

**GOVERNMENT OF INDIA
MINISTRY OF HEALTH AND FAMILY WELFARE
DEPARTMENT OF HEALTH AND FAMILY WELFARE**

**LOK SABHA
UNSTARRED QUESTION NO. 2618
TO BE ANSWERED ON 06TH MARCH, 2020**

HEALTHCARE FACILITIES IN RURAL AREAS

**2618. DR. A. CHALLAKUMAR:
SHRI KAPIL MORESHWAR PATIL:
DR. NISHIKANT DUBEY:**

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

- (a) whether the Government has conducted any survey in the recent past to ascertain the requirement of healthcare facilities in rural areas and remote areas of the country;
- (b) if so, the details and the findings thereof along with the follow up action taken/being taken by the Government thereon;
- (c) the number of villages which do not have health care facilities in the country, State/UT-wise; and
- (d) the steps taken/being taken by the Government to improve the required infrastructure and other healthcare facilities especially in the rural and remote areas of the country?

**ANSWER
THE MINISTER OF HEALTH AND FAMILY WELFARE
(DR. HARSH VARDHAN)**

(a) & (b): Rural Health Statistics which is published by this Ministry provides information on rural health infrastructure including human resources and its functional status. The report is published based on the information provided by State/UTs.

The health care infrastructure in rural areas of India has been developed as a three-tier system. As per the population norms of health care infrastructure, there shall be one sub-centre for every 5,000 population, one primary health centre for every 30,000 population and one community health centre for every 1,20,000 population respectively in plain-areas across India. Further, as per the same population norms, there shall be one sub-centre for every 3,000 population, one primary health centre for every 20,000 population and one community health centre for every 80,000 population respectively in hilly/tribal/difficult areas across India. As per Rural Health Statistics 2018-19 (as on 31st March, 2019), around 1,57,411 Sub-Centres (SCs), 24,855 Primary Health Centres (PHCs) (these include Health & Wellness Centres) and 5,335 Community Health centres (CHCs) are functional in rural areas.

In addition to above, around 1,415 Mobile Medical Units are functional in the country to serve the people living in the remote areas to improve their access to health services; additionally, 25,000 ambulances are made operational in the remote areas to provide the transportation services in the emergency situation to nearest functional facility.

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Further, Public Health being a State Subject, the primary responsibility of improving access to healthcare facilities, including infrastructure strengthening and deployment of adequate human resource in public health facilities including in rural areas lie with the respective State Governments. To address the healthcare challenges, National Health Mission (NHM) supplements the efforts of the State/UT Governments to provide accessible, affordable and quality healthcare to all those who access public health facilities especially in rural areas.

NHM also provides support to State/UTs for setting up of new facilities as per norms and upgradation of existing facilities for bridging the infrastructure gaps and to fill up the vacancies of human resource on the basis of requirements posed by them. NHM support is also provided for provision of a host of free services related to maternal health, child health, adolescent health, family planning, universal immunisation programme, and for major diseases such as Tuberculosis, HIV/AIDS, vector borne diseases like Malaria, Dengue and Kala Azar, Leprosy etc.

(c) & (d): As per Rural Health Statistics 2018-19 (as on 31st March, 2019), on an average, a sub-centre (including HWC-SCs) covers 4 villages; a Primary Health Centre (including HWC-PHCs) covers 26 villages and a Community Health centre (CHCs) covers 120 villages. So, all the villages across India have been suitably covered.

The Government has taken up various steps to provide better medical facilities across India (including rural areas of the country). Under National Health Mission, the Government of India supports the State/UTs for various activities based on their respective States' Program Implementation Plan (PIP).

Some of the important areas of support are:

- Providing financial support in the form of untied funds, annual maintenance grants and Rogi Kalyan Samiti (RKS) funds for development of health facilities and ensuring services.
- Providing infrastructural support to State/UTs in constructing new health facilities and/or for up-gradation of infrastructure, Mother & Child Health (MCH) wings, up-gradation of the trauma centres & First Referral Units, Operationalization of the blood banks etc.
- Operationalizing health facilities in rural areas (through placement of human resources in difficult areas, supply of equipment, drugs and diagnostics).
- In addition, certain new initiatives have been undertaken like the Screening for Non-communicable Diseases (NCDs), Mothers Absolute Affection (to promote exclusive breastfeeding), Pradhan Mantri Shurakshit Matratva Abhiyan (to improve access to specialist maternal care through voluntary participation of private providers), Pradhan Mantri National Dialysis Program, Ayushman Bharat programme (which include Health and Wellness Centres (HWC) and Pradhan Mantri Jan Arogya Yojana (PMJAY)), Mission Indradhanush (to immunise partially or uncovered population), Rashtriya Swasthya Bal Karyakram (RBSK), Kayakalp (to promote cleanliness, hygiene and Infection Control Practices in public Health Care Facilities), Labour room quality improvement initiative- LAQSHYA (Initiative to reduce preventable maternal and newborn mortality, morbidity and stillbirths associated with the care around delivery in Labour room and Maternity OT and ensure respectful maternity care), Surakshit Matritva Aashwasan (SUMAN) (to end all preventable maternal and neonatal deaths) etc.

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