GOVERNMENT OF INDIA HEALTH AND FAMILY WELFARE LOK SABHA

STARRED QUESTION NO:390 ANSWERED ON:07.09.2012 AYUSH SYSTEM Singh Shri Radha Mohan

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

- (a) the total number of registered practitioners, hospitals, dispensaries, recognized Graduate and Post Graduate colleges and research centres under the Ayurveda, Yoga and Naturopathy, Unani, Siddha and Homoeopathy (AYUSH) system of medicines, State/UT-wise:
- (b) the steps taken so far by the Government for integration of AYUSH system of medicine in the national healthcare delivery system, particularly in the under-served, remote and tribal areas of the country;
- (c) whether the Government has assessed the quality of infrastructure, presence of human resource, supply of medicines, and records among both standalone and co-located AYUSH facilities in the country;
- (d) if so, the details along with the outcome thereof; and
- (e) the steps taken/proposed by the Government to ensure optimal use of AYUSH system of medicine and appointment of physicians in the said stream, particularly in the under-served, remote and tribal areas across the country?

Answer

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI GHULAM NABI AZAD)

(a)to(e): A statement is laid on the Table of the House.

STATEMENT REFERRED TO IN REPLY TO LOK SABHA STARRED QUESTION NO.390 FOR 7TH SEPTEMBER, 2012

- (a) As per the information received from States/UTs and regulatory councils, the details of total number of registered practitioners, hospitals, dispensaries, recognized Graduate and Post Graduate colleges and research centres under the Ayurveda, Yoga and Naturopathy, Unani, Siddha and Homoeopathy (AYUSH) systems of medicine, State/UT-wise are enclosed at Annexure-I (a), I (b), I(c), I (d), I (e), I (f) respectively.
- (b) The National Policy on Indian Systems of Medicine & Homoeopathy- 2002, envisages integration of AYUSH with the Health Care Delivery System. Mainstreaming of AYUSH is one of the core strategies in National Rural Health Mission (NRHM) as well which seeks to provide accessible, affordable and quality health care in order to improve the existing health care delivery system. The NRHM seeks to revitalize local health traditions and mainstream AYUSH (including manpower and drugs) to strengthen the Public Health System at all levels. Central Government only provides financial assistance to the State Governments and is not directly involved in the appointment of AYUSH doctors and procurement of medicines.

Co-located AYUSH facilities:

Government of India had adopted a strategy of Co-location of AYUSH facilities at Primary Health Centres (PHCs), Community Health Centres (CHCs) and District Hospitals (DHs), thus enabling choice to the patients for different systems of medicine under single window besides supporting the effort of the States to strengthen the stand-alone AYUSH Hospitals and Dispensaries. The engagement of AYUSH doctors/ paramedics is supported under NRHM flexipool being implemented by the Department of Health and Family Welfare provided they are co-located with existing District Hospitals (DHs), Community Health Centres (CHCs), Primary Health Centres (PHCs) with priority given to remote PHCs and CHCs. Support for AYUSH medicines is also being provided at the AYUSH co-located facilities under NRHM flexipool. In addition, Department of AYUSH provides the financial assistance to the States for AYUSH infrastructure, equipment/furniture and medicines at co-located facilities under Centrally Sponsored Scheme for Development of AYUSH Hospitals and Dispensaries.

Stand-alone AYUSH facilities:

Further-more, Department of AYUSH is also providing financial assistance to the States/UTs for upgradation of stand-alone AYUSH Hospitals and Dispensaries, supply of essential drugs in these stand-alone AYUSH Hospitals and Dispensaries and setting up of Programme Management Units (PMUs) etc. For North-Eastern States including Sikkim and hilly States, the Department of AYUSH also provides financial assistance for setting up of 50/10 bedded Integrated AYUSH Hospitals. Under this component, the States of Manipur, Tripura, Mizoram and hilly States of Himachal Pradesh, Uttarakhand, Jammu & Kashmir have been supported for setting up

of 50 bedded Integrated AYUSH Hospital and the States of Assam, Arunachal Pradesh, Nagaland, Meghalaya and Sikkim for 10 bedded Integrated AYUSH Hospital.

(c)to(e) While no such assessment has been done, steps have been taken by the Central Government, as stated in reply to parts (a) & (b) above for optimal use of AYUSH systems of medicine and appointment of physicians in the said stream and for propogation of AYUSH services.