Ayurveda Education at Graduate level
...... the Present Status

"Ayurveda the science of life and erstwhile the main stream health system in India is presently facing a severe educational crisis and is at crossroads. Despite of the wide network of public and private Ayurvedic educational institutions the quality of education is down and out. Govt. of India through its ministry of AYUSH is trying to improve the education system in the country but still the goal is far away. Ayurveda originated from India having its roots in its neighbouring countries like Nepal, Srilanka, Bhutan, Pakistan and Bangladesh. In ancient times the Ayurvedic education was through the Gurukula system which now has been transformed into institutional system like other educational streams. But this carried a lot of problems resulting to poor quality education. The problems are with every component of Ayurvedic education viz. Students, teachers, institutions, management/Government and regulatory body.

Students generally come to Ayurvedic institutions as a second choice or under the parent’s pressure as a compulsion. It takes them lot of time to accept Ayurveda stream as a final destination. After admission they continue to prepare for PMT/NEET for 2-3 years and usually abstain from the classes. By the time they accept it from heart, already lot of damage in terms of time wastage and loss of studies is over. Another problem is that when these students reach in 3rd or final year they start preparations for PG entrance or other competitive examination which continues during and after the internship. These examinations generally are of objective type (MCQ type) and are memory based. So students do not focus on the real studies and remain deprived of actual practical knowledge. So many students do not connect themselves to Ayurveda in real sense and remain depressed and frustrated also.

Baring few exceptions there are problems with teachers and teaching also. Teachers generally join just after completing their PG studies without any aptitude or any other kind of test. Because of lack of teachers training programmes in Ayurveda such teachers most of the times have no knowledge about teaching and teaching methodology. They are unable to connect with the students and deliver their lectures just mechanically without knowing that what student has gained out of his/her lecture or teaching. The institutions where PG studies are going on the status of UG studies is much worse there. There remains a huge gap between the teachers and graduate students. This is because the PG students are in direct contact of the teachers. Senior teachers avoid taking classes of the UG students. Mid level or junior teachers although take classes but they also quite often send PG students under them to take the classes. These PG students are not having complete subject knowledge and cannot deliver to the students up to desired level. This severely compromises the quality of education. On paper teachers, recruitment of teachers without aptitude test, engagement of retired and tired teachers, lack of teachers of particular subjects and frustration (due to various factors like low salary, pressure of management, no or less promotional avenues etc.) amongst teachers are some other causes of compromised and poor teaching.

In India mainly there are three types of institutions viz. Govt. of India institutions, State Ayurvedic Colleges and Private organisations or colleges. Few Ayurveda Universities have also come up. This whole is consisting of a big network of colleges or institutions. Govt. of India organisations are providing best infrastructural facilities and environment for teaching and research. Few state colleges and good number of private colleges are also providing best infrastructural facilities and environment for teaching. But unfortunately the mushroom growth of substandard Private Ayurvedic colleges has resulted to most inferior Ayurveda education and these colleges are more or less degree distribution shops.
Governments/private managements are also not performing their duties up to full extent. So many state Governments are running Ayurvedic colleges half heartily and merely to keep the gist that this is Indian heritage and has to run without linking it with its outcomes. Poor infrastructural facilities, low pay scales to teachers, low staffing and ignorant attitude are the main problems with managements or Governments. Private managements are more interested in earning money from the organisation but do minimum investments. This does not provide good environment for teaching and training.

Regulatory body in reference to Ayurvedic education is Central Council of Indian Medicine (CCIM). One biggest achievement of this body is the uniform Ayurveda education system throughout the country. But imperfect and ever-changing curricula, top level politics, lack of perfect policies & vision, allowing sub-standard Ayurvedic colleges to continue, and frequent corruption charges on the members of CCIM are the problems with the CCIM.

So, to bring the Ayurvedic education at perfection level different measures at different levels need to be adopted. Students need to be motivated and encouraged for Ayurvedic education, perfect attendance system, proper assessment of students are the main requirements on students part. There is need of dedicated teachers who should be the experts of subject, well aware about the teaching methodology, positive attitude and energetic. It is the need of the day to raise the existing institutes to excellent level with full infrastructure and congenial environment, Governments and managements need to be more sensitive and responsible for Ayurvedic education.

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Contributions are invited in the form of:

Research Papers—Randomized trials, intervention studies, studies of screening and diagnostic tests, cohort studies, cost-effectiveness analyses, and case control studies.

Short Communications—Brief accounts of descriptive studies, initial/partial results of a larger trial, and a series of cases;

Correspondence—Letters commenting upon recent articles in Journal of Ayurveda, other topics of interest or useful clinical observations. Debate on important issues such as those raised in the editorial forum are most welcome.

Images in practice—Interesting and original images which are worth a thousand words and help understand a particular concept. Images should accompany a certificate of ownership.

A major criteria for acceptance of an article will be addition to existing knowledge and as such manuscripts are required to include ‘what this study adds’.

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