ii. Government policies and initiatives for the development of Āyurveda

ii. Government policies and initiatives for the development of Āyurveda as traditional System of Medicine of India for the wellbeing of the world

Government Policies and Initiatives for Āyurveda: A Strategic Framework

1. Historical Context and Policy Evolution

- **Pre-Independence Era**:

Āyurveda was marginalized during colonial rule, with Western medicine prioritized. However, indigenous systems survived through grassroots practitioners and traditional *gurukula* systems.

- **Bhore Committee (1946)**: Highlighted the need to integrate traditional medicine into national healthcare but lacked actionable policies.

- **Post-Independence**:
    - **1948**: The **Indian government recognized Āyurveda, Unani, Siddha, and Homeopathy** under the Ministry of Health.
    - **1970**: Establishment of the **Central Council of Indian Medicine (CCIM)** to standardize education and practice.
    - **1995**: Creation of the **Department of AYUSH** (Ayurveda, Yoga, Unani, Siddha, Homeopathy) to institutionalize traditional systems.
- **21st Century**:
    - **2014**: AYUSH elevated to an independent **Ministry of AYUSH**, signaling political commitment.
    - **2020**: Integration of AYUSH into the **National Health Policy (NHP)** and **National Education Policy (NEP)**.

2. Key National Policies and Initiatives

a. National Health Policy (NHP) 2017

- **Objective**: "**Mainstreaming AYUSH**" by integrating traditional medicine into primary healthcare.
- **Strategies**:
    - Co-location of AYUSH services in PHCs (Primary Health Centers).
    - Inclusion of Āyurveda in the **National Program for Prevention and Control of Cancer, Diabetes, CVD, and Stroke (NPCDCS)**.
- **Impact**: Improved rural healthcare access; 50,000+ AYUSH wellness centers operational by 2023.

b. National Ayush Mission (NAM)

- **Launched**: 2014 (revised in 2021).
- **Focus Areas**:
    1. **Medicinal Plant Cultivation**: Over 800 species promoted via the **National Medicinal Plants Board (NMPB)**.
    2. **Standardization**: Pharmacopoeia Committees for drug standardization (e.g., *Ayurvedic Pharmacopoeia of India*).
    3. **Research & Innovation**: Funding for interdisciplinary studies (e.g., Āyurveda genomics, metabolomics).

c. Digital Initiatives

- **AYUSH Grid**: A digital platform for AYUSH healthcare delivery, education, and research.
- **e-AUSHADHI Portal**: Online licensing system for AYUSH drug manufacturing.

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3. Global Outreach and Diplomacy

- **WHO Collaboration**:
  - **2014**: WHO's **Traditional Medicine Strategy 2014–2023** endorsed Āyurveda's role in universal health coverage.
  - **Benchmark Documents**: WHO released **Benchmarks for Training in Āyurveda** (2019) and **Unani** (2023).
- **International Initiatives**:
  - **Ayush Visa**: Introduced in 2023 for foreign nationals seeking Āyurvedic treatment in India.
  - **Global AYUSH Investment & Innovation Summit (2023)**: Attracted $5.6 billion in MoUs for Āyurvedic startups.
  - **International Day of Yoga (IDY)**: Leveraged to promote Āyurveda as a holistic wellness system.
- **Case Study**: **India-Japan Āyurveda Collaboration**
  - **Project**: Integrate Āyurveda into Japan's *Kampo* medicine system.
  - **Outcome**: Joint research on adaptogenic herbs (e.g., *Ashwagandha*) for stress management.

4. Research and Education Reforms

- **Institutional Framework**:
  - **All India Institute of Ayurveda (AIIA)**: Modeled after AIIMS for advanced Āyurvedic research.
  - **CCRAS (Central Council for Research in Ayurvedic Sciences)**: 30+ research institutes focusing on clinical validation (e.g., COVID-19 management with *Ayush Kwath*).
- **Educational Upgradation**:
  - **National Commission for Indian System of Medicine (NCISM) 2020**: Replaced CCIM to modernize curricula and introduce competency-based education.
  - **Ph.D. Programs**: ICMR-AYUSH partnerships for interdisciplinary research (e.g., Āyurveda + AI for personalized medicine).

5. Industry and Economic Development

- **Pharma Sector**:
  - **PLI Scheme**: Production-Linked Incentive for AYUSH drug manufacturers to boost exports.
  - **FSSAI Regulations**: Standards for Āyurvedic nutraceuticals (e.g., *Chyawanprash* as a dietary supplement).
- **Startups and Entrepreneurship**:
  - **Ayush Startup Challenge**: 500+ startups funded (e.g., **NirogStreet** for tele-Āyurveda consultations).
  - **Geographical Indications (GI)**: Protection for regional Āyurvedic products (e.g., **Kerala's Kottakkal Arya Vaidya Sala** formulations).

6. Challenges and Future Directions

- **Challenges**:
  - **Standardization**: Variability in raw materials and manufacturing practices.
  - **Biopiracy**: Patent battles over traditional knowledge (e.g., *Turmeric*, *Neem* cases).
  - **Evidence Gap**: Need for large-scale RCTs to meet global regulatory standards.
- **Future Strategies**:
  - **One Health Approach**: Integrate Āyurveda into planetary health (e.g., sustainable harvesting of medicinal plants).
  - **AI-Driven Diagnostics**: Tools like **Nadi Tarangini** (pulse analysis software) for precision medicine.
  - **Global Accreditation**: Push for ISO standards for Āyurvedic education and practice.

Conclusion: Āyurveda as a Global Public Good

Āyurveda's resurgence under India's policy frameworks aligns with the **United Nations Sustainable Development Goals (SDG 3: Good Health)**. By blending tradition with innovation, India positions Āyurveda not just as a medical system but as a **cultural and economic asset** for global wellbeing. Future policies must focus on **translational research**, **ethical commercialization**, and **diplomatic soft power** to realize its full potential.

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