

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

**LOK SABHA
UNSTARRED QUESTION NO. 3351
TO BE ANSWERED ON 13TH MARCH, 2020**

PROMOTING PRIVATE INVESTMENT IN HEALTH SECTOR

3351. SHRI RANJEET SINGH HINDURAO NAIK NIMBALKAR:

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

- (a) whether as per a survey conducted during 2015 the health sector infrastructure in villages is very poor and private sector investment in health sector is minimal in rural India;
- (b) whether the said survey also revealed that amongst the 4000 projects under implementation at that point of time with investment of funds in crores, merely 9 projects i.e. 0.21 per cent were for health sector; and
- (c) if so, the reaction of the Government thereto and steps taken to promote private investment in health sector in rural India?

ANSWER

**THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND
FAMILY WELFARE
(SHRI ASHWINI KUMAR CHOUBEY)**

(a) & (b): The purport of the question is based on a private study/article which was published in 2015. The objective and methodology of the said study are not available. However, public health and hospitals being a State subject, it is the responsibility of the States/UTs to provide adequate and effective health infrastructure in the villages. Ministry of Health & Family Welfare, under National Health Mission (NHM), provides financial and technical supports to the States/UTs to strengthen their healthcare system including 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. and recruitment of health human resource. Further, Ministry of Health & Family Welfare publishes Rural Health Statistics (RHS) annually to provide information regarding health sector infrastructure including availability of health human resource in the country. As per Rural Health Statistics 2018-19 (as on 31st March 2019), there are 1,57,411 Sub-Centres (SC), 24,855 Primary Health Centres (PHCs), and 5,335 Community Health Centres (CHCs) functioning in rural areas of India (as reported by States/UTs).

(c): The measures taken/proposed by the Government of India for providing better health services across India especially in rural areas are as follows:

- The Ayushman Bharat Yojana, with its two components of Health and Wellness Centres (HWCs) and Pradhan Mantri Jan Arogya Yojana (PMJAY), addresses disparity in access and reduces out of pocket expenditure for secondary and tertiary care hospitalization for 40% of India's population. The scheme provides hospital care for about 1,350 illnesses at secondary and tertiary level empanelled public and private hospitals.

- National Health Mission (NHM) is creating a network of 1,50,000 HWCs by upgrading existing Sub Centres (SCs) and Primary Health Centres (PHCs) to provide Comprehensive Primary Health Care (CPHC), which is universal and free to all those who access public health facilities. HWC encourages healthy choices and behaviours including Yoga and other physical activities. The CPHC basket of services cover 12 key service areas, which go beyond the Reproductive, Maternal, Neonatal, Child and Adolescent Health (RMNCH+A) services to include screening and care for NCDs (diabetes, high blood pressure, oral, breast, cervical cancers etc.), elderly care, palliative and rehabilitative care, Oral, Eye and ENT care, mental health and first level care for emergencies and trauma etc.
- 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.
- 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, 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 new-born 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.

Also, National Health Policy, 2017 suggests exploring collaboration for primary care services with “not- for –profit” organizations having a track record of public services where critical gaps exist, as a short-term measure. It also advocates for contracting of private sector in the activities such as Capacity building, Skill Development programmes, Corporate Social Responsibility (CSR), Mental healthcare programmes, Disease Surveillance, Health Information System and Disaster Management etc.