

**GOVERNMENT OF INDIA
HEALTH AND FAMILY WELFARE
LOK SABHA**

STARRED QUESTION NO:64
ANSWERED ON:22.02.2006
IMPLEMENTATION OF NATIONAL RURAL HEALTH MISSION
Nikhil Kumar Shri ;Owaisi Shri Asaduddin

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

- (a) whether the National Rural Health Mission (NRHM) was launched on April 5, 2005 to provide integrated health care to rural people especially the vulnerable sections of the society;
- (b) if so, the total amount spent so far on the Mission; (
- (c) whether even after spending Rs. 120 crore in campaigning on this Mission, it has not been started in right earnest;
- (d) if so, the reasons therefor;
- (e) whether 2.5 lakh voluntary female health workers have been appointed as stipulated in the Mission;
- (f) if not, the reasons therefor;
- (g) whether the Government has laid down parameters to evaluate the performance of each State in the implementation of the NRHM;
- (h) if so, the details thereof;
- (i) the States which have reviewed the progress under NRHM so far;
- (j) the details of the shortcomings noticed by the Union Government in implementation of the NRHM; and
- (k) the steps taken by the Government for effective implementation of Mission all over the country?

Answer

THE MINISTER OF HEALTH AND FAMILY WELFARE (DR. ANBUMANI RAMADOSS)

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

STATEMENT REFERRED TO IN REPLY TO LOK SABHA STARRED QUESTION NO. 64 FOR 22ND FEBRUARY, 2006.

(a) The National Rural Health Mission (NRHM) was launched by the Hon'ble Prime Minister on 12th April, 2005, for the period 2005 to 2012 with the objective to provide comprehensive integrated health care services to the rural poor especially women and children.

(b) An amount of Rs. 4260.56 crore has been released during 2005-06 up to December, 2005, for implementing various initiatives under the NRHM. This amount includes the funds released for RCH II, Immunization, various Disease Control Programmes, the new initiatives under the Mission etc.

(c)&(d): The amount of Rs. 92 crore out of the budget estimate of Rs.120 crore meant for IEC activities for the Ministry during 2005-06 has been expended on dissemination of various health related Public awareness messages on issues of Immunisation, breast feeding, Save the girl child, other disease control programmes, tobacco usage etc. These messages were knitted around the common NRHM theme. Further, the first year was the preparatory phase of the Mission during which the institutional framework has been put into place. All the states have set up the basic structures under the Mission and the Mission has thus started in the right earnest.

(e)&(f): While it is true that 2.5 lakh Accredited Social Health Activists (ASHA) are envisaged to be set up over the Mission period, the target for the first year was only 40% which amounts to 1 lakh ASHA. As on date over 1.44 lakh ASHAs have already been put in place by various states. The selection of ASHA is, therefore, going as per schedule. The training of trainers for ASHA has also been started.

(g)&(h): The Mission is an umbrella initiative of the Ministry and subsumes several initiatives and schemes including the RCH II, Disease Control Programmes as well as Immunisation initiatives. The Government has laid down parameters to evaluate the performance of each state under the Mission. The evaluation of the Mission includes evaluation of progress of each of the individual initiatives. Further, the performance of each state is also being monitored on parameters like strengthening of institutional framework

including use of untied funds, upgradation of CHCs, manpower strengthening, progress of ASHA selection, setting up of Rogi Kalyan Samitis etc.

(i) The State Health Missions have already been set up by 31 states and UTs while the District Health Missions have already been set up by 29 states and UTs. These are the institutions which spearhead the Mission activities in the states and review the progress. A three pronged monitoring comprising internal, external and document based monitoring has been envisaged under the NRHM.

(j)&(k): The systemic deficiencies in the public health delivery system such as inadequate infrastructure, deficiency in skilled manpower etc. can be taken care of in phases over the entire Mission period. Sufficient flexibility has been provided to States to address these issues. Adequate management support has also been provided to the States to carry out necessary corrections in the health delivery system.