Ayurveda as an independent medical school has served the social needs of Indian subcontinent since time immemorial, and even to countries around India. Till the late 20th century, it survived in the country as a traditional school of learning unlike the other streams of learning. There were different educational institutions across the country that were teaching Ayurveda in different modes. Until the mid 20th century, Ayurveda was taught in Vedic institutions in the form of Upaveda of Atharva Veda, in many parts of the nation. It was also taught in the form of “Garuкуli” system. A better example of this are the generations of traditional Ashtavaidya families of Kerala teaching the respective branches of Ayurveda.

The post independence period of India has seen major advancement and reforms in all sectors of society such as healthcare, education, medical education, agriculture, irrigation, and economics. However, the major challenge in front of the government was poor health index and high mortality rate. As a result, provision of primary and social health care has remained a priority area in the planning process. Government of India gave a special attention for the development of indigenous medical sciences. As a result, various committees were formed to initiate the reforms in Ayurveda. Although there were quite good initiatives and measures taken to improve Ayurveda education in India, still it was endeavouring to establish as a comprehensive system of learning that could be applied in its right sense for the benefit of the mankind. On the other side, Allopathic system grew rapidly in par with the western world due to the commonality of learning and applicability. The successive governments also gave much priority to Allopathic systems than Ayurveda. However, the advent of 21st century has provided a new horizon of opportunities to the traditional medical sciences. The WHO has also in contemplated to provide an identity to the traditional medical sciences.

In India, providing healthcare for 1.2 billion population is a tedious task. India has been spending just about 1.2% of its gross domestic product (GDP) on the health sector, perhaps the lowest in the world. In the 12th five year plan (2012–2017), the government has proposed a significant increase in the expenditure on health care. For the 1st time in the history of the Republic of India, a basic framework of Universal Health Coverage has been proposed. National Rural Health Mission (NRHM, 2005), was launched to strengthen the rural public health system. The mission sought to provide effective healthcare to the rural population throughout the country. Through NRHM, Government of India has initiated revolutionary steps in bringing the AyUSH systems (Ayurveda, Yoga and Naturopathy, Unani, Siddha and Homeopathy) to the larger population through Primary Health Centre (PHC), Community Health Centre (CHC) and District Hospitals level in par with Allopathic systems.

The 21st century has opened a new gateway for the traditional medical systems. To serve the nation better through Ayurveda is indeed a very important task. To achieve this, producing well qualified, knowledgeable Ayurveda doctors who can deliver the best healthcare through Ayurveda is the challenge ahead of Ayurveda fraternity. There is a constant debate at all levels regarding the delivery of standard Ayurveda education to its aspirers. There is always a dilemma that exists among the policy makers of Ayurveda education, whether to follow Allopathic education standards in Ayurveda or to develop an altogether novel approach for Ayurvedic education. The introduction of 5½ year course existing now has partially succeeded in giving Ayurvedic education, and now yearly pattern has been introduced. However, still there is a strong opinion existing that, Ayurveda cannot be learned completely in the span of 5 years along with modern subjects in the syllabus. The debate still persists in the present scenario.

Unlike Allopathic education Ayurveda needs to be learned with a holistic approach since the core approach of understanding health and disease is entirely different from modern medical science. When we speak about reforms in the Ayurveda education system, it is not mere changing of the duration or short listing the subjects and introducing medical modern subjects, rather it should include the core Ayurveda philosophy intact with essential technical adaptations for global need. Since there is a strong need for an Ayurveda medical system to prove its relevance as a complete scientific system in the current world, it needs to adopt recent scientific advancements in Ayurveda education for that.

What are the challenges ahead of Ayurvedic education?

The major challenge ahead of Ayurvedic education is to produce competent Ayurveda medical practitioners; perhaps the existing system has not been completely successful in producing confidence among Ayurveda graduates for practicing pure Ayurveda. There may be several reasons attributing towards this, including student’s inability to understand principles of Ayurveda practice, improper infra-structure in Ayurveda institutions, unskilled teachers, etc.

One of the important aspect which is unable to bind the essence of Ayurveda with students is the lack of Sanskrit knowledge, although the Sanskrit subject taught in the 1st year syllabus has not served the purpose effectively. Hence, Sanskrit
subject should also be taught from the perspective of Ayurveda. Another best way out for this problem is to provide translated versions of all Ayurveda classics in regional languages as additional study materials may help to understand the principle and philosophy of the subjects better.

Another important challenge is the lack of adequate practical exposure in clinical practice. Most of the Ayurveda institutions lack the proper infrastructure and sufficient patient flow required to develop clinical orientation in the students undergo strict surveillance for the provision of the best facilities to institutions.

The essential reforms required in Ayurveda education can be listed as follows:

1. There should not be repeated alterations of academic durations of Ayurveda curriculum since it disturbs the adaptability and nature among Ayurveda teachers, and if the change is needed it should be executed with appropriate measures taken in advance, like providing a standard teaching methodology training to teachers

2. Periodical review of subjects is required to facilitate inclusion of recent scientific advancements and not merely excluding existing subjects

3. There should be freedom in the medium of instruction for a better understanding of Ayurveda since most of the students find it difficult to understand Sanskrit and writing it in English increasing their difficulty

4. The governing council should not increase the number of educational institutions, but to give priority for quality institutions with running hospitals

5. The current view of introducing semester system should be withdrawn, it serves no purpose either for students or teachers and perhaps it triggers many confusions and technical difficulties

6. The yearly or earlier phase-wise system should be retained, but institutional assessments should be valued so that student can revive his understanding

7. The availability of herbal garden in the educational institutions can be instrumental in acquainting the students about the various medicinal plants

8. The examination reforms are to be introduced, the present examination system is focused on mere subject wise notes and classical references, perhaps it has no scope for evaluation of individual understanding of the subject

9. The examination pattern should be more of assessing the student’s ability in the understanding of the subject in the purview of Ayurveda principles and should be prioritized

10. The questions appearing in examination should be in the nature of extracting reasoning and analytical skills of students for existing clinical problem

11. There should be very intensive and highly practical oriented rotatory compulsory internships to be designed, and there should be minimal eligibility practical tests after each departmental posting

12. The 1 year period of internship can be extended if the student is found inefficient in practicing Ayurveda

13. Developing an interest in the subject is essential to understand it thoroughly. Teachers are the guiding forces in the lives of students. Presence of skilled teachers can enhance the interest about the concerned subject.

These are the few things which I feel are required in to bring in Ayurveda education with the view of producing competent Ayurveda practitioners through well-organized student–teacher friendly Ayurveda education curriculum.

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