

**GOVERNMENT OF INDIA  
MINISTRY OF HEALTH AND FAMILY WELFARE  
DEPARTMENT OF HEALTH AND FAMILY WELFARE**

**RAJYA SABHA  
UNSTARRED QUESTION NO 1710  
TO BE ANSWERED ON 10.12.2024**

**EFFECTIVENESS OF CURRENT NAP-AMR POLICIES**

**1710. DR. SYED NASEER HUSSAIN:**

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

- (a) the status of implementation of the National Action Plan on Antimicrobial Resistance (NAP-AMR) 2.0, launched in 2022, particularly its efficacy in controlling AMR across regions in rural to semi-rural settings;
- (b) whether there is a specific AMR-focused assessment planned to measure its impacts in critical areas;
- (c) the percentage of healthcare centres complying with the AMR guidelines set by the ICMR;
- (d) the current barriers in scaling the Antimicrobial Resistance Surveillance Network (AMRSN) to cover rural clinics and hospitals with limited surveillance; and
- (e) the details of funds allocated to address such challenges?

**ANSWER**

**THE MINISTER OF STATE IN THE MINISTRY OF HEALTH & FAMILY  
WELFARE  
(SHRI PRATAPRAO JADHAV)**

(a) & (b): The draft National Action Plan on Antimicrobial Resistance (NAP-AMR) 2.0 has been developed in a Whole-of-Government approach in consultation with 17 Ministries and Departments. The updated NAP-AMR is currently in draft stage.

(c) ICMR has been working with tertiary care hospitals and has helped the hospitals which are part of ICMR initiatives to come up with their hospital antibiotic policy document. The data on compliance to guidelines is measured at the level of hospital and is not maintained at Ministry.

(d) & (e): To generate relevant evidence on the extent of drug resistance and a nationally representative reliable data on AMR, ICMR initiated Antimicrobial Resistance Surveillance and Research Network (AMRSN) in 2013. AMRSN includes six Nodal Centres (NCs) for each pathogenic group located in tertiary care medical institutions and 16 Regional Centres (RC) to provide data across the country on fixed number of isolates for each pathogenic group.

Further, the Government through the National Centre for Disease Control (NCDC) is coordinating the National AMR surveillance network under which State Government medical college hospitals/laboratories are being strengthened for AMR surveillance and containment.

These institutions are involved in management of patients from all areas including rural and semi-rural. Trainings are held round the year for AMR data management using the offline software. Capacity building is also done on specialized lab testing procedures. Trainings are imparted to healthcare workers on Infection prevention and control.

Public Health and Hospitals is a State Subject and the responsibility of strengthening public healthcare system lies with the respective State/ UT Governments. The Ministry of Health and Family Welfare provides technical and financial support to the States/UTs to strengthen the public healthcare system, based on the proposals received in the form of Programme Implementation Plans (PIPs) under National Health Mission.

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