

**FITM**Forum on Indian  
Traditional Medicine**FITM POLICY BRIEF**

# Heal by India, Heal in India: Ayurveda and Yoga as Soft Power Tools

*Through the Ayush sector, India will go to the whole world and the entire world will come to India.*

Tedros Adhanom Ghebreyesus,  
Director-General, World Health  
Organisation.<sup>1</sup>

## Introduction

Joseph S Nye Jr, coined the term *soft power* in the 1980s, and defines “soft power as the ability to obtain preferred outcomes through attraction rather than coercion or payments.”<sup>2</sup> Nye has posited that it is *soft power* that can find solutions to global issues that require multilateral cooperation. The acceptance by others of the values cherished by a country owes not to any use of force or subjugation or colonialism but to their attractiveness and the realisation that those values are good in themselves and beneficial to the followers. The reception emerges from inside society and is not imposed on them by any external agency.

David Frawley includes within *soft power* “cultural factors, sharing the intellectual, artistic and spiritual culture of a country with the other nations of the world.”<sup>3</sup> The elements of Indian culture have always played a significant role in attracting others to this country. Ancient Indian philosophy generated a great deal of interest in scholars and thinkers in other countries of Asia for centuries; it attracted people like Faxian (Fa Hien)

during the 4<sup>th</sup> century and Xuanzang (Hiuen Tsang) during the 7<sup>th</sup> century from China. Buddhism and many aspects of Indian culture spread throughout Asia, not through any coercion. In recent years Indian cinema has been a major cultural attraction for people throughout the world. Indian democracy and its blending of a multicultural society have also been viewed as admirable by other societies. These are examples of *soft power* emanating from India, though much before Nye coined the term for academic discussions and in the context of the international relations of the United States of America (USA).

Ayurveda and Yoga have been two major contributions of India to the world. In existence for more than millennia, these systems are a shared heritage of the Indian subcontinent including countries of the region such as Bangladesh, Bhutan, Nepal, Pakistan and Sri Lanka. These systems contribute to holistic health – therapeutic care while maintaining the physical, mental and spiritual well-being of people in a sustainable way. In recent decades, Ayurveda and Yoga have received lot of attention globally to the extent that many countries have engaged in Ayurveda and Yoga related activities. Countries like Albania, Comoros, Cuba, Ireland, Mauritius, Saudi Arabia, Seychelles, Sri Lanka, Switzerland, Tanzania, Ukraine and United Kingdom, have been celebrating International Day of Yoga. India, like other countries, has been employing cultural tools for long in its

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international relations. Effective use of cultural and civilisational links (*Sanskriti evam Sabhyata*) is one of the five pillars of India's diplomacy. This Policy Brief explores the evolution of Ayurveda and Yoga as *soft power* tools and the policy options available for use of Ayurveda and Yoga as effective instruments of 'Heal by India, Heal in India'.

## The Global Appeal of Ayurveda and Yoga and India's Policy Objective

Recent global trends highlight a growing preference for herbal remedies and vegetarian diets in developed nations. Traditional Medicine has already been a major player in healthcare in most developing countries.<sup>4</sup> Recent developments in modern medicine such as the concept of "precision medicine",<sup>5</sup> i.e. customised patient care based on a person's genetic information has drawn similarities with Ayurveda. Ayurveda's approach to treatment based on information drawn from *Prakriti* (innate nature of an individual's body and mind) includes not only physical characteristics but also psychological. Research studies on personalised medicine have shown its positive correlation with the genotype of a person.<sup>6</sup> Precision medicine today follows a similar approach. Capitalising on these trends and developments, one of the national policy objectives is to promote Ayurveda and Yoga as India's soft power tools. Medical tourism is one such strategy which aims to make India a global medical value travel hub with Ayurveda and Yoga playing a crucial and large role in the vision of 'Heal in India'. Indian systems of medicine are envisioned to move beyond the borders of India and become an acceptable healthcare system globally.

## Key Policy Challenges

The above policy objectives would only be achieved by addressing several national and international policy challenges. These include:

- Global acceptance and recognition of Ayurveda as an effective healthcare system;
- Recognition of Ayurvedic drugs as drugs by other countries;
- Subscription of quality, safety and efficacy standards by manufacturers and service providers;

- Recognition of Ayurveda pharmacopoeia by other countries;
- Recognition of Ayurveda degree holders from India by other countries; and
- Seamless access to Ayurveda healthcare and Yoga centres by foreign visitors.

India's efforts to meet the challenges have, of course, a long history resulting in a number of policy and programme interventions in the past. The challenges and responses have been shaped by the global ecosystem of healthcare and wellness.

## Global Outreach of Ayurveda and Yoga: Policy Initiatives

### Bilateral and Multilateral Engagements

Since independence, India has initiated steps for protecting traditional medicine and other traditional knowledge from being pirated by commercial interests abroad. The establishment of the Traditional Knowledge Digital Library (TKDL) is one such effort. The policy push for global acknowledgement of Ayurveda and Yoga gained traction since 2014 with the formation of an independent Ministry of Ayush, exclusively for traditional medicine like Ayurveda, Yoga and other systems. The rationale was based on the need for physical and human infrastructure that would be required for strategic planning of the health sector. One of the mandates of the Ministry is promotion and recognition of Ayush in the international practice of medicines.<sup>7</sup> Since its formation, the Ministry has conceived, planned and implemented a large number of projects and programmes for the promotion of Ayush systems, both nationally and internationally.<sup>8</sup>

India has been playing an active role in getting the World Health Organization (WHO) to recognise the importance of Traditional Medicine systems, to which Ayurveda and Yoga belong as per WHO classification of healthcare systems, and promoting them. The High-Level Preparatory (HLP) Meeting (for the 67<sup>th</sup> session in Dhaka in September 2014) held in the Regional Office for South-East Asia of the World Health Organization in New Delhi, India, in July 2014 brought out the "Traditional Medicine: Delhi Declaration". This Declaration contained four major recommendations for Member-States to act

which included, besides implementation of the WHO Traditional Medicine strategy 2014-2023, integration of traditional medicine in the conventional health system, enacting regulations on quality assurance of traditional medicine and improving the quality assurance of the traditional medicine products.<sup>9</sup> India has since taken steps to implement all these recommendations. These include the National Health Policy 2017 declaration of a policy shift to a three-dimensional mainstreaming of Ayush services from being stand-alone, recognition of the Ayush system and practitioners by Central Act, development of various regulations and guidelines regarding quality of medicines and development of quality assurance marks for Ayush sector products such as Ayush Premium Mark and Ayush Mark by the Quality Council of India for voluntary certification by the companies. Other initiatives include action for accreditation of Ayush hospitals with the National Accreditation Board for Hospitals & Healthcare Providers (NABH) and of Ayush laboratories with the National Accreditation Board for Testing and Calibration Laboratories (NABL).

The efforts to promote Ayurveda and Yoga globally got a major boost when the 69<sup>th</sup> session of the United Nations (UN) General Assembly on 11<sup>th</sup> December 2014 proclaimed 21 June as the International Day of Yoga (IDY) given its universal appeal.<sup>10</sup> The resolution in this regard introduced by India received the endorsement of 175 countries. The Yoga Day is aimed at raising awareness worldwide of the many benefits of practising Yoga. Since 2015, International Day of Yoga is being celebrated annually the world over. After the IDY celebrations started the popularity of Yoga increased manifold. As per a 2021 report, there are more than 300 million Yoga practitioners.<sup>11</sup> The report also states that as per US National Survey data, 6.7 per cent of US adults aged 65 and above practised Yoga in 2017, as compared to 3.3 per cent in 2007 and 1.3 per cent in 2002.

International collaboration efforts in Traditional Medicine have also been given a major push by India in recent years. The Ministry of Ayush has signed 24 Country to Country Memorandum of Understanding (MoU) for Cooperation in the field of Traditional Medicine and Homoeopathy.<sup>12</sup> Collaborative research/academic collaboration agreements have also been signed with 24 foreign institutions. Agreements have also been reached for

setting up 13 Ayush Academic Chairs abroad. India has already established 33 Ayush Information Cells in 30 countries to disseminate authentic information about Ayush systems of Medicine.<sup>13</sup>

## Positioning Ayurveda in Global Health Responses: COVID 19

The COVID-19 pandemic posed a major challenge for Ayurveda and other Indian Systems of Medicine like for the Modern Medicine system. The institutional response of the Ministry was to set up an Inter-disciplinary Ayush Task Force with representation research organisations like the Council of Scientific and Industrial Research (CSIR), the Indian Council of Medical Research (ICMR), Department of Biotechnology (DBT), Department of Science and Technology (DST) and major health institutions like All India Institute of Medical Sciences (AIIMS), Jodhpur, King George Medical University (KGMU), Lucknow and Mahatma Gandhi Institute of Medical Sciences (MGIMS), Wardha. Under its guidance research and development (R&D) of global standards including pre-clinical studies, safety, toxicity, *in vitro* and *in silico* studies, animal studies and robust multicentre clinical trial and observational studies on a large cohort were carried out. On the basis of these studies the Government of India released the National Clinical Management Protocol based on Ayurveda and Yoga for management of COVID-19. The Ministry successfully repurposed Ayush 64 (an Ayurvedic formulation) and *Kabasura kudineer* (a Siddha formulation) for the management of mild to moderate COVID-19 which were distributed on large scale to the COVID patients and also prophylactic Ayush medicines like Ayush *kwath*, *Samshamani vati* and Ashwagandha powder were given to millions of people across the country to protect against COVID-19.<sup>14</sup> Studies at international platforms like the one on Ashwagandha in COVID-19 at the London School of Hygiene & Tropical Medicine (LHSTM) were also taken up by the Ministry. To date, 150 research studies on COVID-19 have been completed under the aegis of the Ministry. The effort to generate evidence-based solutions with clinical parameters of western medicine is expected to create the necessary traction about Ayurveda's ability to address new and emerging diseases.<sup>15</sup>

## Ayurveda and Yoga as India's Strategic Medical Value Travel (MVT)

India has been attracting a significant quantum of Medical Value Travel. An estimate puts the number of medical tourists at above 1.82 lakh in 2020. (See Table 1.) Though the number of foreign tourist arrivals (FTAs) came down in 2020 due to the COVID 19 pandemic, the share of FTAs for medical purposes is seen to increase from 6.38 per cent in 2019 to 6.7 per cent. This reinforces the robustness of medical tourism in India.

**Table 1<sup>16</sup> : Medical Tourism in India**

Year	Total Foreign Tourist Arrival (FTA)	Total Medical tourism	Medical tourism (Percentage Share)
2016	8804411	4,31,416	4.9
2017	10035803	4,91,754	4.90
2018	10557976	6,44,036	6.1
2019	10930355	6,97,356	6.38
2020	2744766	1,82,945	6.7

*Note:* The purpose-wise and nationality-wise distribution of Foreign Tourist Arrivals (FTAs) in India has been worked based on 7,441,867 records for which information related to visa were available from the Bureau of Immigration.

*Source:* Ministry of Tourism, Government of India (ON1906).

It would not be wrong to presume that a good percentage of the medical value travellers are availing of Ayurveda and Yoga facilities at various Ayurveda hospitals, Yoga institutes and wellness centres. The high cost of healthcare in many developed countries, the adverse side effects of many chemical-based drugs along with increasing awareness toward holistic health, preventive care and safe and effective treatment solutions offered by Ayurveda and Yoga are attracting medical and leisure tourists for treatment, rejuvenation, wellness, and spiritual care. One of the recent policy initiatives in this regard is the National Strategy and Roadmap for Medical and Wellness Tourism prepared by the Ministry of Tourism to provide impetus to medical value travel and wellness tourism. It provides an institutional framework in the form of a National Medical and Wellness Tourism Board that would promote Yoga and Ayurveda tourism. As per this strategy,

'Medical Visa' has been introduced. 'E-Medical Visa' and E-Medical Attendant Visa' facilities have already been extended to 156 countries. Another important feature of the strategy is the provision of financial assistance to Medical Tourism Service Provides for participation in Medical/Tourism Fairs, Medical Conferences, Wellness Conferences and Wellness Fairs and allied Road Shows. Overall, it aims at "strengthening the ecosystem for medical and wellness tourism, developing a brand and ensuring quality assurance."<sup>17</sup> All these apply to the Ayush sector also. The Champion Service Sector Scheme for Medical Value Travel has already been launched to augment medical tourism in the field of Ayurveda and other Ayush systems. It offers support for establishing state of the art Ayurveda hospitals.<sup>18</sup>

The Strategy has identified the following two major challenges in the Ayurveda-based Medical Value Travel industry, namely, recruitment and retention of skilled manpower and the absence of a well-defined regulatory framework. It stresses the role of the Ministry of Ayush as one of synergising with other stakeholders in offering India as a holistic healing destination.

## Way Forward: Policy and Strategy Options

Broadly, India's preparedness both domestically and internationally is required in some key areas.

### Strategic Utilisation of Ayurveda and Yoga under Heal by India and Heal in India Programme

- **The diplomatic push for the promotion and popularisation of Ayurveda and Yoga abroad** comes out of a vision of India that humanity is one<sup>19</sup>. India's initiative 'Heal by India, Heal in India' also owes its genesis to this vision. India wants to position itself as a global source for the health sector. Under this campaign, it aims at promoting medical facilities and infrastructure. It also involves plans to standardise processes and treatment packages for foreign nationals. There is already a great attraction among foreigners for Ayurveda and Yoga therapies in India. Some specific action points in this regard are proposed below:

- **Quality Assurance of products:** The development of a quality assurance system through regulation, standardisation, accreditation and streamlining of institutional procedures should be given priority. Much has already been done by the mandatory practice of the adoption of WHO standards and guidelines of good manufacturing practices for food and medicine in the Ayurveda sector. This practice needs to be projected and publicised globally which will contribute to the easy export of Ayurveda products to other countries. The global perception gets influenced by US Food and Drug Administration (FDA) and European Union (EU) regulations. The registration and recognition of Ayurveda products under US FDA and EU as medicine is an uphill task which needs due emphasis and appropriate regulatory implementation of quality assurance and research. But the industry should strive to get the same done.
- **Quality Assurance in Services:** The service providers should be well-qualified and the hospitals and centres should have all standard necessary facilities. Lack of quality in services may bring a bad name to the sector and the country. A scheme of accreditation of Ayush hospitals has been in operation since 2010, but with little response. It may be made a mandatory requirement. Appropriate regulations be made, in consultation with the state governments, for the establishment and maintenance of wellness centres and resorts that provide Ayurveda and Yoga services.
- **Connectivity:** Access is an important element in any healthcare programme and Ayurveda is no exception. Howsoever good a healthcare facility is unless the same is easily accessible patients will not visit. This is particularly so when we plan to extend the “heal in India” programme and the accessors are foreigners. Ensuring connectivity has to be given the highest priority. International air connectivity to different regions and states of India will contribute greatly to Medical Value Travel. People will avail of the health and wellbeing therapies only if there are proper transport facilities. Therefore, strengthening of the domestic transport infrastructure, air, rail, water and road will have to be taken up emergently. The heritage and cultural centres can be linked in this transport network. The last mile connectivity should not remain a problem. Major Ayush hospitals may be promoted at tourist destinations and can be linked with the Incredible India initiative of the Ministry of Tourism. Further like medcities20, holistic medcities may be visualised in India which can cater to conventional healthcare as well as Ayurveda and Yoga based MVT, all at one place. Such medcities can be visualised near international airports with good connectivity. At the national level, there is a need for coordination among the Ministries concerned such as Shipping and Transport, Railways, Civil Aviation, Tourism, Culture, Health and Family Welfare and Ayush.
- **Provision of a package for medical value travel** and wellness treatment connecting service providers, government, travel agents, hotels, airlines, railways, road and water transport, taxi and other transfer services, hospitals and wellness centres and visits to Ayurveda and other heritage spots and cultural programmes will be a great booster. This can also combine work with the “leisure and wellness” concept. The gift and souvenir items can be Ayurveda and Yoga products.
- **The current perception** among many foreigners that Ayurveda is a backward-looking medical system needs to be changed. Exposure to modern Ayurveda education and research institutions (tertiary care centres in Ayush, Ayush grid initiatives in Information Technology [IT] sector, R&D initiatives and Research Councils) will help in a mindset change of the visitors, thus “heal in India and heal by India” serving as a major brand-building programme for Ayurveda. Virtual tours and short videos may be developed on these lines and disseminated at different global forums and to embassies
- **Important policy intervention** is called for in the area of health insurance. This should cover Ayurveda therapy and wellness centres. The portability of insurance across countries

is an aspect to be attended to. The Indian health insurance companies can think of entering the global market and offer policies covering Ayurveda and Wellness care in India. Ayush hospitals may seek to get themselves empanelled by Third Party Administrators (TPA) for health insurance to facilitate cash less or reimbursable Ayurveda treatments.

- At present, Ayush patients visit under tourist visas. There is a **need for special/separate visas** for Ayush treatment, along the lines of Medical Visas, and arrangement for reception and transport facilities at airports. Necessary orders and guidelines be issued at the earliest for the Ayush visa has already been announced by the Hon'ble Prime Minister. Visiting India for Ayurveda or wellness treatment should be made simple and free from procedural complexities.
- **Service Export Promotion Council may be given a focused mandate** for promoting and facilitating MVT in the Ayush sector. Ayurveda service export needs to be calibrated well. Recognition of the system as a medical one and making available the services of qualified practitioners have to move simultaneously and complementarily. To begin with, in many countries non-drug therapists can be deputed. This would of course require **skilling and special training** of such personnel to adapt to the regulatory conditions in those countries. The establishment of the Ayush Export Promotion Council (Ayushexcil) to promote Ayush products and services exports is a major step in this regard. The Ayushexcil's remit includes support to industry and hospitals for participation in international exhibitions, the deputation of experts to different countries for establishing quality standards by collaborating with international agencies like WHO, ISO (International Organization for Standardization) and so on. It has also within its kitty proposals for the establishment of international Ayush institutes, and grant of scholarships to foreign nationals for pursuing Ayush courses in India.<sup>21</sup>
- Modern health care personnel on deputation may also need **upskilling in Ayurveda**. This is an area where the Ministry of Skill Development can be associated.

- **The strategic approach** should take note of the specific geographical areas like Japan, Central Asian and Eastern European countries as well as countries with a strong presence of Indian diaspora as the low hanging fruits and set up facilities there first. The elderly care in Ayurveda should appeal to Japan.<sup>22</sup>

### Other International Outreach initiatives

- The most important action point is getting Ayurveda recognised as a medical system in as many countries as possible. The drug and nutraceutical regulatory system requirements of each country will have to be met. This calls for diverse steps including, further developing ASU (Ayurveda, Siddha and Unani) pharmacopoeia toward 'one herb one standard', working toward bringing more globally accepted standards of herbs in the pharmacopoeia.
- India has a great advantage in the use of Ayurveda & Yoga as a soft power tool in the form of the Indian diaspora which has a substantial presence in several countries. With some form of exposure to Indian traditional medicine systems; many of them have been beneficiaries of the systems. More than 32 million overseas Indians categorised under Non-Resident Indians (13.45 million) and Persons of Indian Origin (18.68 million) are present in more than 200 countries ranging from less than 100 in a few countries to 4.46 million in the United States of America (USA)<sup>23</sup>. MoUs with more countries, particularly all developed countries with the largest Indian diaspora should certainly be covered under such MoU at the earliest. India should take the lead in establishing Mutual Recognition Agreements on the qualifications of Ayurveda and the Traditional Medicine in partner countries.
- School for international students at the Institute of Teaching and Research in Ayurveda (ITRA), Jamnagar may further be strengthened and the international students coming from different countries under the scholarship scheme of the Indian Council of Cultural Relations (ICCR) could be further extended to more countries.

- **Initiating collaborative research programmes in Ayurveda and other TM** in developing countries in Asia, Africa and South America is likely to lead to more positive response to Indian systems of medicine in those countries in the future than at present.
- **Setting up more Ayurveda (Ayush) chairs** in major universities and developing clear mandates for such chairs like education, research and propagation of Heal in India initiative through dialogues and organisation of conferences also deserve priority attention. Substantial funds will have to be devolved for this. Establishment of Trust funds will make the institutional management of the Chairs free from the uncertainties of annual budget allocations.
- **Organising public awareness programmes:** Government and industry organisations should join together in organising events such as Ayurveda festivals, fairs, etc. for brand building abroad. The Global Ayush Innovation and Investment Summit held in Gandhinagar in April 2022 has to become a trendsetter and more such programmes be organised at regular intervals with more global participation. Print and electronic media including social platforms may be effectively utilised in this effort.
- **Posting Ayurveda (Ayush) attachés in embassies/high commissions in major countries:** It should be their sole duty to make Ayurveda and Yoga inroads in the country of their posting. An information desk at each Indian embassy may also be established to sensitise the Indian diaspora in a better way toward Ayurveda. A sense of ownership needs to be developed; the Indian diaspora are to be the best ambassadors of Ayurveda-based medical value travel. This will be on similar lines to the Hon'ble Prime Minister's call to each member of the Indian community in Copenhagen to inspire at least five of his/her foreign friends to visit India.<sup>24</sup>
- **Cooperation with WHO:** The recent establishment Global Traditional Medicine Centre in Jamnagar, Gujarat by WHO is a major step. As a global centre aimed at promoting all

traditional medicine systems, the geographical location in India is expected to promote the global symbolic identification of India as the hub of traditional medicines. Considering the number of people who follow Ayurveda for their healthcare, better representation of Ayurveda at various verticals/offices of WHO may be ensured. At the same time the scientists and health experts from India working at WHO be sensitised toward Ayurveda so that they can support Ayurveda on various platforms of WHO and UN.

## Conclusion

The global positioning of Ayurveda and Yoga requires careful strategic intervention. For maximising the soft power objectives, increasing awareness about the efficacy and affordability of Indian medical systems across India and the entire world, through their preventive, corrective, and curative approach to health care, which is comprehensive and unique, is to be disseminated at a substantial level. Propelling the research and developmental activities, innovations, high quality, authentic education and practice both in India and abroad should be encouraged. The re-emergence of many communicable diseases, antibiotic-resistant bacterial infections, numerous viral diseases and prevalence of chronic diseases like diabetes, cardiac diseases, and liver and kidney diseases on the rise all over the world could find comfort and relief with Ayush systems. With recent initiatives like 'heal in India' the time has come to showcase the strengths of these systems in India and to the world at large.

## Endnotes

- <sup>1</sup> Opening remarks at the inaugural session of the Ayush Investment and Innovation Summit, Gandhi Nagar, India on 20 April 2022. Accessed at <https://www.who.int/director-general/speeches/detail/who-director-general-s-opening-remarks-at-the-inaugural-session-of-global-ayush-investment-and-innovation-summit---20-april-2022>.
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- <sup>3</sup> India's soft Power and Cultural Diplomacy: The role of Yoga and Dharmic Traditions by David Frawley (2018). American Institute of Vedic Studies. Available at <https://www.vedanet.com/indias-soft-power-and-cultural-diplomacy-the-role-of-yoga-and-dharmic-traditions/>
- <sup>4</sup> WHO data suggests that around 80 per cent of the world's population in 170 countries uses traditional medicine which is the first line of treatment for most. See World Health Organization global report on traditional and complementary medicine 2019. Available at <https://apps.who.int/iris/handle/10665/312342>.
- <sup>5</sup> As per MedicinePlus, precision medicine is "an emerging approach for disease treatment and prevention that takes into account individual variability in genes, environment, and lifestyle for each person." MedlinePlus [Internet]. Bethesda (MD): National Library of Medicine (US); [updated 2020 Jun 24]. Genetics. Help me understand Genetics. What is precision medicine? Available from: <https://medlineplus.gov/genetics/understanding/precisionmedicine/definition/>
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- <sup>10</sup> UN GA resolution 69/131.
- <sup>11</sup> Arunima Gupta and Aparna M Sridhar. 2021. India Must Shape Yoga's Global Outreach. Downloaded from <https://uscpublicdiplomacy.org/blog/india-must-shape-yogas-global-outreach>. Accessed on 2nd May 2022.
- <sup>12</sup> These include Nepal, Bangladesh, Hungary, Trinidad & Tobago, Malaysia, Mauritius, Mongolia, Turkmenistan, Myanmar, WHO, Geneva; Germany (Joint declaration), Iran, Sao Tome & Principe, Equatorial Guinea, Cuba, Colombia, Japan (Memorandum of Cooperation), Bolivia, Republic of Guinea, China, St Vincent and The Grenadines, Brazil and Zimbabwe.
- <sup>13</sup> Ministry of Ayush Annual Report 2020-2021. P.163.
- <sup>14</sup> Kotecha R. The journey with COVID-19: Initiatives by Ministry of AYUSH. *J Ayurveda Integr Med*. 2021;12(1):1-3. doi:10.1016/j.jaim.2021.03.009.
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- <sup>16</sup> Based on RIS Database.
- <sup>17</sup> Ministry of Tourism. Draft National Strategy and Roadmap for Medical and Wellness Tourism. 2021. Para. 1.6
- <sup>18</sup> Ministry of Ayush website. <https://ayushnext.ayush.gov.in/detail/news/initiative-to-popularise-various-diseases-treatment-through-ayush-systems-2>. Accessed on 19 May 2022.
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- <sup>20</sup> It is like a medical complex with customised features, amenities and medical facilities with hospitals, etc. who would get concessions on infrastructure creation as well as consumables. They may provide end to end services to the visitor.
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- <sup>22</sup> Rajiv Vasudevan in a talk delivered at a Conference on Soft Power held in December 2018. The talk is available at <https://youtu.be/ridz5kkT05g>.
- <sup>23</sup> Data source: Ministry of External Affairs, Government of India. compiled by Ms Ishita Varma, Research Assistant, RIS.
- <sup>24</sup> [https://twitter.com/ANI/status/1521515942735675393?ref\\_src=twsrc%5Etfw%7Ctwcamp%5Etweetembed%7Ctwterm%5E1521515942735675393%7Ctwgr%5E%7Ctwcon%5Es1\\_&ref\\_url=https%3A%2F%2Ffindianexpress.com%2Farticle%2FIndia%2Fpm-narendra-modi-europe-vis-it-live-updates-germany-france-denmark-olaf-scholz-uk-raine-7896995%2F](https://twitter.com/ANI/status/1521515942735675393?ref_src=twsrc%5Etfw%7Ctwcamp%5Etweetembed%7Ctwterm%5E1521515942735675393%7Ctwgr%5E%7Ctwcon%5Es1_&ref_url=https%3A%2F%2Ffindianexpress.com%2Farticle%2FIndia%2Fpm-narendra-modi-europe-vis-it-live-updates-germany-france-denmark-olaf-scholz-uk-raine-7896995%2F).



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