

**GOVERNMENT OF INDIA
MINISTRY OF AYUSH**

**RAJYA SABHA
STARRED QUESTION No. 257
TO BE ANSWERED ON 17.03.2026**

Integration of AYUSH in public health facilities

257 Smt. Rajani Ashokrao Patil:

Will the Minister of *Ayush* be pleased to state:

- (a) whether Government has reviewed the extent of integration of AYUSH systems of medicine in public health facilities;
- (b) the number and proportion of hospitals where AYUSH services are co-located or integrated, State-wise;
- (c) the nature and adequacy of training and orientation provided to AYUSH practitioners and allopathic staff to ensure safe, evidence-based and coordinated care;
- (d) whether patient outcomes and cost-effectiveness of such integrated services have been systematically assessed; and
- (e) whether Government has examined concerns that parallel medical systems may strain already limited public health resources, the steps taken to ensure optimal utilisation without compromising quality of care?

ANSWER

**THE MINISTER OF STATE (IC) OF THE MINISTRY OF AYUSH
(SHRI PRATAPRAO JADHAV)**

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

The Statement referred in reply to Rajya Sabha Starred Question No. 257 for 17.03.2026

(a) Every year Ministry of Health & Family Welfare (MoHFW) organizes the Common Review Mission (CRM) in various States/UTs across the country. The objective of the CRM is to undertake a rapid assessment of the functional status of various health programmes running under the National Health Mission (NHM) including mainstreaming of Ayush systems in public health facilities.

(b) to (c) Government of India has 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 medicines under single window. The engagement of Ayush Doctors/paramedics and their training is supported by MoHFW under NHM, while the support for Ayush infrastructure, equipment /furniture and medicines is provided by Ministry of Ayush under National Ayush Mission (NAM) as shared responsibilities.

Mainstreaming of Ayush has been taken up in 13,249 Ayush facilities co-located under NHM (6,302 PHCs, 3,191 CHCs, 475 DHs, 3281 other health facilities) as an initiative towards strengthening evidence-based integration of Ayush System and to scale up Ayush services across the country for providing health care services to the community. In addition to this Ayush doctors are also deployed for various allied programs like Rashtriya Bal Swasthya Karyakram (RBSK), National Programme for Prevention and Control of Cancer, Diabetes, Cardiovascular Diseases and Stroke (NPCDCS) as well as other Public Health Programmes and their services are being used as per the felt need by providing appropriate training and orientation. Also, a total of 24,183 Ayush doctors, 2,265 Ayush paramedics and 3,404 Ayush Pharmacists have been deployed in the States/UTs with NHM funding support. Details of number of hospitals where Ayush services are co-located, State/UT-wise is furnished at **Annexure**.

Further, to support evidence-based clinical practice and facilitate coordinated care, Standard Treatment Guidelines (STGs) for Ayush systems has been developed by the Ayush Vertical under the Directorate General of Health Services (DGHS), MoHFW for six common musculoskeletal disorders and five common metabolic disorders. Following their publication, national-level Master Trainer programmes have been conducted in collaboration with the Central Health Education Bureau to support capacity building and facilitate cascading training programmes across States and Union Territories.

(d). No such assessment has been conducted.

(e). The National Health Policy (NHP), 2017 provides a strategic framework for mainstreaming Ayush within a pluralistic and integrative health system, emphasizing coordinated service delivery, rational deployment of practitioners, and convergence with national health programmes. Integration is primarily operationalised through co-location and functional linkage models, thereby leveraging existing public health infrastructure without duplicating services.

Number of hospitals where Ayush services are co-located, State/UT-wise

S. No	State/UTs	DH	CHC	Other than CHC at or above block level but below district level	PHC	Other health facilities above SC but below block level	Total
1	Bihar	36	0	0	0	1348	1384
2	Chhattisgarh	18	98	0	454	0	570
3	Himachal Pradesh	0	0	0	0	0	0
4	Jammu & Kashmir	13	14	0	373	571	971
5	Jharkhand	21	188	0	97	225	531
6	Madhya Pradesh	36	95	0	275	0	406
7	Odisha	0	351	0	886	0	1237
8	Rajasthan	2	56	4	127	1	190
9	Uttar Pradesh	91	691	0	687	31	1500
10	Uttarakhand	13	53	7	44	0	117
11	Arunachal Pradesh	16	34	0	50	5	105
12	Assam	18	7	4	71	500	600
13	Manipur	7	17	1	85	0	110
14	Meghalaya	11	25	0	54	0	90
15	Mizoram	12	9	1	10	38	70
16	Nagaland	9	20	0	9	0	38
17	Sikkim	4	1	0	4	0	9
18	Tripura	3	21	11	84	0	119
19	Andhra Pradesh	9	105	0	273	0	387
20	Goa	2	6	2	22	1	33
21	Gujarat	0	0	0	868	0	868
22	Haryana	22	102	0	106	5	235
23	Karnataka	20	190	139	163	0	512
24	Kerala	0	0	0	0	0	0
25	Maharashtra	23	238	0	20	0	281
26	Punjab	22	66	18	87	8	201
27	Tamil Nadu	37	388	0	475	0	900
28	Telangana	3	100	0	449	0	552
29	West Bengal	13	295	54	387	95	844
30	Andaman Nicobar Islands	3	4	0	20	0	27
31	Chandigarh	1	2	2	33	0	38
32	Dadra & Nagar Haveli and Daman & Diu	2	1	1	14	1	19
33	Delhi	0	0	0	0	208	208
34	Ladakh	2	7	0	32	0	41
35	Lakshadweep	2	3	0	4	0	9
36	Puducherry	4	4	0	39	0	47
	TOTAL	475	3191	244	6302	3037	13249