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

# LOK SABHA UNSTARRED QUESTION NO. 2989 TO BE ANSWERED ON 12<sup>TH</sup> MARCH, 2021

# HEALTHCARE FACILITIES IN RURAL/TRIBAL AREAS IN ANDHRA REGION 2989. SHRI RAM MOHAN NAIDU KINJARAPU:

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

- (a) whether the Government is aware that healthcare is a major concern in backward and tribal areas due to lack of proper healthcare facilities, if so, the details thereof;
- (b) whether the Government proposes to launch any special initiatives towards development of health infrastructure in backward areas and if so, the details thereof; and
- (c) whether there is any proposal to build a super speciality hospital and medical college in Uttara Andhra Region, if so, the details thereof and time frame fixed for the same?

#### **ANSWER**

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

(a) & (b): Rural Health Statistics (RHS) is an annual publication, based on Health care administrative data reported by States/UTs. RHS provides information on rural health infrastructure and requirements of public health facilities in rural/tribal areas as reported by States. As per the RHS 2019, the state-wise details of shortfall of health facilities in rural areas is at **Annexure-1** and the state-wise details of number of Sub Centres (SCs), Primary Health Centres (PHCs), Health and Wellness Centres Sub-Centres (HWCs-SCs), Health and Wellness Centres-PHCs (HWCs-PHCs) & Community Health Centres (CHCs) functioning in tribal areas is at **Annexure-2**.

"Public Health and Hospital" being a State subject, the primary responsibility of ensuring availability of healthcare facilities including development of health infrastructure in backward and tribal areas lies with respective State/UT Governments.

To address the healthcare challenges, particularly in rural areas, the National Rural Health Mission (NRHM) was launched in 2005 to supplement the efforts of the State/UT Governments to provide accessible, affordable and quality healthcare to all those who access public health facilities. Currently, NRHM is a sub-mission of National Health Mission (NHM).

National Health Mission (NHM) supplements the efforts of the State/UT governments to provide accessible, affordable and quality healthcare to all those who access public health facilities including in backward and tribal areas. Under the National Health Mission (NHM), financial and technical support is provided to States/UTs to strengthen their health care systems including setting-up/upgrading public health facilities and augmenting health human resource on contractual basis for provision of equitable, affordable healthcare to all its citizens

particularly the poor and vulnerable population including tribal population based on requirements posed by the States in their Programme Implementation Plans (PIPs).

Various interventions that are implemented for better healthcare in tribal areas and beneficiaries are as follows;

- The population norms for setting up Health Facilities in tribal areas are relaxed. Against the population norms of 5,000, 30,000, and 1,20,000 for setting up of Sub Centre, PHC and CHC respectively, in tribal and desert areas its 3,000, 20,000 and 80,000.
- Relaxed norms for Mobile Medical Units (MMUs)
- All tribal majority districts whose composite health index is below the State average have been identified as High Priority Districts (HPDs) and these districts receive more resources per capita under the National Health Mission (NHM) as compared to the rest of the districts in a State.
- Implementation of Free Drugs and Free Diagnostics Service Initiatives.
- SC/ST households are covered under Ayushman Bharat, Pradhan Mantri Jan Arogya Yojana (AB-PMJAY) for health coverage up to Rs 5 Lakh per family per year as per Socio Economic Caste Census (SECC).

Due to above interventions, there has been 67.891% increase in facilities available in Tribal areas compared to 16.24% increase for all, between 2005 and 2019:

	Tribal Areas					
Type of	RHS	RHS	%	RHS	RHS	%
Facility	2005	2019	Increase	2005	2019	Increase
CHCs	3222	5685	76.44	643	1022	58.94
PHCs	23109	30045	30.01	2809	4211	49.91
SCs	142655	160713	12.65	16748	28682	71.25
Total	168986	196443	16.24	20200	33915	67.89

(c): As per information received, the Government of Andhra Pradesh is establishing 5 multi-speciality hospitals in tribal areas and among them, two are in north Andhra region (Seetampeta, Parvathipuram) @ Rs 49.26 crores each. These hospitals shall be functional by October, 2022.

Government of Andhra Pradesh is also establishing two Medical Colleges at Paderu (Tribal area) and Vizianagaram (rural area) @ Rs. 500 crores each). For Medical College at Paderu, Government of India has released Rs 195 crores (60% of central share on the estimated cost for medical college Rs 325 crores). Timelines of these MCs are as follows:

Activity	Paderu MC	Vizianagaram
		MC
Foundation Stone	10.09.2019	10.10.2019
Grounding of Work	20.02.2020	20.03.2020
Completion of Work	20.12.2022	20.01.2023
Application for Govt. of	01.07.2022	01.07.2022
India/MCI admissions 2022-23		
Admissions starts	01.08.2023	01.08.2023

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### **Annexure-1**

### SHORTFALL IN HEALTH FACILITIES AS PER ESTIMATION OF MID YEAR POPULATION (as on 1st July 2019) IN INDIA IN RURAL AREAS

		Sub Centres and HWC-SCs				PHCs and HWC-PHCs				CHCs			
S.No.	State/ UT	Required	In Position	Shortfall	% Shorfall	Required	In Position	Shortfall	% Shorfall	Required	In Position	Shortfall	% Shorfall
		R	P	S	Shorian	R	P	S	Shorian	R	P	S	Shorian
1	Andhra Pradesh	7178	7437	*	*	1183	1145	38	3	295	140	155	53
2	Arunachal Pradesh	338	385	*	*	51	143	*	*	12	63	*	*
3	Assam	6374	4643	1731	27	1040	946	94	9	260	177	83	32
4	Bihar	21337	9949	11388	53	3548	1899	1649	46	887	150	737	83
5	Chhattisgarh	5323	5205	118	2	843	792	51	6	210	170	40	19
6	Goa	96	219	*	*	15	24	*	*	3	5	*	*
7	Gujarat	8055	9166	*	*	1308	1476	*	*	327	362	*	*
8	Haryana	3460	2604	856	25	576	379	197	34	144	115	29	20
9	Himachal Pradesh	1366	2089	*	*	225	586	*	*	56	87	*	*
10	Jammu & Kashmir	2102	3025	*	*	342	622	*	*	85	84	1	1
11	Jharkhand	6768	3848	2920	43	1079	298	781	72	269	171	98	36
12	Karnataka	8028	9758	*	*	1318	2127	*	*	329	198	131	40
13	Kerala	2340	5380	*	*	388	848	*	*	97	227	*	*
14	Madhya Pradesh	13935	10226	3709	27	2233	1199	1034	46	558	309	249	45
15	Maharashtra	14112	10668	3444	24	2299	1828	471	20	574	364	210	37
16	Manipur	537	490	47	9	84	90	*	*	21	23	*	*
17	Meghalaya	822	477	345	42	124	118	6	5	31	28	3	10
18	Mizoram	179	370	*	*	27	59	*	*	6	9	*	*
19	Nagaland	414	433	*	*	62	126	*	*	15	21	*	*
20	Odisha	8382	6688	1694	20	1345	1288	57	4	336	377	*	*
21	Punjab	3562	2950	612	17	593	416	177	30	148	89	59	40
22	Rajasthan	12761	13512	*	*	2073	2082	*	*	518	571	*	*
23	Sikkim	96	176	*	*	15	29	*	*	3	2	1	33
24	Tamil Nadu	7355	8713	*	*	1222	1422	*	*	305	385	*	*
25	Telangana	4479	4744	*	*	731	636	95	13	182	85	97	53
26	Tripura	661	972	*	*	104	108	*	*	26	18	8	31
27	Uttarakhand	1509	1847	*	*	250	257	*	*	62	67	*	*
28	Uttar Pradesh	34726	20782	13944	40	5781	2936	2845	49	1445	679	766	53
29	West Bengal	13226	10357	2869	22	2177	908	1269	58	544	348	196	36
30	A & N Islands	49	124	*	*	8	22	*	*	2	4	*	*
31	Chandigarh	1	N App	N App	N App	N App	N App	N App	N App	N App	N App	N App	N App
32	D & N Haveli	61	71	*	*	9	9	0	0	2	2	0	0
33	Daman & Diu	7	23	*	*	1	4	*	*	0	0	N App	N App
34	Delhi	34	12	22	65	5	5	0	0	1	0	1	100
35	Lakshadweep	1	14	*	*	0	4	*	*	0	3	*	*
36	Puducherry	91	54	37	41	15	24	*	*	3	2	1	33
	All India/ Total	189765	157411	43736	23	31074	24855	8764	28	7756	5335	2865	37

Notes: The requirement is calculated using the prescribed norms on the basis of rural population estimation for mid year for the year 2019. All India shortfall is derived by adding state-wise figures of shortfall ignoring the existing surplus in some of the states. (Mid year Tribal population for the year 2019 calculated based on the percentages of Tribal population in the Rural areas in Census 2011)

R: Required; P: In Position; S: Shortfall; \*: Surplus

N App- Not Applicable

# Annexure-2

	NUMBER OF SUB-CEN	NTRES, PHCs, HW	HCs & CHCs FUNCTIONING in Tribal Areas on 31st March 2019)				
S.	State/UT		, '				
No.		Sub centre	PHCs	HWC-SC	HWC-PHC	CHCs	
1	Andhra Pradesh	762	0	40	153	21 63	
2	Arunachal Pradesh #	307	101	78			
3	Assam	664	131	114	50	27	
4	Bihar	NA	NA	NA	NA	NA	
5	Chhattisgarh	2440	288	372	107	81	
6	Goa	66	0	0	8	1	
7	Gujarat	2519	203	259	218	92	
8	Haryana *	N App	N App	N App	N App	N App	
9	Himachal Pradesh	104	47	0	0	8	
10	Jammu & Kashmir	304	42	3	6	11	
11	Jharkhand	2522	103	143	89	98	
12	Karnataka	321	64	0	0	7	
13	Kerala	831	137	0	0	12	
14	Madhya Pradesh	3274	306	0	32	99	
15	Maharashtra	2162	341	420	126	67	
16	Manipur	234	53	18	2	7	
17	Meghalaya #	445	110	32	8	28	
18	Mizoram #	370	65	0	4	9	
19	Nagaland #	397	126	56	5	21	
20	Odisha	2674	116	27	311	133	
21	Punjab *	N App	N App	N App	N App	N App	
22	Rajasthan	1564	211	10	22	67	
23	Sikkim	48	12	9	1	0	
24	Tamil Nadu	332	66	100	39	25	
25	Telangana	698	0	0	93	23	
26	Tripura	484	45	0	3	9	
27	Uttarakhand	155	10	0	0	5	
28	Uttar Pradesh	NA	NA	NA	NA	NA	
29	West Bengal	3206	300	0	0	104	
30	A&N Island	33	4	8	0	1	
31	Chandigarh *	N App	N App	N App	N App	N App	
32	D&N Haveli #	34	4	24	3	0	
33	Daman & Diu	0	0	5	0	0	
34	Delhi *	N App	N App	N App	N App	N App	
35	Lakshadweep#	14	4	0	0	3	
36	Puducherry *	N App	N App	N App	N App	N App	
	All India	26964	2889	1718	1322	1022	
Note:							
	are predominently tribal areas						
	? / UT has no separate Tribal Area	ı / Population	T				
	Not applicable						
N A - D	ata not available						