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SCHUMACHER LECTURES 1979
Giving Energy

Joanna Rogers Macy

It does not require oil, gas, coal or nukes; it empowers people not machines; it is shramadana. Literally meaning the giving (dana) of human energy (shrama), this source of power is widely used in rural Sri Lanka. In more than two thousand villages over the past twenty-two years that is how roads have been built, irrigation canals dug, markets and meeting halls erected. Note the name: neither the purchase of energy through tariffs, taxes, tolls, nor the forced conscription of human labour, shramadana is rather its free gift — dana denoting both gift and the virtue of generosity, itself, the supreme and most meritorious 'perfection' in the ancient Buddhist tradition of this land.

OVER THE CENTURIES the notion of dana has become largely identified with giving to the Sangha or order of Buddhist monks. It was almost forgotten that, long before the colonial rulers came with their Western ways, the great irrigators were Buddhist monks. It was almost forgotten, however, as a glory of the past that could be reappropriated, when the mid-60s the government conducted some shramadana campaigns proved so effective. As you collaborate to lever up some roots, you may find yourself in a team with someone you hadn't known. You may be from the other side of the village and from a caste different from yours. But you work together now, learning to know and trust each other's strength; and, as you heard done in the 'family gathering' and as you were urged there to do, you call him mulli, brother.

Shramadana campaigns proved so effective in organizing villagers, that in the mid-60's the government conducted some of its own. It even briefly formed an office of National Shramadana Service. According to Sarvodayans, they were not very successful. Those camps, they say, lacked both discipline and laughter; people did not sing together or call each other brother and sister, or begin to take charge of their own work. When the project is one the villagers want — and know they must, having chosen it, additional rewards can be unnecessary, and even counterproductive. The two-mile road that will connect the village of Jambureliya to the Colombo road means an hour's less walk to buses and schools, two hours less wait when a doctor must be fetched. That meaning can be present in each handful of dirt — along with pride in the doing of it and gratitude for each other.

Last Sunday's shramadana in the hill town of Avissawella was one of a series to clean and beautify the grounds of the district hospital — or with the tea that goes the rounds. Except for the dirt or carry the kettle of hot sweet elephant borrowed on the first Sunday to be held, decided to leave and seek elsewhere to settle. Now, after the village's first shramadana, she and her family choose to stay. They have friends now, she tells me, and it is a better place to be. After shramadana in the village of Galapiti madama, the young people now draw lots each week to select the house where they will work together — fixing the well or repairing the roof.

Any day, any week, there will be several dozen of us — middle-aged folk, 50 or so — working together, under a canopy of mango trees, under the sun, working on the grass-root level — a vitality which springs from shramadana and which money cannot buy.

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A couple of dozen multinational companies dominate the world's commercial drug production — an industry that is worth more than $50 thousand million a year. But, perhaps inevitably, the industry produces what is profitable, not what is needed. A quarter of the world's population is exposed to tropical diseases and more than half of those suffer from debilitation diseases. But they are too poor either to buy the drugs to combat the disease or to improve their living conditions to reduce the risk of infection. They do not represent "effective demand" in the world marketplace.

Multinational drug companies mount aggressive sales campaigns in both First and Third World to sell, over-priced — and often little needed — drugs. Doctors are bombarded by salesmen and their literature — the US drug firms spend three times as much on sales promotion as on research. Hoffman-La Roche quoted Sri Lanka a price for valium that was 70 times the price charged by an Indian company. Tetracyclin antibiotics were being sold in India, Pakistan and Colombia for four to ten times their price in Europe.

Five United Nations Agencies are now working together with Third World nations to end "drug colonialism". The first step is for each nation to prepare a list of basic drugs that will address the most important health problems — in India, just 116 drugs, less than one percent of the branded drugs on sale there, could meet basic drug needs. The second is to buy them in bulk and buy and sell them under their generic name (eg aspirin) not their branded name (eg Aspro). The third is to encourage local drug production including an assessment of the role traditional, locally grown drugs and herbs can play in meeting basic health needs. Although no national programme to improve health will achieve much without addressing such vitally related questions as the causes of malnutrition and poverty, this concerted move by UN Agencies and some Third World nations is an encouraging step forward.

Information from a 70 page booklet "Drugs and the Third World" by Anil Agarwal and available from Earthscan, 10 Percy Street, London WIP 0DR for £1.50/$3.00.