## GOVERNMENT OF INDIA HEALTH AND FAMILY WELFARE LOK SABHA

UNSTARRED QUESTION NO:809
ANSWERED ON:27.02.2015
MEDICAL FACILITIES IN TRIBAL AREAS
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## Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

- (a) whether the Government proposes to bring improvement in medical facilities and to construct enough hospitals in the tribal areas;
- (b) if so, whether such areas have been identified which are tribal dominated as well as maoism affected and face acute shortage of medical facilities:
- (c) if so, the details thereof;
- (d) whether the Government is aware that the facilities available in Government hospitals are not sufficient for the poor, helpless and pregnant women in naxal affected areas due to which the women and the poor and the helpless face problem in getting admitted and proper treatment in hospitals; and
- (e) if so, the details thereof and the remedial measures taken/being taken by the Government in this regard?

## **Answer**

## THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA)

(a) to (c): Public health being a state subject, the primary responsibility for providing good quality health services and infrastructure to the population lie with the State governments. However, under the National Health Mission (NHM), financial support is provided to States to stre- ngthen their health care system including for improvements in medical facilities and setting up public health facilities in tribal areas based on requirements posed by the States in their Programme Implementation Plans.

All such tribal and LWE districts whose composite health index is below the State average have been identified as high priority districts and are entitled to receive more resources per capita under the NHM to strengthen their health care system as compared to the rest of the districts in the State and receive focused attention and supportive supervision. The list of all such High Priority Districts (HPDs), where the tribal population is in majority or they are affected by left wing extremism is at Annexure.

(d) & (e): As mentioned above, public health being a State subject, the primary responsibility for providing quality health services to the population including those in naxal affected areas is that of the State Government. It is true that there is a shortfall in number of health facilities in the country including in naxal affected areas. Support under NHM is provided to States to set up new faci-lities and strengthening of existing public health facilities in terms of infrastructure, human resources, equipment, drugs and diagnostics etc with priority given to HPDs so that they are able to effectively cater to needs of the population, particularly the women and children.

The Central Government is already providing conditional cash transfer under the Janani Suraskha Yojana for promoting institutional delivery to reduce maternal deaths. The Central Government is also providing support to States for providing completely free and cashless services including free diet, free transport, free drug and diagnostics, free blood services to pregnant women including normal deliveries and caesarean operations and sick infant (up to one year after birth) in public health facilities under the Janani Shishu Swasthya Karyakram.