

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

**LOK SABHA
UNSTARRED QUESTION NO. 4650
TO BE ANSWERED ON 28.03.2025**

NATIONAL HEALTH MISSION IN ODISHA

4650. SHRI PRADEEP PUROHIT:

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

- (a) whether the National Health Mission (NHM) has achieved its objectives in Odisha;
- (b) if so, the details of such projects and if not, the reasons for delay in implementation;
- (c) whether adequate healthcare facilities exist in rural and remote areas of Odisha, particularly in Jharsuguda district;
- (d) if so, the details thereof and if not, the reasons therefor along with the steps taken/proposed to be taken by the Government for Jharsuguda district of Odisha;
- (e) whether there is a shortage of qualified healthcare professionals in Odisha's mining districts and if so, the details thereof and if not, the reasons therefor along with the steps being taken by the Government to address the issue;
- (f) whether the Government has collaborated with Coal India to tackle tuberculosis (TB) in mining areas, if so, the details thereof and if not, the reasons therefor;
- (g) whether the Government has any plan to replicate TB intervention programmes in prisons across the country, if so, the details of projects in Odisha and if not, the reasons for delays therefor; and
- (h) the steps taken/proposed to be taken by the Government to combat TB in mines, prisons and difficult terrain areas?

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

- (a) & (b): The National Health Mission (NHM) aims for attainment of universal access to equitable, affordable and quality health care services, accountable and responsive to people's needs, with effective intersectoral convergent action to address the wider social determinants of

health. It is implemented in all the States/UTs in the country including Odisha. The key achievements in status of health indicators of Odisha are as under:

- Odisha reported highest point decline in the country, in IMR with 39 points decline from 75 in 2005 to 36 in 2020.(Source: SRS)
- State has achieved SDG Goal in population stabilization measures by reducing the Total Fertility Rate (TFR) to 1.8 (India 2.0). (Source: NFHS)
- Odisha has reported 2nd highest point decline in the country in Maternal Mortality Ratio with a 49 points decline from 168 in 2015-17 to 119 in 2018-20. (Source: SRS)
- State has secured 1st rank among all States in Full immunization coverage with 90.5 % coverage. (Source: NFHS)
- There is a consistent improvement in the ranking of State as per TB Score at the national level with 60.5% score in 2018 (14th Rank) to 2nd rank in the Country in 2023 for its efforts towards elimination of TB.

(c) to (e): The details of healthcare facilities in State of Odisha including Jharsuguda district and health care professionals in the State of Odisha are available in public domain at the following URL:

https://mohfw.gov.in/sites/default/files/Health%20Dynamics%20of%20India%20%28Infrastructure%20%26%20Human%20Resources%29%202022-23_RE%20%281%29.pdf

The Ministry of Health and Family Welfare provides technical and financial support to the States/UTs to strengthen the public healthcare system including setting up of health facilities, providing basic amenities and recruitment of health care professionals based on the proposals received in the form of Programme Implementation Plans (PIPs) under National Health Mission. Government of India provides approval for the proposal in the form of Record of Proceedings (RoPs) as per norms & available resources.

In addition to the National Health Mission, Government of India has allocated the following funds for developing public healthcare infrastructure and services to Odisha:

- **PM Ayushman Bharat Health Infrastructure Mission (PM-ABHIM)** envisages increased investments in public health and other health reforms to provide better access to health in rural areas. Administrative approvals have been accorded to the State of Odisha, for four years (i.e. FY 2021-22, 2022-23, 2023-24 & 2024-25) for an amount of Rs. 1049.38 Cr. for establishment and strengthening of 604 Building less-AAM (Sub-Centers - Health & wellness Centers), 140 Urban- AAM (U-HWC), 119 Block Public Health Units (BPHUs), 21 Integrated Public Health Laboratories (IPHLs) and 21 Critical Care Blocks (CCBs) at District Hospitals and Medical College level, as per proposal of the State.

Support provided to the district Jharsuguda under PM-ABHIM is as under:

- One 50 bedded Critical Care Block District Hospital Jharsuguda @ Rs. 23.75 Crore.
- One Integrated Public Health Laboratory @ Rs. 1.25 Crore

- Under **Fifteenth Finance Commission (FC-XV)** for the State of Odisha, an approval of Rs. 1988.92 Cr. has been given over the five year period from FY 2021-22 to FY 2025-26 for establishment and strengthening of 1280 Building-less Sub Health Centres/ Primary Health Centres (884 SHCs and 396 PHCs) and 90 Block Public Health Units (BPHUs) as per proposal of the State.
- The **Pradhan Mantri Swasthya Suraksha Yojana (PMSSY)** aims at correcting regional imbalances in the availability of affordable tertiary healthcare services and to augment facilities for quality medical education in the country. Under the Scheme approvals has been accorded for Establishment of One new All India Institute of Medical Sciences (AIIMS) at Bhuvaneshwar and upgradation of three Government Medical Colleges/ Institutions (GMCI) at Behrampur, Burla and Cuttack for the State of Odisha.
- Under Centrally Sponsored Scheme (CSS) for '**Establishment of new medical colleges attached with existing district/referral hospitals**' with preference to underserved areas and aspirational districts, where there is no existing Government or private medical college. 07 medical colleges were approved in Odisha State at Districts Balasore, Baripada, Bolangir, Koraput, Puri, Jajpur and Kalahandi.

Under NHM, following types of guidelines for encouraging doctors to practice in rural and remote areas of the country to minimize the gap between supply and demand for doctors:

- Hard area allowance to specialist doctors for serving 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.
- Incentives like special incentives for doctors, incentive for Auxiliary Nurse and Midwife (ANM) for ensuring timely Antenatal Checkup (ANC) checkup and recording, incentives for conducting Adolescent Reproductive and Sexual Health activities.
- 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 NRHM for achieving improvement in health outcomes.

(f): The Ministry of Health and Family Welfare (MoHFW) and Ministry of Coal, have agreed on facilitating collaborative actions to strengthen national response towards TB elimination in all

State/UTs. The specific responsibilities played by Ministry of Coal, to maximize awareness and mobilization of population in mining areas, are as under:

- Engagement of all offices, institutions, and attached organizations of Coal India in the 100 days campaign.
- Display of IEC materials in all offices.
- Awareness generation of all staff on TB.
- Taking Ni-kshay Shapath (pledge) in all affiliated organisations / offices / institutions.
- Screening camps in affiliated organisations / offices / institutions with support of State health department.
- Dissemination of awareness messages on social media.
- Encourage registration of Ni-kshay Mitra from various organisations and institutions of Coal India.

(g) & (h): The Government in consultation with the State Governments has launched a 100-Day TB Elimination Campaign in identified 347 priority districts across 33 State/UTs (includes 19 districts of Odisha), to find missing TB cases, reduce TB deaths and prevent new cases. The campaign focuses on vulnerable population in the community which includes congregate settings like prisons and mine workers. Special awareness activities were taken up by the State Governments and through Jan Bhagidari to improve health seeking behaviour of these vulnerable population. Further, the Government has taken the following steps to combat TB:

- Targeted interventions in high TB burden areas through State and District Specific Strategic plans.
- Provision of free drugs and diagnostics to TB patients.
- Intensified TB case-finding among vulnerable populations.
- Decentralization of TB screening and treatment services to the Ayushman Arogya Mandir.
- Private sector engagement with incentives for notification & management of TB cases.
- Scaling up molecular diagnostic laboratories to sub-district levels.
- Ni-kshay Poshan Yojana of Rs 1,000 per month per patient as nutritional support for the entire duration of treatment.
- Intensified Information, Education & Communication (IEC) interventions to reduce stigma, enhance community awareness and improve health seeking behaviour.
- Provision of TB Preventive Treatment to contacts of TB patients and vulnerable population.
- Tracking of notified TB cases through Ni-kshay portal.
- Provision of additional nutritional, diagnostic and vocational support to TB patients and household contacts under Ni-kshay Mitra initiative.
