

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

UNSTARRED QUESTION NO:2041

ANSWERED ON:02.12.2011

HEALTH CARE FACILITIES IN RURAL AND TRIBAL AREAS

Das Shri Bhakta Charan;Pangi Shri Jayaram

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

- (a) the details of Government schemes available for medical and health care facilities in rural and tribal areas;
- (b) whether the Government medical facilities in any manner is not reaching in the remote areas of KBK Districts of Odisha and if so, the details thereof and the reasons therefor;
- (c) whether the Government has achieved the target to provide accessible, affordable and acceptable quality of health service to the poorest and remotest part of the country in general and Odisha in particular under NRHM Scheme;
- (d) if so, the details thereof; and
- (e) if not, the reasons therefor and measures taken to streamline the functioning and quantum of funds allocated to the State Governments including State of Odisha during each of the last three years and the current year, State-wise?

Answer

MINISTER OF THE STATE IN THE MINISTRY OF HEALTH & FAMILY WELFARE (SHRI SUDIP BANDYOPADHYAY)

(a) National Rural Health Mission was launched in the year 2005 to provide medical and health care facilities in rural including tribal areas. The various programmes included under the Mission consist of Reproductive and Child Health Programme, Health System Strengthening, various Communicable Disease Programmes, National Programme for Control of Blindness, National Iodine Deficiency Diseases Control Programme and Integrated Disease Surveillance Programme. Further, under NRHM the Government has identified 264 high focus districts in 22 States and 2 UTs based on low health parameters, SC/ST population, Left Wing Extremism etc. for focused monitoring of implementation of NRHM. In addition, there are State specific health care programmes funded by the States from their own resources for addressing the health care needs of rural and tribal areas.

(b) Government of Odisha has informed that in order to expand the medical facilities in remote and tribal districts of Odisha including in the KBK districts, special programmes and activities are being undertaken under NRHM which include;

Establishment of Mobile Health Units (MHU) in the blocks.

Infrastructure strengthening through New Construction/renovation and up-gradation of health care facilities.

Assured referral linkage services through Janani Express vehicles.

Maternity waiting homes are operational in KBK districts.

Intensive School Health Programme for all tribal residential schools.

Engagement of ASHAs in hard to reach areas. 1100 ASHAs are selected in KBK districts

Establishment of Nutritional Rehabilitation Centre, Sick New Born Care Unit, Special & Hardship allowances for staff working in KBK districts etc.

Organisation of Health Camps

Participation of NGOs in RCH programme in most difficult areas.

(c) & (d) After launching of NRHM substantial achievements have been made which include:

Infant Mortality Rate (IMR) has come down from 58 per 1000 live births in the year 2005 to 50 in 2009. Similarly, the Maternal Mortality Ratio (MMR) has also come down to 212 per 100,000 live births during 2007-09 from 254 per 100,000 live births in 2004-06. The Total Fertility Rate (TFR) has come down from 2.9 in 2005 to 2.6 in 2009. Further, Government has recently launched a new initiative, Janani Shishu Suraksha Karyakram (JSSK) under the National Rural Health Mission (NRHM) which entitles all pregnant women accessing public health institutions, completely free and cashless deliveries including free medicine with zero out of pocket

expenses.

The achievements made under NRHM in Odisha include:

- i. The IMR has come down from 75 per 1000 live births in 2005 to 65 per 1000 live births in 2009. The MMR has come down from 303 per 100,000 live births during 2004-06 to 258 per 100,000 live births during 2007-09 and TFR has reduced from 2.6 in 2005 to 2.4 in 2009 in Odisha.
- ii. Improved physical infrastructure at all health institutions including new construction works of 156 Sub-centres, 2 CHCs and renovation/upgradation works of 946 Sub-Centres, 32 PHCs, 153 CHCs and 32 District Hospitals under NRHM.
- iii. Improved access to public health facilities - utilisation of Public health facilities and the number institutional deliveries have gone up. The institutional delivery of the State has increased from 2.55 lakhs in 2005-06 to 5.06 lakhs in 2010-11.
- iv. 158 24x7 PHCs and 93 First Referral Units are Operational in the State to provide round-the-clock and referral services.
- v. Nearly 40,765 ASHAs have been trained and placed under NRHM
- vi. 45469 Village Health, Sanitation and Nutrition Committees have been set up to improve community participation in health planning, implementation and monitoring
- vii. Improved participation of PRI members at all levels through constitution of 1663 Roji Kalyan Samitees at different healthcare facilities.
- viii. Expanded availability of Health care services through mainstreaming of AYUSH.
- ix. Increased financial releases: The funds released to the State of Odisha have increased from Rs. 206.43 Crores in 2005-06 to Rs. 549.44 Crores in 2010-11.

(e) Does not arise.