

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

**LOK SABHA
UNSTARRED QUESTION NO. 692
TO BE ANSWERED ON 29.11.2024**

HEALTHCARE FOR MARGINALISED COMMUNITIES

692. ADV K. FRANCIS GEORGE:

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

- (a) whether the Government has identified significant health disparities among marginalized communities including Scheduled Castes (SCs), Scheduled Tribes (STs), and religious minorities, in areas such as life expectancy, infant mortality and mental health;
- (b) if so, the details thereof;
- (c) whether the Government is implementing specific policies/schemes to reduce barriers to healthcare access for these communities, particularly in rural and tribal areas, if so, the details thereof and the measures taken/proposed to be taken under Ayushman Bharat and the National Health Mission in this regard; and
- (d) whether the Government has any data showing higher infant mortality and life expectancy gaps among marginalised groups and if so, the steps taken/proposed to be taken in this regard?

**ANSWER
THE MINISTER OF STATE IN THE MINISTRY OF HEALTH & FAMILY
WELFARE
(SHRI PRATAPRAO JADHAV)**

(a) to (d): National Family Health Survey (NFHS) is a periodic survey which identifies the Infant Mortality Rate (IMR) for Scheduled Caste, Scheduled Tribe population as well as religious minorities. As per NFHS-V, the Infant Mortality Rate is 41.6 per 1000 live births among Scheduled Tribes (ST), 40.7 per 1000 live births among Scheduled Caste (SC), 36 per 1000 for Hindu, 33.3 for Muslim, 27.7 for Christian, 29 for Sikh and 21.3 in Buddhist/Neo-Buddhist.

Under National Health Mission (NHM), the Government has taken many steps towards universal health coverage by supporting the State Government in providing accessible & affordable healthcare to people. NHM provides support for improvement in health infrastructure, availability of adequate human resources in health facilities, to improve availability and accessibility to quality health care especially for the under served and marginalized groups in rural areas.

Through Ayushman Arogya Mandir, comprehensive primary healthcare is provided by strengthening Sub Health Centres (SHCs) and Primary Health Centres (PHCs). These Ayushman Arogya Mandir (AAM) provide preventive, promotive, rehabilitative and curative care for an expanded range of services encompassing reproductive and child healthcare services, Communicable diseases, Non-communicable diseases and other health issues. Total number of operational AAM are 39378 in SC dominated districts and 29896 in ST dominated districts till 31.10.2024.

Ayushman Bharat, Pradhan Mantri Jan Arogya Yojana (AB-PMJAY) provides health coverage up to Rs. 5.00 lakh per family per year for secondary and tertiary care hospitalization to 12 crore poor and vulnerable families.

Ministry of Tribal Affairs (MoTA) launched the Pradhan Mantri Janjatiya Adivasi Nyaya Maha Abhiyan (PM JANMAN) to improve the socio-economic condition of Particularly Vulnerable Tribal Groups (PVTGs) and the Dharti Aaba Janjatiya Gram Utkarsh Abhiyan (DA-JGUA) to improve socio-economic conditions of tribal majority villages and Aspirational blocks. Under these Abhiyans, there is provision of MMU from NHM to provide healthcare services to the left-out PVTG habitations/tribal villages/villages of Aspirational blocks.
