Role of Ayurveda in National Health Programs

Kumbhar Jayesh Laxman¹

¹Department of Swasthavritta and Yoga Dr. G.D. Pol Foundation YMT Ayurvedic Medical College and Hospital, Kharghar

Corresponding Author:-Kumbhar Jayesh Laxman

Email ID:- drjayeshkumbhar@gmail.com

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Abstract -

India has several National Health Programs aimed at improving public health across various domains. These programs address a wide range of health issues, including infectious diseases, non-communicable diseases, maternal and child health, and mental health, among others. Ayurveda, the ancient system of Indian medicine, has played a pivotal role in promoting health and preventing disease for millennia. In recent decades, its integration into national health initiatives has gained momentum, reflecting its relevance in addressing contemporary public health challenges. This article explores the multifaceted role of Ayurveda in India's National Health Programs, including its contributions to preventive healthcare, maternal and child health, non-communicable disease management, and lifestyle modification. With the establishment of the Ministry of AYUSH and inclusion of AYUSH services at various levels of the healthcare delivery system, Ayurveda has become a vital component of national strategies aimed at achieving universal health coverage. The article highlights key programs such as the National AYUSH Mission, Reproductive and Child Health, National Programme for Prevention and Control of Cancer, Diabetes, Cardiovascular Diseases and Stroke, and their synergistic alignment with Ayurvedic principles. The integration of Ayurveda into these programs not only enhances their effectiveness but also promotes a holistic, sustainable, and culturally rooted approach to health.

Key Words - AYUSH, National Health Programs, Ayurveda, NHM

Introduction -

India's healthcare system is a blend of traditional and modern medicine, with Ayurveda playing an increasingly prominent role in public health initiatives. Ayurveda, a 5,000-year-old holistic medical system, emphasizes prevention, health promotion, and individualized treatment based on body constitution (prakriti).(1) The main objective of Ayurvedic treatments is to promote a healthy lifestyle through proper nutrition, prevention of disease, and specialized treatments based on the diagnosis. It is part of AYUSH, which stands for Ayurveda, Yoga, Unani, Siddha, and Homeopathy. AYUSH is widely used in public health sectors within India. With the rising burden of non-communicable diseases (NCDs), mental health disorders, and lifestyle-related ailments, there is a growing recognition of the need for integrative approaches that combine modern biomedicine with traditional health systems like Ayurveda. (2)

From the 2013 census, India was clocked at less than one doctor working in public health for every 1,000 people, for a total population of 1.375 billion. The health care system is pluralistic, meaning there are options of alternative medicine and modern biomedicine. Each state in India is responsible for providing its population with health care. Indian citizens do not need to pay for health visits or medicine when visiting a public health centre in India. Health care is distributed in a

vertical system; district hospitals, urban and rural primary health centres that reach over 50,000 people each, and subcentres with some specialists. These centres often have provisions for AYUSH care with 15 AYUSH workers per 2,000 people. It is widely understood that traditional medicine can be utilized in resource-poor settings and has the potential to make a difference in rising nations.⁽³⁾

The Government of India has acknowledged the potential of Ayurveda in addressing these public health challenges. Through the establishment of the Ministry of AYUSH in 2014 and the implementation of the National AYUSH Mission (NAM), efforts have been made to strengthen and mainstream AYUSH systems in the national healthcare delivery framework. Ayurveda has been integrated into various national health programs such as the National Programme for Prevention and Control of Cancer, Diabetes, Cardiovascular Diseases and Stroke (NPCDCS), National Health Mission (NHM), and Reproductive and Child Health (RCH) programs to provide preventive, promotive, and curative services.

This integration is not merely symbolic but is rooted in evidence-based policy frameworks that seek to utilize Ayurveda's strengths in diet, lifestyle management, and disease prevention. As India aspires to achieve Universal Health Coverage (UHC) and the Sustainable Development

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Goals (SDGs), the strategic inclusion of Ayurveda in national health planning is increasingly seen as both necessary and beneficial. This article explores how Ayurveda contributes to national health programs, analyzes its strengths and limitations, and discusses pathways for deeper integration in public health policy.

Material and Methods

Various texts related to Ayurveda, relevant modern medical science books, research/review articles, and websites have been used as source materials for this study.

Ayurveda In National Health Programs

1. National Health Mission (7,8)

The National Health Mission (NHM) is India's flagship program launched in 2013, encompassing both rural (NRHM) and urban (NUHM) health systems to provide accessible, affordable, and quality healthcare. Ayurveda, as part of the AYUSH systems, plays a crucial and defined role in achieving NHM objectives, particularly in preventive, promotive, and integrative healthcare.

A. Co-location of AYUSH Services

One of the primary strategies under NHM is colocation, which means setting up AYUSH services within existing health facilities:

- Ayurveda units are established at PHCs, CHCs, and District Hospitals.
- AYUSH doctors (including Ayurveda graduates) are posted to deliver outpatient consultations, minor procedures, and health education.
- Ayurveda pharmacists and assistants support drug dispensing and documentation.

Example: In states like Chhattisgarh and Rajasthan, Ayurveda OPDs run alongside Allopathic services in PHCs.

B. AYUSH in Health and Wellness Centres (HWCs)

- Establishment of AYUSH Health and Wellness Centres (AHWCs) — Ayurveda-based health promotion and disease prevention services are delivered.
- Services include yoga, meditation, Ayurveda medicines, dinacharya advice, and lifestyle counselling.

Target: 12,500 AYUSH HWCs to be established across India.

C. Community Outreach and IEC Activities

Ayurveda is integrated into Behavior Change Communication (BCC) strategies:

 Ayurveda doctors lead community health awareness programs about seasonal regimens (*ritucharya*), daily

- regimens (*dinacharya*), healthy food (*ahara*), and mental well-being.
- Ayurveda-based health messages are part of Village Health and Nutrition Days (VHNDs).

D. Role in Epidemic and Public Health Emergencies Ayurveda is used in:

- Immunity boosting and prophylactic care (e.g., during COVID-19, Ayurveda formulations like AYUSH Kwath were distributed through NHM channels).
- Ayurveda doctors also participate in fever surveillance, public health camps, and epidemic management.

2. Reproductive, Maternal, Newborn, Child and Adolescent Health (RMNCH+A)⁽⁹⁾

The RMNCH+A strategy, launched by the Government of India under the National Health Mission (NHM), addresses the continuum of care for reproductive, maternal, newborn, child, and adolescent health. Ayurveda, as part of the AYUSH systems, contributes significantly to health promotion, disease prevention, safe motherhood, child care, and adolescent health, aligning with its foundational principles of holistic care and long-term well-being. Ayurveda contributes to maternal and child health through the promotion of *garbhini paricharya* (antenatal care), *prasava raksha* (safe delivery), and *kaumarabhritya* (pediatrics). Many states have piloted Ayurveda-based antenatal programs and postnatal care support.

- A. Example: Ayurveda infertility clinics are running under AYUSH departments in states like Kerala and Gujarat.
- **B.** Kerala and Maharashtra have implemented Ayurvedabased antenatal care packages at government AYUSH centres.
- **C.** Ministry of AYUSH has initiated projects with ICMR and other bodies on:
- The Ministry of Ayush and the Ministry of Women and Child Development signed a Memorandum of Understanding (MoU) to enhance nutrition for approximately 95,000 adolescent girls in five anemiaprone districts using Ayurveda-based interventions. The focus is to improve hemoglobin levels and nutritional status, aiming for healthier adolescent girls who, upon reaching adulthood, can give birth to healthier children.
- Ayurveda is used in national campaigns such as "Poshan Maah" and "Poshan Pakhwada," where millions of activities promoting Ayurvedic dietary practices and health regimens were carried out to

address malnutrition, particularly among children, adolescent girls, and pregnant women

Ayurveda's role in India's RMNCH+A strategy reflects a **modern embrace of traditional health wisdom**, helping address persistent gaps in nutrition, anemia, and preventive care for women and children, particularly in high-need districts and underserved populations

3. National AYUSH Mission (10,11,12)

- A. Mainstreaming and Accessibility: NAM aims to mainstream Ayurveda by co-locating AYUSH (including Ayurveda) services in Primary Health Centres, Community Health Centres, and District Hospitals across the nation. This creates more access points for the public to receive Ayurveda-based care, particularly in rural and underserved regions.
- **B. Strengthening Infrastructure**: Upgrading existing Ayurveda hospitals and dispensaries, establishing new ones where there is a gap, and creating specialty centers (e.g., Panchkarma, Ksharasutra therapy) are key priorities, ensuring the public has access to quality Ayurveda services.
- C. Quality of Education: NAM invests in the infrastructural development and upgrading of Ayurveda educational institutions, both undergraduate and postgraduate. It also supports the establishment of new colleges where necessary, especially in states with inadequate teaching capacity
- D. Promotion and Awareness: Large-scale initiatives—such as Ayurveda Day, state Arogya fairs, Ayurveda Parvs, and multimedia campaigns—raise public awareness about the benefits and preventive potential of Ayurveda, increasing its acceptance and utilization
- **E.** Medicinal Plants and Drug Quality: NAM supports the cultivation and sustainable management of medicinal plants vital to Ayurveda, as well as investments in quality control and research to ensure the efficacy and safety of Ayurvedic medicines.
- **F.** Integration with National Health Programs: The mission encourages collaboration and integration between Ayurveda and modern medicine practitioners for improved healthcare outcomes and holistic public health.
- **G. 12,500** Ayurveda Health & Wellness Centres: The Union Cabinet approved the setup of these centers nationwide under NAM to provide comprehensive primary healthcare services based on Ayurveda, emphasizing preventive, promotive, and curative care.

These centers are operationalized at both urban and rural levels.

- **H. Ayurswasthya Yojana**: Launched recently, this central sector scheme promotes Ayurveda interventions for community health through public health projects and centers of excellence.
- I. Drug Supply and Standards: Essential medicines supply to government Ayurveda institutions and strict quality control measures to ensure the availability of high-quality drugs.

4. School Health Program under Ayushman Bharat (13)

Ayurveda plays a preventive and promotive role in school health services. AYUSH doctors are involved in spreading awareness about *dinacharya*, *ahara-vihara*, and healthy lifestyle practices among school children.

- A. Yoga in Schools: Regular yoga sessions, sometimes celebrated in sync with International Yoga Day, have become staple school activities under this program. Teachers guide children through yoga postures and breathing exercises drawn from Ayurveda and yogic texts, promoting both physical and mental health.
- **B.** Ayurveda Sensitization Modules: Training modules for teachers include content on Ayurveda-based health promotion, such as seasonal eating, herbal home remedies, and balanced daily routines (dinacharya), making these ancient practices relevant and actionable for today's students.
- C. Integration with School Calendar: Activities such as meditation, yoga, and health talks are built into the academic year schedule. There are also intra-school competitions (e.g., poster-making, slogan writing, health quizzes) on wellness themes.
- **D. Weekly Health Sessions**: These trained teachers conduct structured one-hour health sessions every week for all students. The sessions cover a variety of topics, including hygiene, nutrition, yoga, meditation, and preventive health practices rooted in Ayurveda, alongside modern public health concepts.
- **E. Dedicated Health Day**: Many schools observe "Health and Wellness Day" every Tuesday, a special day reserved for health education, yoga, meditation, and interactive student activities anchored in Ayurveda and other traditional practices.

5. National Programme for Health Care of the Elderly^(14,15)

A. District-Level Ayurveda Geriatric Clinics: Several district hospitals now run full-fledged AYUSH Geriatric Units offering integrated care, wellness counseling, and panchakarma procedures.

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- **B. Day Care and Outpatient Services**: Some district hospitals and RGCs provide day-care services where older adults receive therapies, dietary advice, and exercise regimens based entirely or partly on Ayurveda.
- **C. Training of AYUSH Staff**: Dedicated training in geriatric care and integrative protocols is provided for Ayurveda doctors working at PHCs, CHCs, and district hospitals.
- **D. Research on Geriatric Protocols**: Regional and national centres collaborate on studies and drug trials of Ayurvedic therapies for elderly-specific disorders, contributing to evidence-based integration of Ayurveda in elder care.

E. Results

- F. The article documents the integration and role of Ayurveda in various National Health Programs (NHPs) across India. Notable findings from the implementation of these initiatives include:
- **G. Widespread Integration**: Ayurveda services are colocated with Allopathic services at PHCs, CHCs, and District Hospitals nationwide. States like Chhattisgarh and Rajasthan run Ayurveda OPDs within PHCs alongside modern medical units.
- **H. Preventive and Promotive Care**: During the COVID-19 pandemic, Ayurveda immunity-boosting formulations (e.g., AYUSH Kwath) were widely distributed as part of prophylactic care strategies under the National Health Mission (NHM).
- I. Maternal and Child Health: Specialized Ayurveda infertility clinics and Ayurveda-based antenatal care packages are operational in states such as Kerala, Gujarat, and Maharashtra. Projects targeting adolescent girls for anemia prevention have recorded improvements in hemoglobin levels and nutritional status when using Ayurveda-based interventions.
- J. Nutrition Campaigns: Ayurveda practices are a core part of national nutrition campaigns, such as "Poshan Maah" and "Poshan Pakhwada," with millions of outreach activities conducted to promote Ayurvedic dietary and lifestyle regimens.
- **K. Infrastructure and Accessibility**: The National AYUSH Mission (NAM) has led to the establishment and strengthening of Ayurveda hospitals, dispensaries, and specialty centers, thus improving access, especially in underserved regions.
- **L. Education**: Significant investments have been made in upgrading Ayurveda institutions and supporting the establishment of new teaching centers to enhance the quality of Ayurvedic education.

Discussion

The co-location model under NAM and NHM has improved the reach of Ayurveda services, especially in rural and resource-poor settings, addressing both prevention and treatment needs where modern medicine alone may not suffice or be culturally accepted. Integrating Ayurveda with modern biomedicine allows for comprehensive, culturally sensitive care—especially for chronic, lifestyle-related, and women's health conditions, where Ayurveda offers unique preventive and therapeutic strategies. Ayurveda-based dietary interventions and lifestyle guidelines have contributed positively to national goals against malnutrition and anemia, particularly among vulnerable groups. Upgrading educational infrastructure not only increases practitioner availability but also strengthens the evidence base and quality of service delivery. The article notes ongoing challenges such as the need for greater evidence generation, public awareness, infrastructural gaps, and further harmonization across sectors.

Conclusion

Ayurveda has become an integral component of India's public health landscape, thanks to proactive government policy and successful pilot and large-scale initiatives. Its incorporation into NHPs via co-location, targeted interventions for vulnerable groups, educational advancements, and evidence-focused collaborations has illustrated Ayurveda's continued relevance and potential:

Holistic Care: Ayurveda complements mainstream medicine in promoting health, preventing disease, and managing chronic and lifestyle-related disorders.

Scalability and Sustainability: National mandates and cross-ministerial collaborations have demonstrated the scalable impact of Ayurveda for population-wide health benefits, particularly in maternal, child, and adolescent health.

Future Prospects: Continued investment in infrastructure, education, and research will be essential for strengthening Ayurveda's contribution to national health, ensuring it remains evidence-based, accessible, and integrated for all sections of the population.

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