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# How the role of Ayurveda evolved pre- and post-independence

A new work captures the late 19th and early 20th century growth of 'medical nationalism' through the Ayurvedic revivalist movement in the United Provinces

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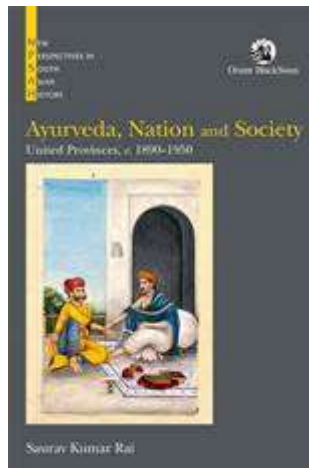


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## **Ayurveda, Nation and Society: United Provinces, c. 1890–1950**

*By Saurav Kumar Rai*

Orient BlackSwan, 292 pages, Rs 1,400



Ayurveda enjoys a growing global appeal, and is often touted as ‘true’ and ‘time-tested’ by contemporary political actors, governments, social groups, practitioners and NGOs in India. With ‘indigenous’ healing systems enjoying increasing state support today, an examination of the socio-political aspects of medicine, in particular Ayurveda, and its role in nation-building is critically important.

‘Ayurveda, Nation and Society’, the latest in Orient BlackSwan’s ‘New Perspectives in South Asian History’ series, captures the late nineteenth and early twentieth century growth of ‘medical nationalism’ through the Ayurvedic revivalist movement in the United Provinces, and observes the ensuing change and continuity in the attitude towards ‘indigenous’ medicine in independent India. The volume critiques the casteist, communal, class- and gender-biased social culture inherent in Ayurvedic discourse of the period under discussion, and notes how the constant blaming of the ‘Other’ for spreading diseases detrimental to the ‘Hindu’ male reveals that proponents of Ayurveda were actively involved in both the ‘reconstruction of a tradition’ and of the society and ‘nation’.

The volume also examines the Ayurvedic print and drug market to study the commercialisation of the health discourse and healing practices, with the help of diverse sources such as hitherto untapped vernacular texts like Ayurvedic journals and pamphlets, literary interventions, along with field interviews of practising Ayurvedic healers and shopkeepers. The author also demonstrates how, despite co-opting several traits of Western medicine, Ayurvedic practitioners have often failed to imbibe one of its central tenets—the spirit of rigorous enquiry/experiment.

The author, Saurav Kumar Rai, is a research officer, Gandhi Smriti and Darshan Samiti, New Delhi.

*Here is an excerpt from the book:*

### **Ayurveda at the Crossroads of Independence c. 1946–50**

So far [in the previous chapters of this book] we have looked at various aspects of the Ayurvedic

discourse and the Ayurvedic revivalist movement in colonial India. It would be equally interesting to look at the developments which followed immediately after independence. This is largely because the colonial context, which was hitherto one of the major factors in shaping the characteristic features of the Ayurvedic revivalist movement, was no longer present in a direct manifest form. In the absence of this colonial context, the Ayurvedic movement had to face new kinds of challenges which were internal and relatively subtle vis-à-vis evident colonial onslaught. Besides, such a discussion is equally significant in tracing the postcolonial government attitude towards Ayurveda and other 'indigenous' healing practices which had a lasting imprint on the future development of Ayurveda in independent India.

For quite some time, historians and political theorists deemed independence as a decisive break in Indian history. However, very soon, colonial continuities in postcolonial era became evident across the world, including the Indian subcontinent. As Ashis Nandy argued, '[W]estern colonialism brought with it, not merely economic exploitation and political oppression, but also the unrelenting thrust of a 'civilising' mission based on a worldview which believed in the absolute superiority of the human over the non-human, of the masculine over the feminine, of the historical over the ahistorical, and of the modern over the traditional.' This colonial triumph of the 'modern' over the 'traditional' in the field of 'indigenous' medicine was articulated through postcolonial administrative leanings towards Western medicine while drafting broader health policies for the subject citizens. The nationalist articulation of anti-colonial sentiments in the field of medicine could seldom mitigate the pragmatic contingencies of the newly independent nation modelled on modern framework. Medicine had already become an integral tool of governance for modern nation-states exhibiting a spontaneous and deeply rooted convergence between the requirements of political ideology and those of medical technology.

The choice of healing system by the post-independence Indian nation-state depended very much upon this new found virtue of medicine in modern ways of governance. It becomes quite evident when one closely analyses the contemporaneous reports/recommendations of health surveys and subsequent response of the government.

Three reports which become particularly crucial for the purpose of present study are the Report of the Health Survey and Development Committee, 1946; Report of the Committee on Indigenous Systems of Medicine, 1948; and Report and Recommendations of the United Provinces Ayurvedic and Unani Systems Reorganisation Committee, 1949. The present chapter scrutinises each of these reports and consequent response of the related officials extensively to situate the envisaged role of Ayurveda in the biopolitics of independent India, particularly that of the United Provinces.

While doing so, it looks for colonial continuities and disjunctures, if any, of the official attitude towards 'indigenous' medicine in the era of experimental planning. Incidentally, as argued by Rachel Berger, this was the period which witnessed a scramble to lay claim to an authoritative knowledge of Ayurveda and subsequent formulation of policy determining the place of Ayurvedic medicine and practitioners in the larger biopolitics of the state by a plurality of stakeholders, ranging from federal politicians to state bureaucrats to educational instructors to lay authors.

**Locating Ayurveda/'indigenous' medicine in Bhore and Chopra committee reports**

With independence in sight, attempts were made both by the officials as well as political groups and voluntary organisations to prepare a roadmap of the public health policy for an imagined postcolonial future. In this regard, it was as early as 1938 that the Indian National Congress set up the National Planning Committee under the chairmanship of Jawaharlal Nehru to prepare an 'all-embracing Plan' for future development of India with health being one of the primary foci. The Health sub-committee headed by Col. S. S. Sokhey was one of the 29 sub-committees of the National Planning Committee. However, the Health sub-committee adopted an ambivalent position towards 'indigenous' medicine.

Incidentally, all the members of the Health sub-committee were trained in Western medicine and there was no representative of 'indigenous' medicine as such. As a corollary, Western medicine came to acquire central position in the report of the sub-committee, reducing 'indigenous' systems of healing at their best as an auxiliary to Western medicine. In fact, in its report, the Health sub-committee categorically stated that the issue of 'indigenous' medicine needed to be 'properly solved, otherwise, it [was] likely to impede terribly the development of scientific medicine in the country'. The report of the Health sub-committee further argued that likewise many other countries, the pharmacopoeia of 'indigenous' systems of medicine in India had not been 'adequately revised' for centuries and that with the development of the scientific methods of assessing pharmacological and therapeutic value of drugs, most of the 'indigenous' remedies were found to be of 'no value'. Thus, 'indigenous' medicine received little prestige at the hands of the Health sub-committee constituted by the Indian National Congress in its pioneering attempt to plan on the national basis.

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