Ayurvedic Traditions within the Indian Knowledge System (IKS) and Awareness of Traditional Medicines among Secondary School Students

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Abstract

The continued relevance of Ayurveda in the contemporary world can be attributed to its holistic approach, emphasis on cultural localism, and strong focus on preventive health. The paper also investigates the knowledge of the traditional Ayurvedic medicines, a vital part of the Indian Knowledge System (IKS), among students of secondary school in Kerala. A stratified sampling of 400 students was used and a survey was carried out to determine the level of awareness of the students under the categories of gender, locality and school management. Descriptive measures and t-tests on independent samples were part of the statistical analysis. The findings indicated that there was a considerable disparity in the awareness according to gender because girls exhibited higher awareness as compared to boys. It was also determined that there was a substantial locality based difference with rural students appearing more aware than the urban students, implying that they were exposed to more Ayurvedic information and services in rural areas. There was also a considerably high awareness among students in aided school as opposed to students in government schools. The results accentuate the necessity of including traditional health knowledge and Ayurvedic concepts into a school-level health education with a fair access to the IKS based awareness by all categories of students.

Keywords: Ayurveda, Indian Knowledge System, Secondary Students, Traditional Medicine.

INTRODUCTION

The Indian Knowledge System (IKS) is one of the oldest and most advanced systems of indigenous wisdom on the planet, which includes philosophical, scientific, cultural, and whole-body systems of health. At the centre of this tremendous intellectual legacy stands Ayurveda, a primeval medical science that has developed during the course of the history of over 5000 years and continues to exist as a living tradition practiced in India on a vast scale. Based on the principle of balance, prevention, and harmony of the body, mind, and environment, Ayurveda is the best example of the holistic worldview which defines IKS. It not only provides curative knowledge, but also principles of lifestyles, dietary rules, and preventive methods that are quite timely these days.

IKS, especially Ayurveda, has become a trend in modern healthcare and education because societies all around the world are experiencing an explosion of lifestyle diseases and stress-related illnesses and excessive use of allopathic treatments even in cases of minor conditions. Kerala, with its great tradition of Ayurvedic culture is a unique place in the world where ancient cultures are in coexistence with the modern medicine. Nonetheless, in spite of this cultural and geographical advantage, the diminishing knowledge of the traditional medical wisdom is a growing concern in the younger generations. Especially adolescents are becoming dependent upon the pharmacological quick-fix solutions, which they often overlook the readily available, safe and effective Ayurvedic home management practices that lead to long-term wellbeing.

The National Education Policy (NEP) 2020 emphasizes the necessity to incorporate Indian Knowledge Systems in the mainstream education process with Ayurveda and traditional health practices being among the important areas of knowledge. Educating school children on the importance of valuing indigenous knowledge is thus of paramount importance in building respect to indigenous knowledge, health literacy, and continuity of the traditional practices within the society.

It is envisaged that health education taught at the school level will give the learners the relevant skills to sustain physical, emotional, social and environmental health. Making Ayurveda integrated in this framework can add value to the knowledge of students on preventive health, eco-friendly living, and sustainable health practices in accordance with the cultural identity of India.

Although Ayurveda is relevant to Kerala at past and present, there is a lack of empirical research on the awareness of adolescents with regard to Ayurvedic traditional remedies. The level of awareness of secondary school students is imperative in understanding what students need to know and how curriculum interventions can be designed as well as empowering programmes that promote holistic health practices among school-going children.

The present study investigates the awareness of traditional Ayurvedic medicines among secondary school students in Kerala, with specific attention to variations across gender, locality, and management of institutions. The findings are expected to contribute to ongoing

efforts to integrate IKS into health education and promote informed appreciation of India's traditional medical heritage.

OBJECTIVES OF THE STUDY

1)   To find out the mean Awareness of Traditional Ayurvedic Medicines among secondary school students in Kerala for the total sample and sub samples .

2)   To compare the mean Awareness of Traditional Ayurvedic Medicines among secondary school students between the subsamples based on Gender of students, Locality and Management category of schools.

METHODOLOGY

Survey method was used for the study. The tool used for the present study was Awareness Test on Traditional Ayurvedic Medicines for secondary school students which was prepared by the investigators. The investigators sought help of practitioners of traditional medicine and some local personalities regarding the matter, for getting knowledge about home remedies related to some common illness.

Sample used for the present study was 400 secondary school students selected using random sampling method, giving due representation to factors like Gender of students, Locality and Management category of schools. Preliminary statistical techniques and Test of significance of difference between means were made use for the study.

RESULTS

Preliminary Analysis

The scores obtained were subjected to preliminary analysis before applying further statistical procedures. The major statistical constants—Mean, Median, Mode, Standard Deviation, Skewness, and Kurtosis—were computed for the variable studied. The statistical characteristics of the data are presented in Table 1.

Table 1
Statistical Indices of the Variable

Variable	Sample Size	Mean	Median	Mode	Standard Deviation	Skewness	Kurtosis
Awareness of Traditional Ayurvedic Medicines	400	14.12	14.50	15.20	4.05	–0.42	0.18

Comparison of Mean Awareness of Traditional Ayurvedic Medicines

Secondary school students in Kerala were categorised into different groups and their scores were compared using the two-tailed test of significance of difference between means (t-test). Comparisons were carried out based on:

a) Gender
b) Locality
c) Type of Management

i) Gender Difference

Table 2
Comparison of Mean Awareness Between Boys and Girls

Subsample	Sample Size	Mean	Standard Deviation	t-value
Boys	180	13.45	3.82	2.05*
Girls	220	14.60	4.18	

* Significant at 0.05 level

ii) Rural–Urban Difference

Table 3
Comparison of Mean Awareness Between Urban and Rural Students

Subsample	Sample Size	Mean	Standard Deviation	t-value
Rural	190	15.00	4.12	3.683**
Urban	210	13.50	4.01	

** Significant at 0.01 level

iii) Government–Aided Difference

Table 4
Comparison of Mean Awareness Between Government and Aided School Students

Subsample	Sample Size	Mean	Standard Deviation	t-value
Government	210	13.52	4.20	2.72**
Aided	190	14.78	3.90	

** Significant at 0.01 level

DISCUSSION

Table 1 indicates that the skewness in the distribution of the scores of awareness is slightly negative which implies that there is a slight clustering of students above the mean level of awareness of traditional Ayurvedic medicines.

The analysis of gender-wise comparison revealed that girls are much more aware as compared to boys. This can be explained by the fact that the female students tend to be more interested in health, wellbeing, and conventional lifestyle habits. It also show an improvement of exposure or interest on the health related traditional knowledge.

The locality based comparison of the school has indicated a major difference between the urban and rural students. The level of awareness was higher among rural students and it could be explained with the fact that the rural areas have a better access to Ayurvedic clinics, wellness centres and health-oriented outreach programmes that are widely spread in the rural environments. Also, this difference could be brought about by health campaigns and increased inclusion of traditional wellness products in their lifestyles.

There was also a large difference in management based part with a higher score among aided school students compared to their counterparts in government schools. This could be an indication of the difference in the educational level of the parents, the school, or health education programmes undertaken in community networks.

CONCLUSION

The results of the study has shown that there is a definite disparity in the awareness of Traditional Ayurvedic medicines in students of school going in Kerala on the basis of demographic aspects and institutional aspects. Girls are much more aware compared to boys and students in the aided schools performed well as compared to government schools. Notably the results show that the rural students are much more aware compared to the urban students and this implies that there is uneven distribution of exposure to knowledge and services provided by Ayurveda among different localities.

Awareness creation of Ayurveda as a part of the Indian Knowledge System (IKS) is vital in enhancing the knowledge of the students concerning holistic health, preventive care, and native medical wisdom. Schools are important in making sure that all learners regardless of gender, locality, and type of school will acquire sufficient knowledge in the traditional system of medicine and how medicinal plants contribute to the wellbeing of human beings.

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