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Indigenous knowledge, wisdom and values for better universities worldwide: The case from medicine

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Medicine in the present is more of a subjective adjective to technology where physicians are companions to ascertain tools provided for aid of diagnostic methods and treatment procedures produced by the technology which are similar to gadgets and a robotic way of approach towards wellness and wellbeing of person who is diagnosed to have a disease or condition where in one cannot carry on the regular activities of the person of daily life.

Education system centers the knowledge base with the technology around and not focusing on age old traditions or the wisdom which is resulting in breeding of robots who are assisted by machines rather than physicians who can assist the person suffering from disease to get back normal health and wellness is complete care which is to be sorted off.

A question of is traditional part of modernization of modernization is a part of tradition is be addressed to the students getting trained to be tomorrow doctors where in the bio ethics are to included in the syllabus and further they can be main streamed, these are to be picked up by the knowledge of wisdom from experienced people within the community rather than a rule of book which is included in the curriculum and this would not even get in to the students of different cultural background.

As Germany is heated up with a debate on circumcision, even though it is a ritual in a religion and it has been widely practiced all around the world, human right and child right are bringing up a question of right of a individual for such procedures, how can these be into the mainstream education, if rituals are not included then how it can be supported with community medicine which holds a strong pillar in education of medical doctor for further practice.

Indigenous knowledge has answers for need of today wellness and care, where the diversities of commoditization or essentialism is to be ascertained including philosophies would somewhere enable the remove the tag of colonism and they need to be centralized for catering to need of the community and present conditions. The dual word MEDICAL PLEURALISM which is supporting MEDICAL TOURISM and training to be focused on entrepreneurship rather employment.

Biography

Amina Ather, Presently working as Scientific Director, TSM (Traditional System of Medicine), Medizin Park Ruhr, Dusseldorf, Germany. Done her Bachelors in Unani medicine and Surgery, MD (Pharmacology - Clinical trial with single herb of Unani medicine, Ph.D. (Empowerment of Muslim women through green pharmacy) and MCA (masters of computer Application). She Has been nominated for guinness book of records for creating database of medicinal plants from 12 countries and recoding photography digital source. Has been working in the field of TCAM since 2001, has been awarded by ford foundation to create 24 entrepreneurs from zakat money. Has covered more than 700 schools and 300 villages in india and around the world on educating women in health education, she has 17 patents of herbals cosmetic products with halal certification, and 2 from FDA. At present she is working with Medizin Park Ruhr, Castrop Rauxel, Dusseldorf, Germany as scientific director for TCAM to develop opportunities for TCAM fraternity in academics, research and training in Europe with the support of EMA and EPMA (European Medical Association and Association for predictive preventive and personalized medicine). She would be the first unani physician to start her practice in Europe as a physician with the support of MPR. She has visited various universities as guest lecturer and some of them are University of western cape (South Africa), Al ain University (UAE), University of Colombo (Sri Lanka) International Institute of Advanced Islamic Studies (IAIS) (Malaysia), Cancer institute of south Africa, Ourban, south Africa) and many more. Visited around 15 countries as an invited speaker.

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