



Mains Practice Question

Q. What are the challenges faced by the AYUSH System with respect to its integration in the mainstream medical system? Examine the potential and suggest measures to capitalise it. (250 words)

27 Nov, 2019 GS Paper 3 Economy

Approach

- Introduce by defining AYUSH and its current status in the country.
- Mention the challenges faced by it with respect to its integration in the mainstream medical system.
- Suggest measures to be taken for capitalizing AYUSH.

Introduction

The traditional Indian system of medicine, which comprises of **Ayurveda, Yoga and Naturopathy, Unani, Siddha, and Homeopathy (AYUSH)**, is a perennially neglected alternative medicine sector. It played an important role against the imperialistic British reign by the cultural nationalistic reassertion but is losing its significance in modern times.

Body

Challenges faced by the AYUSH with respect to its integration in the mainstream medical system:

- **Historical:** Steps were taken to uplift the sector after the **Report of the Committee on Indigenous Systems of Medicine, published by the Ministry of Health in 1948** but they were scrapped later. Almost all attempts of integration of AYUSH sector has failed till now.
- **Inadequacy of resources:** The policy to mainstream AYUSH faces the problem of inadequate medicines, lack of health centres, capacity building, practitioners and public faith on its efficiency.
- **Quantity vs Quality:** Integration of AYUSH into the health-care system faces the debate of whether to provide AYUSH facilities everywhere leaving no place behind or to improve the existing facilities to full potential.
- **Competition with modern medicine:**
 - **Dishonest practices** by most of the AYUSH practitioners makes allopathy look more trustworthy.
 - **Scepticism towards** AYUSH treatments and procedures by people, mainly the allopathic sector.
 - **Mindless cosmeticisation** of AYUSH products in the name of natural-organic origin in comparison to the artificial allopathic products.
 - **More focus on the export promotion** of AYUSH products to gain market attention.
- **Lack of dedicated efforts:** There is a sharp status gap between modern medicine and AYUSH and **little has been done to harmonise** both the sectors. Merely expanding AYUSH's framework will only expand the present list of problems.
- **Conflict of Interests:** AYUSH lobby **fears a loss of identity** following such integration. The allopathic lobby alleges that **standards of medical care would be diluted** after the integration.

Measures to be taken for capitalizing AYUSH:

- Strategising for facilitating meaningful cross-learnings and collaborations between the modern and traditional systems on equal terms.
- Envisioning the integration of education, research, and practice of both systems at all levels.
- Including training of AYUSH practitioners in modern medicine through curriculum changes and vice versa.
- However, prerequisites of such integration need substantial groundwork:
 - Building a strong traditional medicine research and scientific evidence corpus.
 - Delineating the relative strengths, weaknesses, and role of each system.
 - Negotiating the philosophical and conceptual divergences between systems.
 - Standardising and regulating AYUSH practices and qualifications.
 - Addressing the unique issues associated with research into AYUSH techniques.
- India can learn from the Chinese example of integrating Traditional Chinese Medicine with Western medicine.

Recently, the National Medical Commission Bill, 2019 was passed, despite the opposition from the orthodox medical community, which shows the political will to work towards the goal.

Conclusion

- A middle path needs to be found out by an integrated framework- merging the two systems of medicine while also leaving enough scope for their autonomous growth.
- Medium and long-term plans for seamless integration should be developed expeditiously in view of the massive drive for achieving universal health care already underway in the country.
- Through this India will be able to address the subservient status of AYUSH and foster its legitimate inclusion into mainstream health care.

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