The National Ayurveda Health Policy

2052 (1996)

Government of Nepal
Ministry of Health
Department of Ayurveda
The National Ayurveda Health Policy, 2052 (1996)

1. **Rationale:**
Ayurveda is a national method of therapy/treatment in Nepal. Like the heritage of Himalayas and water resources, the original practices, manuscripts, records of Ayurvedic treatment and medicinal use of abundant herbs has taken an important role in Nepal. With a view to effectively implementing the commitment of the Government towards Ayurvedic treatment, this Ayurveda Health Policy has been made.

2. **Objective:**
For the accomplishment of the objectives identified by the National Health Policy, 2048 (1991), the speciality of Ayurvedic treatment which has been preserving health and curing diseases from ancient times is timely. Its principal objective is to improve health condition of mass people and make them self-reliant on health service by officially and utmosty utilizing local medical herbs and medical entities which are easily available and can be used persistently.

3. **Form of Ayurvedic Treatment Service:**
The form of science of Ayurvedic treatment is based on Doshabushya Principle, special treatment technique and the utilization of the available local herbs, minerals and Jantab entities. Ayurvedic treatment will be developed as a special treatment method in the country in a phase-wise manner.

3.1 The present organization of the Department of Ayurveda will be reformed as required and various sections will be operated and
consolidated. Co-ordinate procedures will be followed with other departments and units under the Ministry of Health. The Department will co-ordinate the activities of governmental and non-governmental, national and international organizations relating to Ayurvedic treatment service, educational research and formation of medicines. Units will be established under the Department also to develop and expand the service of natural therapy, homoeopathy as well as other alternative systems of therapy.

3.2 The Ayurvedic Hospital Nardevi, existing at the central level, will be upgraded to 100 beds at present, and operated as a hospital providing specific Ayurvedic service by establishing different departments of Ayurveda. This Hospital will be operated under a Development Board.

3.3 In harmony with the policy to grant autonomy to and professionalize the existing Singhadurbar Vaidhyakhanam which has been approved by the Government in principle, the preparation formation and supply of Ayurvedic medicines will be well-managed and made effective, and it will also help strengthen national economy by producing qualitative medicines of international standards, and promoting exports.

3.4 The existing Ayurvedic Hospital, Dang, with 15 beds, will be converted into a Mid-Western Regional Ayurvedic Hospital, operated as a hospital providing special service, with necessary manpower and equipment and a medicine formation section and construction of necessary building under construction will be completed.
3.5 In the rest four Development Regions, regional hospitals with 15 beds and laboratory for medicine formation in each hospital will be established and operated.

3.6 The system of supervision, monitoring, evaluation and referral process of the technical and administrative functions of Ayurvedic hospital will be made effective, for the promotion of production, collection and protection of the herbs locally available and for utmost utilization thereof in Ayurvedic treatment, presently existing District Ayurvedic Health centers will be consolidated and even in the rest districts, a District Ayurvedic health centre, with required human resource and equipment, will be established in the headquarters of each district.

3.7 The Ayurvedic Dispensaries being currently operated will be equipped and made capable of producing, protecting, promoting of the herbs available in local level, in addition to the medicines to be sent by the Government of Nepal, and utmostly using them in technology and treatment; arrangements will be made to keep on establishing Ayurvedic Dispensaries in the centre of at least five village development committees, on the basis of density of population, local demand and people’s participation.

3.8 Buildings of Ayurvedic health centres and dispensaries will be built, and development of model herbs farm will be developed in the premises thereof.

4. **Mobilization of inter institutional and public participation:**

4.1 Health workers, wizards, women volunteers, birth-attendants, workers of social organization, who are providing medical service by way of herbs in a traditional manner in rural areas will be provided with trainings of growth, promotion collection protection
and use of herbs, and public participation will be mobilized in the Ayurvedic treatment service.

4.2 For co-ordination with Ayurvedic Sector, inter-institutional co-ordination committees will be set up and maintained at the governmental as well as non-governmental level, from national to rural level in the field of herbs, forest, conservation areas, environment, remote area development committee, agriculture, education sector etc.

5. Herbs farming, production and enterprise of medicines:

5.1 Qualitative business of herbs will be encouraged by developing model herbs farms in Himalaya, Mountainous and Terai regions and providing the people with knowledge on the use of the herbs in domestic treatment and their preparation, protection and promotion.

5.2 Co-ordination will be made with governmental and non-governmental organizations related with herbals, so as to maintain standards in domestic trade and export to foreign countries by identifying genuine herbals.

5.3 Governmental and non-governmental Ayurvedic medicine manufacturing companies established or to be established in the country will be encouraged to manufacture qualitative medicines on the basis of ‘Better Medicine Formation Code’ and imports will be reduced and export promoted. For this purpose, co-ordination will be made with the Department of Drug Administration as well as with related governmental bodies.

5.4 One Ayurvedic Medicine Examination Committee and laboratory will be developed for maintaining the quality of Ayurvedic
medicines to be imported from abroad or prepared in the country as well as for other technical works.

5.5 Nepal Ayurveda Pharmacopoeia will be collected and published in a timely manner.

6. **Ayurvedic education and human resource development:**

6.1 Taking into consideration of paramount role of qualified, efficient and duty-bond human resources in the technical field such as treatment, a National Ayurvedic Institute, equipped with necessary equipment as well as research centre, will be established under the Tribhuvan University, for enhancing and carrying on further development in effective production of Ayurvedic human resources carrying out functions being dedicated to the filed of Ayurveda and in standard of quality of its various dimensions (education, health and preparation of medicines).

6.2 Program of producing bachelor-level human resources in Ayurved will be conducted so that physical infrastructure will be developed in harmony with the objective to provide master level and P.H.D. level Ayurvedic education in the future.

6.3 As high-level human resource is required for the protection and overall development of Ayurveda in the context of providing the people with the cheap, easily accessible and relatively without side-effect (Nirapad) treatment service by having utmost mobilization of the natural resources of the country, the process of production of such high level human resource will be continuously operated without confining such human resource to the number required for the Government of Nepal.
6.4 Middle-level and basic-level Ayurvedic human resources will be produced, and educational programmers will be launched for this purpose.

6.5 Naïve foreign citizens who are desirous of pursuing industry knowledge of Ayurvedic medicines will be provided with an opportunity to study.

6.6 Arrangements will be made for study and training to the human resource that cannot be produced within the country in foreign countries as per necessity.

6.7 Arrangements will be made for in-service refresher trainings and study tours.

7. **Management of Ayurvedic Human Resources:**

7.1 Various organizational structures under the Ayurveda Group will be made responsive and service-oriented, for the consolidation of management aspect of Ayurvedic human resources.

7.2 Ayurvedic doctors and Ayurvedic health workers will be provided with the same allowances and special facilities as doctors or health workers of other systems are receiving or will receive.

8. **Ayurvedic Research:**

8.1 There will be established as Ayurvedic Research Institute furnished with the required equipment, for research of international standard in matters related with the use of Ayurvedic medicines and entities and the Ayurvedic treatment.

8.2 The Ayurvedic manuscripts available in the country will be preserved, data bank, reference library will be established, and timeliness reference materials will be published.
8.3 Magazines pertaining to the protection, farming, promotion, utility method, environmental education, of the herbs available in the country will be published, and national records thereof, prepared.

8.4 There will be launched a campaign of keeping protection and relevancy of the knowledge of traditional health workers perpetual.

8.5 For the above activities, co-ordination will be maintained with Ayurvedic Research Institute, National Ayurvedic Institute, Ayurvedic Hospitals, governmental and non-governmental Ayurvedic Medicine Companies and other related research institutes.

9. **Provision of mobilization of resources:**
   Assistance of native and foreign donor agencies will be made available so as to provide financial support to various programs of Ayurveda, to mobilize the acquired financial resources by promoting export of herbs and prepared medicines and to assist in the implementation of the said program.

10. **Nepal Ayurvedic Medicine Council:**
    There will be established a Nepal Ayurvedic Council at the national level for fixing necessary standards of Ayurvedic education and service, registration of doctors, well-arrangement of fixation, monitoring and evaluation of their jurisdiction.
Terms of Reference of
District Ayurvedic Health Centre

Objective:
The main objective of the District Ayurvedic Health Centre will be to supervise and evaluate the functions to be performed primarily by general Ayurvedic dispensaries in the districts as well as technical, administrative works of the dispensaries thereunder, to make coordination among the dispensaries, and to provide service as a model institution by producing medicines, to the maximum extent by mobilizing local herbals and other resources.

- To cure the patients who visit the Health Centre and who are referred by Ayurvedic Dispensaries.
- To operate some services of five functions (Panchakarma).
- To distribute or cause to be distributed the medicines obtained form the Government of Nepal in a well-planned manner.
- To prepare medicines from local herbals to the fullest extent possible and distribute them.
- To make model farming of herbals in the premises of the Health Centre, maintain inter-institutional co-ordination with governmental, non-governmental bodies on forest, agriculture, community forest etc. related with medical herbs and impart knowledge to traditional and other health workers, wizards, and social workers on production, collection, protection, promotion and maximum utilization, as medicine, of the medicinal herbals by conducting trainings, symposiums etc.
- To prepare an inventory and herbarium of local herbs.
- To evaluate and supervise technical and administrative aspects of the Ayurvedic Dispensaries under the district and extend assistance in their other programs.
- To make necessary arrangements for the prevention of epidemic in times of breaking out of such disease.
- To provide data of herbs and patients to the centre.
- To do, or cause to be done, functions as per other departmental directives.
Terms of Reference
of Ayurvedic Dispensary

Objective:
The main objective of the Dispensary will be to provide service by producing the medicines in the Dispensary, in order to make the health service self-sufficient to the maximum extent by mobilizing local herbs, in particular, and other resources.

- To do normal treatment of the patients visiting the Dispensary and refer them to the District Ayurvedic Health Centre, if necessary.
- To distribute the medicines sent by the Government of Nepal, in a well-planned manner.
- To produce, collect, protect and promote the herbs available in the local source and utilize them as Ayurvedic medicines to the maximum extent.
- To do herbs farming in the premises of the Dispensary, organize training to the local traditional health-workers, wizards and social workers, on production, collection, protection and promotion of the herbs as well as on their maximum utilization in Ayurvedic treatment, and to constitute co-ordination committees with governmental and non-governmental bodies in local level.
- To prepare inventory and sample of local herbs and send the same to the concerned body.

[Signature]
Bhumindra Khanal
(Technical Officer)
- Primarily, the Dispensaries located in the areas where a health post is not established are to carry out other services to be provided by the health post.
- In the times of the breaking out of epidemic, to make arrangements for its prevention.
- To send monthly data of patients to the concerned body.
- The do, or cause to be done, functions as per other departmental directive.

Bhuminand Khanal
(Technical Officer)
Organizational Chart of Ayurvedic Institutions

Government of Nepal
  Ministry of Health
    Nepal Ayurvedic Medical Council

Department of Ayurveda
  Ayurvedic Hospital Nardevi
  Singha Durbar Vadiya Khana
  Regional Ayurvedic Hospital-5
  District Ayurvedic Health Centres-75

Ayurvedic Dispensaries

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Organizational Chart of Ayurvedic Dispensary

Kabiraj

Vadhya-1
Distribution and storage of medicines

Peon -1

Vadhya-1
Formation of medicines, production, collection and promotion of herbals

Medicine Maker (Kutuwa) -2

1. Kabiraj –Non-gazetted first (Technical)
2. Vadiya-Non-gazetted second (Technical)
3. Peon of lower level
4. Medicine maker (Kutuwa) of lower level

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Total 6 +2
1. Officer kabiraj-gazetted 3rd class (Technical)
2. Kabiraj, Non-gazetted 1st class (Technical)
3. Vadhya, Non-gazetted 2nd class (Technical)
4. Auxiliary Nurse Mid-wife Non-gazetted 2nd class (technical)
5. Asst. Accountant, Non-gazetted 2nd class
6. Peon of lower level
7. Medicine maker (Kutuwa) of lower level

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Total 7 12 +5

Permission granted for the above translation as per the NOTARY PUBLIC ACT, 2077.

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(technical officer)