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

LOK SABHA UNSTARRED QUESTION NO. 3922 TO BE ANSWERED ON 24TH MARCH, 2023

HOSPITALS IN BACKWARD DISTRICTS

†3922. SHRI OMPRAKASH BHUPALSINH ALIAS PAWAN RAJENIMBALKAR: DR. SANGHMITRA MAURYA: SHRI SANJAY JADHAV:

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

- (a) the number of officially identified backward districts in the country, State-wise;
- (b) whether there is a functional hospital/health centre or is proposed to be set up in each of the recognized backward districts;
- (c) if so, the details thereof and if not, the reasons therefor;
- (d)whether the Government evaluates/assesses the performance of the health care facilities/services regularly in the backward regions;
- (e) if so, the details of such evaluations made from 2014 to till date, year-wise;
- (f) whether the Government has taken steps to sort out the problems of those backward districts where the hospitals are lying inactive and being run without doctors; and
- (g) if so, the details thereof and if not, the reasons therefor?

ANSWER

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (DR. BHARATI PRAVIN PAWAR)

- (a): Govt. of India has identified 112 Aspirational Districts based on their performance in 49 Key Performance Indicators (KPIs) across five themes namely Health & Nutrition, Education, Agriculture & Water Resources, Financial Inclusion & Skill Development and Basic Infrastructure. List of 112 Aspirational Districts is at **Annexure.**
- (b) & (c): As per established norms, in rural areas a Sub Health Centre for a population of 5,000 (in plain) and 3000 (in hilly and tribal area), a Primary Health Centre for a population of 30,000 (in plains) and 20,000 (in hilly and tribal areas) and Community Health Centre for a population of 1,20,000 (in plain) and 80,000 (in hilly and tribal area) is suggested. Further, First Referral Unit, Sub-District Hospital (SDH) and District Hospital (DH) provide secondary care services for rural & urban area including backward areas.

Rural Health Statistics (RHS) is an annual publication, based on Health care administrative data reported by States/UTs. Details of State/UT-wise number of Sub-Centres,

PHCs, CHCs, Sub-Divisional Hospital, District Hospital & Medical Colleges functioning in rural areas including backward areas may be seen at the following link of RHS 2021-22:

https://main.mohfw.gov.in/sites/default/files/RHS%202021%2022.pdf

(d) to (g): The Government reviews functionality of the health centers as well as implementation of various health programs in each State including the Aspirational District areas through Central and State level monitoring mechanisms. From Central level, Ministry of Health and Family Welfare undertakes Common Review Mission (CRM) to review the progress of National Health Mission (NHM) implementation. In addition to this, Health Management Information System (HMIS) data is updated by States which is available disaggregated up-to-the facility level. Similarly, aspirational district evaluation is also done by NITI Aayog based on the set indicators.

The reports of the CRM and performance evaluation of healthcare facilities, year-wise, from 2014 onwards can be accessed from the link https://nhsrcindia.org/php-crm-reports.

Similarly, Aspirational district annual report can be accessed from the link https://www.niti.gov.in/annual-reports

National Health Mission (NHM) envisages achievement of universal access to equitable, affordable & quality health care services that are accountable and responsive to people's needs. The Ministry of Health and Family Welfare provides technical and financial support to the States/UTs to strengthen the public healthcare system, based on the proposals received in the form of Programme Implementation Plans (PIPs). Government of India provides approval for the proposals in the form of Record of Proceedings (RoPs) as per norms & available resources.

XV-Finance Commission Health Grants through Local Government announced as part of Union Budget 2021-22, for strengthening the healthcare system at primary healthcare level, has recommended grants aggregating to Rs. 70,051 crores over the period of five years (2021-2026).

PM Ayushman Bharat Health Infrastructure Mission (PM-ABHIM) with an outlay of Rs. 64,180 Crores aims to fill critical gaps in public health infrastructure. The Centrally Sponsored Scheme (CSS) Components includes support for infrastructure development for Sub-Health Centres, Urban Health and Wellness Centres, Block Public Health Units, Integrated District Public Health Laboratories and Critical Care Hospital Blocks.

Under NHM, following types of incentives and honorarium are provided for encouraging Health Specialists to practice in different regions of the country including rural and remote areas of the country:

- Hard area allowance to specialist doctors for serving in rural and remote areas and for their residential quarters.
- Honorarium to Gynecologists/ Emergency Obstetric Care (EmoC) trained, Pediatricians & Anesthetist/ Life Saving Anaesthesia Skills (LSAS) trained doctors.
- Incentives like special incentives for doctors, incentive for ANM for ensuring timely ANC checkup and recording, incentives for conducting Adolescent Reproductive and Sexual Health activities.

- States are also allowed to offer negotiable salary to attract specialist including flexibility in strategies such as "You Quote We Pay".
- Non-Monetary incentives such as preferential admission in post graduate courses for staff serving in difficult areas and improving accommodation arrangement in rural areas have also been introduced under NHM.
- Multi-skilling of doctors is supported under NHM to overcome the shortage of specialists.

Annexure

List of 112 Aspirational Districts		
Sr.	State	District
No.		
1	Andhra Pradesh	Vizianagaram, Visakhapatnam, Y.S.R. Kadapa
2	Arunachal Pradesh	Namsai
3	Assam	Goalpara, Barpeta, Hailakandi, Baksa, Darrang, Udalguri,
		Dhubri
4	Bihar	Sitamarhi, Araria, Purnia, Katihar, Muzaffarpur, Begusarai,
		Khagaria, Banka, Sheikhpura, Aurangabad, Gaya, Nawada,
		Jamui
5	Chhattisgarh	Korba, Rajnandgaon, Mahasamund, Kanker, Narayanpur,
		Dantewada, Bijapur, Bastar, Kondagaon, Sukma
6	Gujarat	Dahod, Narmada
7	Haryana	Mewat
8	Himachal Pradesh	Chamba
9	Jammu & Kashmir	Kupwara, Baramulla
10	Jharkhand	Garhwa, Chatra, Giridih, Godda, Sahibganj, Pakur, Bokaro,
		Lohardaga, Purbi Singhbhum, Palamu, Latehar, Hazaribagh,
		Ramgarh, Dumka, Ranchi, Khunti, Gumla, Simdega, Pashchimi
		Singhbhum
11	Karnataka	Raichur, Yadgir
12	Kerala	Wayanad, Chhatarpur, Damoh, Barwani, Rajgarh, Vidisha,
		Guna, Singrauli, Khandwa
13	Maharashtra	Nandurbar, Washim, Gadchiroli, Osmanabad
14	Manipur	Chandel
15	Meghalaya	Ribhoi
16	Mizoram	Mamit
17	Nagaland	Kiphire
18	Odisha	Dhenkanal, Gajapati, Kandhamal, Balangir, Kalahandi,
		Rayagada, Koraput, Malkangiri, Nabarangpur, Nuapada
19	Punjab	Moga, Firozpur
20	Rajasthan	Dholpur, Karauli, Jaisalmer, Sirohi, Baran
21	Sikkim	West Sikkim
22	Tamil Nadu	Virudhunagar, Ramanathapuram
23	Telangana	Asifabad, Bhoopalapally, Bhadradri-Kothagudem
24	Tripura	Dhalai
25	Uttar Pradesh	Chitrakoot, Fatehpur, Bahraich, Shrawasti, Balrampur,
		Siddharthnagar, Chandauli, Sonbhadra,
26	Uttarakhand	Udham Singh Nagar, Haridwar