

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

UNSTARRED QUESTION NO:666

ANSWERED ON:26.02.2016

Shortage of Doctors in Rural Areas

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

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

- (a) the number of registered doctors and other medical and para-medical professionals in the country, State/UTwise along with the ratio of doctors in rural and urban areas of the country;
- (b) whether the Government is aware of the shortage of doctors/specialists and surgeons of various streams across the country, if so, the details thereof and the measures taken by the Government in this regard;
- (c) whether the doctors/specialists/ surgeons avoid themselves being posted in rural areas;
- (d) if so, the action taken by the Government to ensure the sufficient number of doctors in the rural areas;
- (e) whether the Government proposes to increase the number of doctors in the country particularly in rural areas; and
- (f) if so, the details of the schemes launched/steps taken by the Government in this regard?

Answer

ANSWER

THE MINISTER OF HEALTH AND FAMILY WELFARE

(SHRI JAGAT PRAKASH NADDA)

(a): As per information provided by respective regulatory bodies, 9,59,198 doctors 7,89,796 Auxiliary Nurse Midwives (ANM), 17,93,337 Registered Nurse & Registered Midwives (RN&RM) and 6,74,782 Pharmacists are registered in the country. No such data for Allied Health is maintained centrally. State/UT wise details are at Annexure.

(b): The Government is aware that there is shortage of doctors, particularly specialists in the country. Health being a State subject, no such data is maintained Centrally. A number of measures have been taken in order to meet the shortage of doctors in the country; these include:

I. The ratio of teachers to students has been revised from 1:1 to 1:2 for all MD/MS disciplines and 1:1 to 1:3 in subjects of Anaesthesiology, Forensic Medicine, Radiotherapy, Medical Oncology, Surgical Oncology and Psychiatry.

II. DNB qualification has been recognized for appointment as faculty to take care of shortage of faculty.

III. Enhancement of maximum intake capacity at MBBS level from 150 to 250.

IV. Enhancement of age limit for appointment/extension/re-employment against posts of teachers/dean/principal/ director in medical colleges from 65-70 years.

V. Relaxation in the norms for setting up of a medical college in terms of requirement for land, faculty, staff, bed/ bed strength and other infrastructure.

VI. Strengthening/upgradation of State Government Medical Colleges for starting new PG courses/Increase of PG seats.

VII. Establishment of New Medical Colleges by upgrading district/referral hospitals preferably in underserved districts of the country.

VIII. Strengthening/upgradation of State Government/Central Government Medical Colleges to increase MBBS seats.

(c) to (f): Following amendments have been carried out in Post Graduate Medical Education Regulations to encourage doctors to serve in the rural areas vide notifications dated 19.11.2009 and 27.02.2012 respectively:

(i) Incentive at the rate of 10% the marks obtained for each year in service in remote or difficult areas upto the maximum of 30% of the marks obtained in the entrance test for admissions in Post Graduate Medical Courses; and

(ii) 50% of the seats in Post Graduate Diploma Courses shall be reserved for Medical Officers in the Government service, who has served for at least three years in remote and difficult areas. After acquiring the PG Diploma, the Medical Officers shall serve for two more years in remote and/or difficult areas.

Further, under NHM, financial incentive is also provided to MBBS as well as PG doctors for serving in the rural areas. These incentives are over and above the salaries of the doctors concerned.