

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

**LOK SABHA
UNSTARRED QUESTION NO. 1913
TO BE ANSWERED ON THE 2nd AUGUST, 2024**

MEDICAL HEALTH CENTRES IN ODISHA

1913: SMT. MALVIKA DEVI:

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

- (a) the steps taken/proposed to be taken by the Government to ensure the availability of sufficient number of doctors in all the medical health centres especially in rural areas/villages in Kalahandi and Nuapada districts of Odisha, district-wise;
- (b) whether the Government has any plan to introduce any scheme of giving subsidy supplements/high protein diet to teenagers, if so, the details thereof; and
- (c) the steps taken/proposed to be taken by the Government to introduce any new scheme for ensuring children free from disease and looking after them?

**ANSWER
THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND
FAMILY WELFARE
(SMT. ANUPRIYA PATEL)**

(a) All the administrative and personnel matters related to health human resource lies 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.

Under NHM, following steps have been taken for encouraging specialist doctors to practice in rural and remote areas of the country including Kalahandi and Naupada districts of Odisha:

- 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 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 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. Skill upgradation of existing HR is another major strategy under NHM for achieving improvement in health outcomes.

(b) & (c) As per information provided by the Ministry of Women and Child Development, the Scheme for Adolescent Girls (SAG) has been subsumed under Mission Saksham Anganwadi and Poshan 2.0 w.e.f. 01.04.2022. The targeted beneficiaries under this scheme are girls in the age group of 14 – 18 years in the Aspirational Districts and all North Eastern States. This scheme consists of two components, viz., nutrition and non-nutrition. Under nutrition component, supplementary nutrition containing 600 calories, 18 – 20 gms of protein and micronutrients is provided in the form of Take Home Ration (THR) for maximum of 300 days in a year. The non-nutrition component is based on convergence with different ministries.
