

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

**RAJYA SABHA
UNSTARRED QUESTION NO.1542
TO BE ANSWERED ON 29TH NOVEMBER, 2016**

CONDITIONS OF HEALTHCARE SYSTEM IN RURAL AREAS

1542. SHRI NARESH AGRAWAL:

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

- (a) whether it is a fact that the treatment of 70 per cent rural population is still not possible today due to shortage of doctors, health facilities and non-availability of costly medicines, if so, the reasons therefor;
- (b) whether the National Rural Health Mission (NRHM) Scheme has failed in its objectives; and
- (c) if not, the details of availability of doctors at present in rural areas?

ANSWER

**THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND
FAMILY WELFARE
(SHRI FAGGAN SINGH KULASTE)**

(a): Public health being a State subject, the primary responsibility to provide accessible and affordable healthcare services lies with the State Government. However, under the National Health Mission (NHM), financial and technical support is provided to States/UTs to strengthen their healthcare systems including support for engagement of doctors on contractual basis, setting up of new public health facilities & strengthening the existing facilities and to provide free drugs in public health facilities, based on the requirements posed by the States/UTs in their Programme Implementation Plans (PIPs).

As per Rural Health Statistics (RHS) 2014-15, there are 27421 doctors at Primary Health Centres (PHCs) against 25308 required. This indicates that overall there is no shortage of doctors at PHCs except in few States. At Community Health Centres (CHCs), there is a vacancy of only 9.5% against the total sanction posts of doctors. However, there is a shortfall of 20% Sub Centres (SCs), 22% PHCs and 32% CHCs as per RHS 2014-15.

The Ministry has implemented NHM Free Drugs Service Initiative to support States in providing essential drugs free of cost in public health facilities.

(b) & (c): NRHM did not achieve the 11th Plan targets of Maternal Mortality Ratio (MMR), Infant Mortality Rate (IMR) and Total Fertility Rate (TFR). However, the NRHM has been successful in accelerating the decline of Under 5 Mortality Rate (U5MR), MMR IMR and TFR. It has also achieved most of the disease control targets.

The State/UT-wise information of Sanctioned and In Position of Doctors at Primary Health Centres (PHCs) and Community Health Centres (CHCs) as per Rural Health Statistics 2014-15 is at Annexure.

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Table 21.

DOCTORS ⁺ AT PRIMARY HEALTH CENTRES						
S. No.	State/UT	(As on 31st March, 2015)				
		Required ¹	Sanctioned	In Position	Vacant	Shortfall
		[R]	[S]	[P]	[S-P]	[R-P]
1	Andhra Pradesh	1069	2270	1412	858	*
2	Arunachal Pradesh	117	NA	102	NA	15
3	Assam	1014	NA	1355	NA	*
4	Bihar###	1883	2078	2521	*	*
5	Chhattisgarh	792	752	368	384	424
6	Goa	21	48	56	*	*
7	Gujarat#	1247	1504	889	615	358
8	Haryana	461	635	489	146	*
9	Himachal Pradesh	500	636	571	65	*
10	Jammu & Kashmir	637	1352	834	518	*
11	Jharkhand	327	327	372	*	*
12	Karnataka	2353	2353	2196	157	157
13	Kerala	827	1120	1169	*	*
14	Madhya Pradesh	1171	1658	999	659	172
15	Maharashtra	1811	3009	2937	72	*
16	Manipur [^]	85	238	199	39	*
17	Meghalaya	110	128	114	14	*
18	Mizoram##	57	152	49	103	8
19	Nagaland	128	108	133	*	*
20	Odisha ³	1305	1312	1008	304	297
21	Punjab	427	490	441	49	*
22	Rajasthan	2083	2807	2412	395	*
23	Sikkim	24	NA	29	NA	*
24	Tamil Nadu	1372	2744	2375	369	*
25	Telangana	668	1318	1024	294	*
26	Tripura	91	158	158	0	*
27	Uttarakhand**	257	325	160	165	97
28	Uttar Pradesh	3497	4509	2209	2300	1288
29	West Bengal	909	2600	723	1877	186
30	A & N Islands	22	42	36	6	*
31	Chandigarh	0	0	0	0	0
32	D & N Haveli	7	6	8	*	*
33	Daman & Diu	3	3	5	*	*
34	Delhi	5	21	21	0	*
35	Lakshadweep	4	9	9	0	*
36	Puducherry	24	38	38	0	*
	All India²	25308	34750	27421	9389	3002

Notes: ## Sanctioned data for 2013-14 used

Data for 2013 repeated

**Inposition data for 2013-14 used

###Inposition data for 2013-14 & Sanctioned data for 2011 used

^Data for 2013-14 repeated

NA: Not Available.

+: Allopathic Doctors

*: Surplus. All India figures for Vacancy and Shortfall are the totals of State-wise Vacancy and Shortfall ignoring surplus in some States / UTs

¹ One per Primary Health Centre² For calculating the overall percentages of vacancy, the States/UTs for which manpower position is not available, may be excluded³ The PHC data included Area Hospitals & Other Hospitals

Table 28 A

General Duty Medical Officers (GDMOs) - Allopathic at CHCs			
S. No.	State/UT	(As on 31st March, 2015)	
		Sanctioned	In Position
		[S]	[P]
1	Andhra Pradesh	312	272
2	Arunachal Pradesh	NA	114
3	Assam	NA	456
4	Bihar^	NA	285
5	Chhattisgarh	628	334
6	Goa	12	10
7	Gujarat#	1060	747
8	Haryana	410	265
9	Himachal Pradesh	234	208
10	Jammu & Kashmir	772	533
11	Jharkhand	564	757
12	Karnataka	255	224
13	Kerala	781	1019
14	Madhya Pradesh	1109	864
15	Maharashtra	512	486
16	Manipur^	97	94
17	Meghalaya	91	74
18	Mizoram	NA	11
19	Nagaland	42	53
20	Odisha	449	463
21	Punjab	174	372
22	Rajasthan	1442	1071
23	Sikkim	NA	4
24	Tamil Nadu	1919	1740
25	Telangana	226	197
26	Tripura	64	64
27	Uttarakhand	61	54
28	Uttar Pradesh	0	0
29	West Bengal	1800	980
30	A & N Islands	13	13
31	Chandigarh##	6	19
32	D & N Haveli	0	6
33	Daman & Diu	4	4
34	Delhi	0	0
35	Lakshadweep	11	11
36	Puducherry	18	18
	Total²	13066	11822

Notes:

Data for 2013 repeated

^Data for 2013-14 repeated

##Sanctioned data for 2013-14 used

NA: Not Available

² For calculating the overall percentages of vacancy, the States/UTs for which manpower position is not available, may be excluded