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

LOK SABHA UNSTARRED QUESTION NO. 407 TO BE ANSWERED ON 21ST JULY, 2023

HEALTH FACILITIES IN TRIBAL AREAS

†407. SHRI GUMAN SINGH DAMOR:

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

- (a) the details of the schemes being implemented to provide health facilities in the tribal dominated districts in Madhya Pradesh;
- (b) the number of doctors available per 1000 population and the steps being taken to increase the availability of the doctors in such areas;
- (c) whether there has been a decline in Maternal Mortality Rate (MMR) and Infant Mortality Rate (IMR) over the last nine years and if so, the details thereof;
- (d) the States/UTs registering maximum and minimum Maternal Mortality Ratio in the country, State/UT-wise;
- (e) whether the Government proposes to open Medical Colleges in the most tribal dominated Jhabua and Alirajpur districts in Madhya Pradesh to increase the medical facilities and if so, the details thereof; and
- (f) the time by which the said Medical Colleges are likely to be set up and if not, the reasons therefor?

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

(a) 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 healthcare system of the country involves a three-tier system with Sub Health Centre (Rural), Primary Health Centre (Urban and Rural) and Community Health Centre (Urban and Rural) as the three pillars of Primary Health Care System in India.

The support provided under NHM includes support for engaging of health human resource on contractual basis, National Ambulance Services, Mobile Medical Units, ASHAs, Infrastructure strengthening, operationalisation of Ayushman Bharat-Health and Wellness Centres (AB-HWCs) by transforming the existing Sub Centres and Primary Health Centres, 24 x 7 Services and First Referral facilities, Mera Aspataal, Kayakalp Award Scheme, Prime

Minister's National Dialysis Programme, National Quality Assurance Standards implementation and related Activities, LaQshya Certification, Biomedical Equipment Maintenance and Management Programme, Free Diagnostics Service Initiative and Free Drugs Service Initiative. Further, initiatives such as Mission Parivar Vikas, Adolescent Friendly Health Clinics (AFHCs), Weekly Iron Folic Acid Supplementation (WIFS), Menstrual Hygiene Scheme, Facility Based Newborn Care (FBNC), Home Based Newborn Care Program, Social Awareness and Actions to Neutralize Pneumonia Successfully (SAANS), Home Based Care for Young Child (HBYC), Rashtriya Bal Swasthya Karyakram (RBSK), Rashtriya Kishor Swasthya Karyakram (RKSK), Early Childhood Development (ECD), Comprehensive Abortion Care (CAC), Anemia Mukt Bharat (AMB) strategy, Pradhan Mantri TB Mukt Bharat Abhiyaan (PMTBMBA), Nutrition Rehabilitation Centre (NRC) program and Universal Immunization programme.

(b) As per RHS 2021-22 considering the estimated mid-year Tribal population of 10,16,57,344 (as on 1st July, 2022), there are 9652 Doctors including specialists (Ayush and Allopathic) at PHCs and CHCs in Tribal Areas (as on 31st March, 2022). Further, in rural area (including tribal area) there are 29,817 doctors at District Hospital level and 18,643 doctors at Sub District Hospital.

Under NHM, states have been given flexibility to take following steps to increase number of doctors in different regions of the country including tribal areas of the country:

- i. Hard area allowance to specialist doctors for serving in rural and remote areas and for their residential quarters.
- ii. To offer negotiable salary to attract specialist including flexibility in strategies such as "You Quote We Pay".
- iii. Multi-skilling of doctors is supported under NHM to overcome the shortage of specialists.
- (c): As per the Sample Registration Survey (SRS 2018-20), Maternal Mortality Rate in India has witnessed a progressive reduction in Maternal Mortality Rate in last 9 years from 11.7 in 2011-13 to 6 in 2018-20. Further, as per SRS 2018-20 Infant Mortality Rate has declined from 42 infant deaths in 2012 to 28 in 2020 (per 1000 live births) in India.
- (d) The details of Maternal Mortality Ratio showing the maximum and minimum Maternal Mortality Ratio in the country, State/UT-wise as per SRS 2018-20, is placed at **Annexure**.
- (e) & (f): The Ministry of Health & Family Welfare administers a Centrally Sponsored Scheme (CSS) for 'Establishment of new Medical Colleges attached with existing district/referral hospitals' with preference to undeserved areas and aspirational districts, where there is no existing Government or private medical college with fund sharing between the Centre and State Governments. Under the Scheme, 157 Medical colleges have been approved in three phases including 14 medical colleges in the State of Madhya Pradesh, of which 06 Medical Colleges have been approved in tribal districts of the State namely Mandla, Shahdol, Chhindwara, Singrauli, Ratlam & Khandwa (East Nimar).

In addition, support has also been provided to the State of Madhya Pradesh under the Pradhan Mantri Swasthya Suraksha Yojana (PMSSY) for upgradation of 04 Government Medical Colleges in district namely Gwalior, Indore, Rewa & Jabalpur by setting up of Super Specialty blocks.

Annexure

Details of state / UT-wise Maternal Mortality Ratio (MMR) as per SRS 2018-20

	SRS 2018-20
Assam	195
Madhya Pradesh	173
Uttar Pradesh	167
Chhattisgarh	137
Odisha	119
Bihar	118
Rajasthan	113
Haryana	110
Punjab	105
West Bengal	103
Uttarakhand	103
India	97
Karnataka	69
Gujarat	57
Jharkhand	56
Tamil Nadu	54
Andhra Pradesh	45
Telangana	43
Maharashtra	33
Kerala	19
Other States	77

Source: Sample Registration System (SRS)-Special Bulletin on Maternal Mortality in India