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

LOK SABHA STARRED QUESTION NO. 185 TO BE ANSWERED ON THE 15TH DECEMBER, 2023

SHORTAGE OF OBSTETRICIAN-GYNECOLOGISTS

*185. SHRI MAGUNTA SREENIVASULU REDDY:

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

- (a) whether there is 70 per cent shortage of Obstetrician-Gynecologists in rural India;
- (b) if so, the details thereof and the reasons therefor;
- (c) whether the Government has taken any initiatives to fill this/such shortage(s); and
- (d) if so, the details thereof and if not, the reasons therefor?

ANSWER THE MINISTER OF HEALTH AND FAMILY WELFARE (DR MANSUKH MANDAVIYA)

(a) to (d) A Statement is laid on the Table of the House.

STATEMENT REFERRED TO IN REPLY TO LOK SABHA STARRED QUESTION NO. 185 FOR 15TH DECEMBER, 2023

(a) to (d) Government of India (GOI) follows a 3-tier system in public healthcare service delivery namely primary, secondary and tertiary. Primary Health Centres (PHCs) provide primary-level healthcare and for any specialized care, patients are referred to secondary and tertiary-level facilities. The posts for Obstetrician & Gynaecologists are provided in Community Health Centres (CHCs).

As per Rural Health Statistics -2021-22 (RHS-2021-22), there are 1,414 (in-position) Obstetricians-Gynaecologists at CHCs in rural areas of the country. Apart from Obstetricians-Gynaecologists, the MBBS Medical Officers trained in Comprehensive Emergency Obstetric and Newborn Care (CEmONC) services also provide a subset of specialty Gynaecologist-Obstetrician services. There are 2518 CEmONC trained doctors across the States/UTs.

Over the years, there has been an increase in the total number of specialists (including Obstetricians-Gynaecologists) in secondary care services which include CHC, Sub-divisional hospitals as well as the District Hospitals. The total number of specialists in these facilities has increased from 35,785 in 2021 to 38,917 in 2022.

In urban areas, States have engaged part-time/ rotational specialist doctors including Obstetricians and Gynaecologists to provide specialized services periodically at Urban-PHC through Out-Patient Departments (OPDs) on pre-fixed days. These multispecialty polyclinics ensure the continuum of care by providing specialists services closer to the community. They cater to area of 5-6 Urban Health & Wellness Centres (U-HWCs) or Urban Primary Health Centres (U-PHCs) covering a population of 2.5-3 lakhs. Support is provided to the States for services at Polyclinics through Pradhan Mantri - Ayushman Bharat Infrastruture Mission (PM-ABHIM) and Health grants under Fifteenth Finance Commission (FC XV), at the rate of ₹ 5 lakh per U-HWC/ U-PHC covered by that polyclinic.

Ayushman Arogya Mandir - Sub Health Centres (AAM-SCs) and Ayushman Arogya Mandir - Primary Health Centres (AAM- PHCs) provide teleconsultation services, whereby service providers, from Community Health Officer (CHO) to Medical Officer, enable patients' consultation with specialists at secondary and tertiary centres.

Government has also taken various steps to increase the number of doctors available in the country. Undergraduate seats in medical colleges have increased from 51,348 in 2013-14 to 1,08,848 in 2023-24. The post graduate seats including those for Obstetricians and Gynaecologists have increased from 31,185 in 2013-14 to 70,674 in 2023-24. Further, the number of medical colleges has increased from 387 in 2014 to 706 in 2023.

Public Health & hospitals is state subject and all the administrative and personnel matters related to human resource for health lie with the respective State/UT Governments. Under National Health Mission (NHM), Ministry of Health & Family Welfare provides financial and technical support to States/UTs to strengthen their healthcare systems based on the requirements posed by them in their Programme Implementation Plans (PIPs) within their overall resource envelope. Further, under NHM following types of incentives and honorarium are provided for encouraging specialist doctors to practice in rural and remote areas of the country:

- Hard area allowance to specialist doctors to serve in rural and remote areas and for their residential quarters so that they find it attractive to serve in public health facilities in such areas.
- Honorarium to Gynecologists/ Emergency Obstetric Care (EmoC) trained, Pediatricians & Anesthetist/ Life Saving Anaesthesia Skills (LSAS) trained doctors is also provided to increase availability of specialists for conducting Cesarean Sections in rural & remote area.
- States are also allowed to offer negotiable salary to attract specialists 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. Skill upgradation of existing Human Resource (HR) is another major strategy under NHM for improvement in health outcomes.
- Guidance has also been provided to States for setting up of Public Health Management Cadre (PHMC) which envisages a separate cadre for specialists with improved career progression.
