



CCRAS Vision Document 2030: A Short Appraisal

¹Narayanam Srikanth, ²Kartar S Dhiman

ABSTRACT

Central Council for Research in Ayurvedic Sciences (CCRAS), Ministry of AYUSH, Government of India, has formulated and projected “CCRAS Vision Document 2030” with a strategy of research and development for research outcomes in next 15 years considering the strength of Ayurveda and current unmet medical needs. The core components of the document comprise sustainable development goals (SDGs) of CCRAS for vision 2030 for 15 years, 7 years strategy (long-term vision), and 3 years action document, fundamentally harmonized with the goals and recommendations of major national and international health policy documents.

Keywords: Action plan, Research and development, Sustainable development goals.

How to cite this article: Srikanth N, Dhiman KS. CCRAS Vision Document 2030: A Short Appraisal. *J Res Ayurvedic Sci* 2017;1(2):125-130.

Source of support: Nil

Conflict of interest: None

INTRODUCTION

The CCRAS, an autonomous organization of Ministry of AYUSH, Government of India, is the apex body in India for undertaking, coordinating, formulating, developing, and promoting research on scientific lines in Ayurvedic sciences. The core research activities comprise medicinal plant research, drug standardization and quality assurance, pharmacological research, clinical research, literary research and documentation, tribal health care research program, and other research oriented to outreach and documentation activities, such as Swasthya Rakshan Program; Ayurveda Mobile Health Care Program; National Program for Control Diabetes, Cancer, Cardiovascular Diseases, and Stroke. The activities are carried out through its 30 institutes across the country and also through collaborative studies with various academic and research institutes, universities, hospitals in India and abroad.^{1,2}

¹Deputy Director General, ²Director General

^{1,2}Central Council for Research in Ayurvedic Sciences, Ministry of AYUSH, Government of India, New Delhi, India

Corresponding Author: Narayanam Srikanth, Deputy Director General, Central Council for Research in Ayurvedic Sciences Ministry of AYUSH, Government of India, New Delhi, India e-mail: srikanthccras@gmail.com

To take forward the objectives, the council has formulated and implemented “CCRAS-Research Policy” embodied with focused research priorities for research and development in Ayurveda in the areas ranging from medicinal plant research, drug standardization and quality assurance, pharmacological research, clinical research, literary research, to fundamental research, taking the core recommendations of major health policy documents into consideration.³ Further, CCRAS has projected “Vision Document 2030” with the strategy of research and development for focused research outcomes in next 15 years harmonized with the goals and objectives of major international and national policies on health including CCRAS-Research Policy.⁴

CCRAS VISION DOCUMENT 2030

The SDGs, officially known as Transforming Our World: The 2030 Agenda for Sustainable Development, are an intergovernmental set of aspiration goals with 169 targets. The goals are contained in paragraph 54 of United Nations Resolution A/RES/70/1 of September 25, 2015, where Goal 3 of the document focuses on ensuring healthy lives and promote well-being for all at all ages.⁵ The National Population Policy 2000,⁶ National Health Policy 2002,⁷ and the National Commission on Macroeconomic and Health—2005 of the Ministry of Health and Family Welfare, Government of India, emphasized on reorientation and prioritization of research in Ayurveda, Yoga and Naturopathy, Unani, Siddha and Homoeopathy (AYUSH) and to validate therapy and drugs in chronic and lifestyle-related diseases, mainstreaming from Indian systems of medicine and homoeopathy (ISM&H). Further, the recent three major documents related to health policy, viz., National Health Policy (NHP) 2017⁸; Situation Analyses—Backdrop to NHP 2017,⁹ Ministry of Health and Family Welfare, Government of India; and Three-Year Action Agenda 2017–2020 (draft),¹⁰ NITI Aayog, Government of India, highlighted on prevention through lifestyle advocacy, health care delivery through integration, colocation, and medical pluralism.

In the same way, considering the strength of Ayurveda in current unmet medical needs, the council has proposed a strategy of research and development with focused research outcomes in next 15 years emphasizing on development of new drugs based on leads from classical

Ayurveda texts for diseases of national importance and systematic validation of classical formulations and therapies with a vision statement “To develop scientific evidence in Ayurvedic Principles, drugs, therapies by way of integrating ancient wisdom with modern technology and to bring Ayurveda to the people through innovations related to diagnostics, preventive, promotive as well as treatment methods and also introduce scientific research for sustained availability of quality natural resources, to translate them into products and processes and in synergy with concerned organizations to introduce these innovations into public health systems.”⁴

The three essentials of CCRAS Vision Document 2030 embrace SDGs of CCRAS for vision 2030 (15 years), 7 years strategy (long-term vision), and 3 years action document which are broadly aligned with the goals, strategies, and recommendations of aforesaid national and international policies and documents.⁴

HIGHLIGHTS OF THE DOCUMENT

Principally analogous with the larger goals and strategies of important health-related policies, core strength of Ayurveda, and current health needs, the document is framed with core components, viz., SDGs of CCRAS for vision 2030 (15 years), 7 years strategy (long-term vision), and 3 years action document.⁴

- SDGs of CCRAS for vision 2030 (15 years) emphasizes on broader goals set for 15 years, such as translation of research outcomes into practice and making them accessible to health care providers and public, mainstreaming of Ayurveda therapies through integration, generation of evidence on safety and efficacy of classical Ayurveda approaches, dissemination of research outcomes, and infrastructure development for research and development.
- A 7-years strategy from 2017–2018 to 2023–2024 (long-term vision) to convert the long-term vision into implementable policy and action as a part of the National Development Agenda with a mid-term review after 3 years, i.e., the year ending March 2020, focuses on development and validation of Ayurvedic drugs and regimen for inclusion in the important national programs, such as add-on and adjunct therapies for multidrug-resistant tuberculosis; generation of evidence for prevention and management of disorders of vision, reproductive and child health, human immunodeficiency virus/acquired immunodeficiency syndrome, cancer; important communicable diseases, viz., malaria, dengue, filariasis, and noncommunicable diseases like diabetes, osteoarthritis, anemia; improvement of memory and cognitive function other psychiatric diseases, such as anxiety neurosis,

dementia, etc.; scientific evidence on safety of selected Ayurveda herbo-mineral drugs, etc.

- A 3-years action document from 2017–2018 to 2019–2020 aligned to the predictability of financial resources during the 14th Finance Commission Award period. This is also to help translate into action the goals of the government to be achieved by 2019 highlights upon development of the directives addressing different research needs; validation of fundamental principles of Ayurveda including Ayurveda biology; development of standard Ayurvedic terminologies, modules on behavioral change communication focusing on Ayurveda-based lifestyle interventions for prevention, health promotion, formats for clinical diagnosis, and clinical examination based on Ayurveda principles: Clinical decision support systems and hospital information management system (HIMS); projects on occupational health; drug development and commercialization of research products for cancer, wound healing, dengue, diabetes; dosage forms of hepato-protective agents; validation of classical Ayurveda formulations or classical Ayurveda drugs for chronic and refractory diseases, rheumatoid arthritis, osteoarthritis, hypertension, gout, urolithiasis, polycystic ovary syndrome, bronchial asthma, and chronic bronchitis; and dissemination of research outcomes.

For larger utility of stakeholders, CCRAS Vision Document 2030 is made available in the website of CCRAS at: <http://www.ccras.nic.in/> and also published in the current issue of JRAS: <http://www.jrasccras.com/>.

REFERENCES

1. CCRAS Annual report: 2015-16. New Delhi: Central Council for Research in Ayurvedic Sciences (CCRAS), Ministry of AYUSH, Govt. of India; 2016. [cited 2017 Aug 23]. Available from: http://www.ccras.nic.in/sites/default/files/viewpdf/Annual%20Report/Annual_Report-2015-16.pdf.
2. CCRAS. Memorandum of association and rules, regulations & bye-laws. New Delhi: Central Council for Research in Ayurvedic Sciences (CCRAS), Ministry of AYUSH, Govt. of India; 2015. [cited 2017 Aug 22]. Available from: <http://www.ccras.nic.in/sites/default/files/viewpdf/By-laws.pdf>.
3. CCRAS Research Policy. Central Council for Research in Ayurvedic Sciences (CCRAS), Ministry of AYUSH, Govt. of India. New Delhi: CCRAS Research Policy; 2015. [cited 2017 Aug 22]. Available from: http://www.ccras.nic.in/sites/default/files/viewpdf/CCRAS_RESEARCH_POLICY_approved.pdf.
4. CCRAS Vision Document 2030. Central Council for Research in Ayurvedic Sciences (CCRAS), Ministry of AYUSH, Govt. of India. New Delhi: CCRAS Vision Document 2030; 2017. [cited 2017 Aug 22]. Available from: <http://www.ccras.nic.in/sites/default/files/viewpdf/Vision%20and%20Mission.pdf>.
5. United Nations. Transforming the World: achieving the sustainable development goals. United Nations; [cited 2017

- Aug 22]. Available from: <https://sustainabledevelopment.un.org/content/documents/21252030%20Agenda%20for%20Sustainable%20Development%20web.pdf>.
6. The National Population Policy 2000. Department of Family Welfare, Ministry of Health and Family Welfare, Govt. of India. New Delhi: The National Population Policy 2000; 2002. [cited 2017 Aug 23]. Available from: <http://mohfw.nic.in/sites/default/files/26953755641410949469%20%281%29.pdf>.
 7. National Health Policy. Ministry of Health and Family Welfare, Govt. of India. New Delhi: National Health Policy; 2002. [cited 2017 Aug 23]. Available from: <http://mohfw.nic.in/sites/default/files/18048892912105179110National.pdf>.
 8. National Health Policy-2017 (NHP 2017). Ministry of Health and Family Welfare, Govt. of India. New Delhi: NHP; 2017. [cited 2017 May 15]. Available from: https://www.nhp.gov.in/NHPfiles/national_health_policy_2017.pdf.
 9. Situation Analyses-Backdrop to NHP 2017. Ministry of Health and Family Welfare, Govt. of India. New Delhi: NHP; 2017. [cited 2017 Aug 23]. Available from: <http://mohfw.nic.in/sites/default/files/71275472221489753307.pdf>.
 10. Three Year Action Agenda 2017-2020, (Draft). National Institution for Transforming India, Govt. of India. New Delhi: NITI Aayog; 2017. [cited 2017 Aug 23]. Available from: <http://niti.gov.in/writeraddata/files/coop/IndiaActionPlan.pdf>.

हिंदी सारांश

सी. सी. आर. ए. एस. लक्ष्य आलेख २०३०: एक संक्षिप्त मूल्यांकन

¹नारायणम श्रीकांत, ²करतार एस धीमान

केंद्रीय आयुर्वेदीय विज्ञान अनुसंधान परिषद्, आयुष मंत्रालय, भारत सरकार ने वर्तमान समय की चिकित्सीय आवश्यकताओं एवं आयुर्वेद के सामर्थ्य को ध्यान में रखते हुए अग्रिम 15 वर्षों में अनुसंधान के परिणामों के लिए अनुसंधान एवं विकास की नीति के साथ 'सी. सी. आर. ए. एस. लक्ष्य आलेख २०३०' को सूत्रबद्ध किया है। इस आलेख के मूल अवयव हैं। अग्रिम 15 वर्षों के लिए सी. सी. आर. ए. एस. के सतत विकास लक्ष्य, सात वर्षों की नीति (दीर्घकालीन लक्ष्य) तथा तीन वर्षों की कार्ययोजना आलेख, लक्ष्यों के साथ मौलिक सामंजस्य तथा प्रमुख राष्ट्रीय एवं अंतर्राष्ट्रीय स्वास्थ्य नीति की अनुशंसा का आलेख।

आयुष
ayush

VISION DOCUMENT 2030



CENTRAL COUNCIL FOR RESEARCH IN AYURVEDIC SCIENCES MINISTRY OF AYUSH, GOVERNMENT OF INDIA JANAKPURI, NEW DELHI

Background

The SDGs, officially known as Transforming our World: The 2030 Agenda for Sustainable Development, are an intergovernmental set of aspiration goals with 169 targets. The goals are contained in paragraph 54 of United Nations Resolution A/RES/70/1 of September 25, 2015.

Considering the strength of Ayurveda in current unmet medical needs, the council has proposed the following strategy of research and development with focused research outcomes in next 15 years on development of investigational new drugs based on leads from classical Ayurveda for diseases of national importance besides systematic validation of classical formulations and therapies.

Vision 2030

Vision Statement of CCRAS: To develop scientific evidence in Ayurvedic principles, drug therapies by way of integrating ancient wisdom with modern technology and to bring Ayurveda to the people through innovations related to diagnostics, preventive, promotive, as well as treatment methods and also introduce scientific research for sustained availability of quality natural resources, to translate them into products and processes and in synergy with concerned organizations to introduce these innovations into public health systems.

SDGs of CCRAS for Vision 2030 (15 Years)

- Translation of research outcome into clinical practice through commercialization of new drugs developed by CCRAS through translational research for making them accessible to the public.
- Mainstreaming of Ayurveda therapies through integration and including them in a national health program.
- Development of new drugs/combinations based on the leads from classical literature and also from local health traditions on different conditions to meet the demand of unmet medical needs.
- Development of safe/effective products for diseases of national and global importance as add-on/adjuvant therapies and also for stand-alone management for improvement of quality of life.
- Generation of scientific evidence on safety of Ayurvedic formulations and therapies.
- Revalidation of certain classical formulations for evidence on safety and efficacy.
- Dissemination of research outcome through appropriate media for sustainable utilization by medical practitioners and public.
- Research and development infrastructure development to improve the quality of research.
 - A 7-years strategy from 2017–2018 to 2023–2024 (long-term vision) to convert the long-term vision into implementable policy and action as a part of the National Development Agenda with a mid-term review after 3 years, i.e., the year ending March 2020.

Development and validation of Ayurvedic drugs and regimen for inclusion in the important national program, viz.

- Development of add-on/adjuvant therapies for multidrug-resistant tuberculosis for improvement of quality of life and introducing in National Tuberculosis Control Programme.
- Evidence-based Ayurvedic intervention for improvement of vision and prevention of blindness for inclusion in the National Programme for Prevention and Control of Blindness for disease, such as glaucoma, retinal disorders, neuro-ophthalmic conditions.

- Integration of Ayurveda in National Reproductive and Child Health Programme by developing evidence-based Ayurvedic interventions for antinatal, postnatal, and child health care.
- Development of Ayurvedic interventions for improvement in quality of life in different types of cancers.
- Generation of evidence on Ayurvedic interventions and drugs as add-on/adjutant therapies in human immunodeficiency virus/acquired immunodeficiency syndrome (AIDS) for inclusion in national AIDS control program.
- Evidence-based Ayurvedic drugs for National Control Programme for Vector-borne/Infectious Diseases like filariasis, dengue, and malaria, etc., which are challenging needs of the country.
- Development of products for chronic refractory noncommunicable diseases and lifestyle disorders where conventional system of medicine has limited role in management, viz., diabetes mellitus, hypertension, osteoarthritis, rheumatoid arthritis, preventive cardiology, skin diseases, allergic disorder, hepatobiliary disorders, mental health, and metabolic disorders.
- Development of drugs and products for improvement of memory and cognitive function and other psychiatric diseases, such as anxiety neurosis, dementia, etc.
- Development of drugs and products for improvement of nutritional disorder like anemia.
- Generation of scientific evidence on safety and toxicity of selected Ayurveda herbal and herbo-mineral drugs.
 - A 3-years action document from 2017–2018 to 2019–2020 aligned to the predictability of financial resources during the 14th Finance Commission Award period. This is also to help translate into action the goals of the government to be achieved by 2019.

RESEARCH PLAN (FOR 3 YEARS)

- Development of the directives addressing different research needs, viz., (i) drug development (addressing issues of quality, shelf-life, safety issues, and other requirements); (ii) safety evaluation (preclinical); and (iii) clinical research for Ayurveda, Yoga and Naturopathy, Unani, Siddha and Homoeopathy (AYUSH) interventions.
- Validation of fundamental principles of Ayurveda including Ayurveda biology, such as
 - Standardization and validation of Panchakarma procedures including physiological/metabolic changes due to Panchakarma
 - Panchakarma and microbiome
 - Biology of gunas in health and disease
 - Understanding of shat-kriyakala
 - Scientific rationale of swasthavrita
 - Understanding Rasa, Guna, Virya, and Vipaka with reference to action of Ayurvedic drugs
 - Development of wellness index and quality-of-life instruments based on Ayurveda
 - Ayurvedic intervention for medicine and public health, etc., in a phased manner
- Development of standard Ayurvedic terminologies and its publication in different volume in a phased manner.
- Short-term projects on occupational health, such as respiratory disorders, computer vision syndrome, generalized anxiety disorder/stress, etc.
- Development of modules on behavioral change communication focusing on Ayurveda-based lifestyle interventions for prevention of diseases, health promotion, disease management, and mechanism for effective implementation of Ayurveda-based behavioral interventions in association with clinical psychologists in CCRAS institutes.
- Development of comprehensive, pragmatic, adaptable, and an Ayurvedic user-friendly format for clinical diagnosis and clinical examination for utilization among health care professionals and its validation.
- *ICMR collaboration*: Collaborative research with ICMR based on available leads with council, viz., AYUSH 82 for diabetes, Sunthi Guggulu for rheumatoid arthritis, identifying the gaps besides validation of Ayurvedic coded drug in the management of dengue, fatty liver degeneration, and hepato-protection as an add-on to anti-tubercular therapy.
- Development and validation of clinical decision support systems and HIMS and e-management.
- Development and commercialization of coded Ayurvedic drug AYUSH-QOL-2C for improvement of quality of life of cancer patients.
- Validation and value addition to stand-alone Ayurveda interventions (Carctol-S) for management of certain cancer, such as cervical and ovarian cancer through collaborative research.
- Validation, product development, and commercialization of Ayurvedic coded drug of C1 oil for wound healing and eczema.

- Product development and commercialization of coded Ayurvedic drug AYUSH PJ-7 for management of dengue.
- Development of dosage form for hepatoprotective agents (with focus on add-on/adjuvant therapy to antitubercular drugs) from Ayurvedic leads—*Phaltrikadi Kwatha*.
- Clinical validation and product standardization of *Gomutra Haritaki* for the management of fatty liver degeneration.
- Development and commercialization of coded Ayurvedic drug AYUSH-D for diabetes mellitus.
- Clinical safety and efficacy studies of classical Ayurveda drugs for chronic and refractory diseases like rheumatoid arthritis, osteoarthritis, hypertension, gout, kidney stone, urolithiasis, polycystic ovary syndrome, bronchial asthma, chronic bronchitis.
- Generation of scientific evidence on safety of 10 metal/mineral-based Ayurvedic formulations at good laboratory practice laboratories.
- Dissemination of research outcomes of the council through press release, audio-visual documentary, AYUSH research journal, etc., in a phased manner.
- Establishing linkages with CSIR and identification of areas for collaborative research.
- Outreach programs for extending health care and documentation:
 - Tribal Health Care Research Programme (under Tribal Sub Plan) in 14 states;
 - Swasthya Rakshan Programme linked with Swachha Bharat in 19 states;
 - Ayurveda Mobile Health Care Programme under Scheduled Castes Sub Plan in 18 states;
 - NPCDCS Programme.

