayattu*. They introduced a new dress code similar to that of boxing matches, which included head guard, chest guard, knee cap and punch gloves (See Figure 3). The basic tenets of *kalar* performance emphasize defences that block the attacks without hurting the other. Attacks on *marmam* or other body parts are meant only for real fights in public, which do not have any relevance today. The introduction of new attire while attracting public gaze, devalues the remaining internal perspective of an embodied practice. The present day *kalarippayattu* augments the element of exercise in shaping the body and becomes a performing art rather than a real martial art. The new attire and protection guards do not add to the essence of a bodily art in which the whole responsibility to defend is invested with the body of the practitioner. The body plans the defences and/or counter attacks quickly (Zarrilli 1998, Vijayakumar 2000). The emphasis here is not to uphold the ‘pure essence’ of a practice, but on what is being lost within a practice when defining what is valuable in it. The protection guards become a hindrance to the free movement and flexibility of the body. By the twentieth century, the performative elements within *kalar* had been picked out and projected as the ‘actual’ *kalarippayattu* of Keralam. The secretary of *Wayanadu Kayikabhyasa Kalari Sanghom* claimed that *kalarippayattu* can be

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1 The Hindu, Manoj E.M, October 03, 2015, 4. “When *Kalaripayattu* dons new attire”.
learned easily compared to many other martial arts such as karate and kung fu.\textsuperscript{2} If that is the case, then why do we need protective equipments to learn this art? How can one think about the idea of ‘care of the self’ inherent in the practice in its embodied nature? The divided and projected elements of the practice has to be normalized through a discursive field constituted by diverse areas of sports, exercise, modified and beautified tools and attire, stage performance, membership in associations, approval from governmental and non-governmental agencies, etc. Once the practices are separated as centre and margin, such as \textit{kalarippayattu} and vital spot massaging, ayurveda and \textit{nattuvaidyam}, the subsequent attempt is to normalize the amenable core practice through institutions, policies, capital and governance. In rare cases, what is valuable in the marginalized practices are utilized with its tremendous potential. An example to point out is the commercial utilization of \textit{Arogyapacha (Trichopus zeylanicus Travancoricus)}, an endangered medicinal plant in the Western Ghats, known as a wonder herb because of its rejuvenating qualities. The scientists of the Jawaharlal Nehru Tropical Botanical Garden and Research Institute (JNTBGRI) developed a compound drug, \textit{Jeevani} with this herb, by utilizing the traditional knowledge of the \textit{Kani} communities. The medicine is known for its immunity enhancing, anti-fatigue, liver protective and DNA-protective properties. JNTBGRI transferred the technology to produce \textit{Jeevani} to Arya Vaidya Pharmacy (AVP), Coimbatore and it was sold through the outlets of the pharmacy from 1995 onwards. The royalty from the annual turnover of the sales of the medicine was shared between the JNTBGRI and \textit{Kani} Welfare Trust.\textsuperscript{3}

\textsuperscript{2} Ibid.  
\textsuperscript{3} The Hindu, Nandakumar, T, October 03, 2015, 7. “\textit{Jeevani to fetch benefits for Kani tribe}.” The AVP withdrew from the project in 2008 and recently a four party agreement between Oushadhi,
When the collection and production of the herb was commercialized, new agencies intervened in policing, controlling and manipulating the field of business. The Forest law permits Kanis to collect only minor forest produce, which do not consist of the endangered species Arogyapacha. When the collection of the herb had started on a commercial basis, the law intervened and criminal charges were laid against the gatherers of the community. Parallel to this, other smuggling traders came into the scene to sell the herb in bulk. Besides, the community as a whole did not enjoy the benefit of their knowledge transfer as it is limited to a few members of the Kani Welfare Trust. Eventually AVP withdrew from the contract in 2008 as there was scarcity of supply and they were forced to buy the herb from Tamil Nadu. Thus a community knowledge transfer project in producing a commercial medicine ended up in benefiting a few members of the community, inviting the intervention of the Forest law to regulate the community members, and bringing in new traders who were well-versed in the commercial market. A number of players who had been “positioned unequally, in their renegotiation of knowledge and power” (Prakash 1999) entered the scene for sharing benefits amongst them, which indeed lasted for a few years, but ended up generating the inherent tensions of trust, access, power and knowledge.

A community which did not get ‘educated enough’ to share their knowledge with an institution; an institution with the good intention of innovating a product from the community knowledge; a pharmacy that was ready to manufacture and sell

JNTBGRI, Forest Development Agency and Keralam Kani Welfare Trust was conceived. The project is seen as a global model for access and benefit sharing.

*Kanis* eat the fruit of *Arogyapacha* to remain energetic, especially when they work in the forest on an empty stomach. (Suchitra 2012, Down to Earth, October 15, *The Kani Learning*).

the medicine commercially, but could not procure enough herb; all these players entwined in such a way that the empowerment of certain groups in terms of knowledge, power and resources did not help in empowering the others. Mere knowledge of herbs at hand is not enough to assert the uniqueness of that knowledge. Assuring the rights, resources and knowledge of a community ended up in benefiting a few individuals within the community and bringing in new commercial players outside the community. In other words, the impediment of the state agencies in assuring community rights ended up in benefitting individual rights of a few. However, recently a four-party agreement between Oushadhi, JNTBGRI, Forest Development Agency and Keralam Kani Welfare Trust was conceived to produce and sell *Jeevani*.

The project is now seen as a global model for access and benefit sharing amongst multiple stakeholders.

While some of the marginalized knowledge is taken into the market as endangered species, the practice that is elevated as the indigenous medical tradition of India, attempted to make global claims in the process of enhancing its truth carrying capacity and quality in service. This is not only through the selling of medicines and products including cosmetics, but also by conducting Global Ayurveda, Festival (GAF) and constituting international centres for research, treatment and manufacturing products. The third GAF held at Kozhikode in 2016 January is said to be the largest biennial get together of the ayurveda fraternity.

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5 The Hindu, Saturday, October 03, 2015, 7. “*Jeevani to fetch benefits for Kani tribe.*”

6 The Hindu, Sunday, October 04, 2015, 3. “*Kozhikode to host Global Ayurveda Fete.*” The festival organizers consist of a range of firms and institutions such as Centre for Innovation in Science and Social Action, Government of Kerala, Ministry of AYUSH- Government of India, Ayurveda Medical Association of India, Ayurveda Hospital Management Association, Ayurveda Drug Manufacturers Association, Ayurvedic Medicine Manufactures Organization of India and Kerela State Indian System of Medicine Self-Financing Management Association. The international partners of the festival are Associations of Ayurvedic Professionals of North America; Ayurveda Association of South East Asia, Manila; INDO SWISS Ayurveda Foundation; AGNEYA, Argentina; Ayurveda Russian Indian Association; AyurVida, Chile; Malaysian
An Arogya Expo is planned as part of the GAF and 5000 delegates from 50 countries are expected to participate in the conclave. The GAF 2016 also planned to conduct a fortnight long Grand Keralam Ayurveda Fair in all the 14 districts of the state, as a prelude to the festival and for ensuring the participation of local ayurveda institutions. They also conducted Road Shows, exhibition of local health traditions, public awareness programmes, medicinal camps, medicinal tree planting programmes apart from the usual seminars and workshops. Where would the local health traditions be positioned in this festival is a relevant question. Apart from the spectacle of the festival, whether their contribution in shaping ayurveda as a unique indigenous tradition is ever going to be acknowledged is still questionable. However, bringing them onto the stage with a label of the fringe as ‘local’ health tradition, also contributes to visibilizing their relevance as parallel medical practices. When museumizing reduces the everyday contribution of a practice, it enhances the valuable essence of a practice as something to be celebrated. The Ayurveda Paramparya Vaidya Federation expressed their protest in excluding them from the GAF. They further stated that a nattuvaidyan, who had won a patent for a medicine to prevent rabies, was not invited to the GAF. The interrelation of the local and the global that is played out through exhibitions in the contemporary period has precedents in the twentieth century. There, the intra-relation of ayurvedas, under the umbrella concept of nattuvaidyam, and the mutual sharing amongst them had been

Association of Traditional Indian Medicine; Ayurveda Practitioners Association, Singapore; Ayurveda College, Rotterdam, Netherlands; International Ayurveda Medical Association, Barcelona, Spain; Maldivian Traditional Medicine Practitioner Association and Srilankan Traditional Medicine Preservation Foundation. See http://www.gaf.co.in accessed on 28.01.16.  
7 Ibid.,”Ayurveda fair to be held in all districts.” Also see http://www.gaf.co.in accessed on 28.01.16.  
8 Ibid. 
9 The Hindu, Monday, February 08, 2016. “Ayurveda Practitioners Register Protest.”  
10 Ibid.
undermined through the production of the ayurveda as the indigenous healing tradition of India and separating all other practices as nattuvaidyam. This transformation had happened through a series of interconnections that were made historical through the course of time.