

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

**LOK SABHA
UNSTARRED QUESTION NO. 999
TO BE ANSWERED ON 25.07.2025**

USE OF HEALTHCARE FACILITIES IN RURAL AREAS

999. DR PRABHA MALLIKARJUN:

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

- (a) whether the Government is aware that only 65% of rural households use improved healthcare services despite infrastructure availability, if so, the details thereof;
- (b) whether it is true that uptake is significantly lower among Scheduled Castes, Scheduled Tribes and other marginalised groups due to trust and awareness gaps, if so, the details thereof;
- (c) whether the Government has partnered with CSR-led initiatives like NTPC Foundation, Hyundai's Sparsh Sanjeevani and Vedanta's SEHAT camps to improve inclusive access, if so, the details thereof;
- (d) whether steps are being taken to promote preventive healthcare, menstrual hygiene awareness, and mobile health delivery, especially in underserved regions, if so, the details thereof; and
- (e) the initiatives being undertaken by the Government to ensure locally trusted, equitable, and sustainable community healthcare in line with WHO-UNICEF guideline

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

(a) & (b): Under the National Health Mission, the Ministry of Health and Family Welfare provides technical and financial support to the States/UTs to strengthen the public healthcare system in rural areas based on the proposals received in the form of Programme Implementation Plans (PIPs) under National Health Mission. Government of India provides financial approval for the proposal in the form of Record of Proceedings (RoPs) as per norms & available resources.

As reported by the States/UTs on the Ayushman Arogya Mandir (AAM) Portal, total 1,77,906 Ayushman Arogya Mandirs (AAM) have been operationalized till 30th June, 2025 with more than 438.54 crore footfall including Schedule castes recorded on these AAMs. As on 30.06.2025, 33.21 crore hypertension screenings, 31.87 crore diabetes screenings , 29.15 crore oral cancer screenings, 15.10 crore breast cancer screenings, 7.12 crore cervical cancer screenings and 36.64 crore teleconsultations have been conducted.

As on 30th June 2025, the footfall at Ayushman Arogya Mandir (AAM) in notified tribal district is 46.91 crore.

The Statement showing Budget and Expenditure under schemes for Development Action Plan of Scheduled Castes and Scheduled Tribes (DAPSC/DAPST) for FY 2020-21 to 2024-25 in DoHFW are as under:

(Rs. in Crore)

Year	DAPSC allocation	(%) Allocation under DAPSC (Scheme Budget)	DAPST allocation	(%) Allocation under DAPST (Scheme Budget)
2020-21	8300	16.7	4300	8.7
2021-22	8938	16.7	4634	8.7
2022-23	10424	16.6	5401	8.6
2023-24	9324	16.6	4830	8.6
2024-25	9158	16.6	4745	8.6

(c) & (d): The Government of India and the Ministry of Health and Family Welfare (MoHFW) is actively undertaking several initiatives to promote preventive healthcare, menstrual hygiene awareness, and mobile health delivery, particularly in underserved and remote areas, under the broader vision of Universal Health Coverage (UHC):

- AAM centres aim to provide Comprehensive Primary Health Care (CPHC) through 12 expanded packages of services including Reproductive and Child Health (RCH) services as well as health promotion through community outreach and wellness activities including of all Maternal health, Family Planning, Neonatal, Adolescent and Child health program.

- Emphasis is also placed on promoting Yoga and wellness practices through the AAM as part of preventive and promotive healthcare. Activities include daily and weekly Yoga sessions at AAM, celebration of International Day of Yoga with community participation. Involvement of Yoga Instructor in promotion of Yoga in all types of AAM.
- Under the Menstrual Hygiene Scheme (MHS) of MoHFW, menstrual hygiene promotion among adolescent girls (particularly in rural areas) is being implemented. Key features include Distribution of sanitary napkins through ASHAs.
- Under the National Health Mission (NHM), states receive support for deploying Mobile Medical Units (MMUs) especially for populations in remote, hard-to-reach, underserved, and unserved areas to improve access to public healthcare. A total of 1,498 MMUs are supported under NHM to the States.
- Village Health, Sanitation and Nutrition Day (VHSND) platform, functioning monthly at the village level, serves as a key touchpoint for community health as a Preventive care services
- Additionally, digital platforms such as e-Sanjeevani platform to provide teleconsultation services to strengthen digital healthcare and improve accessibility especially in rural and underserved areas)

(e): The initiatives are undertaken by Ministry of Health and Family Welfare, Government of India reflect a strong policy alignment with WHO recommendations to ensure locally trusted, equitable and sustainable community healthcare under National Health Mission and aligned to the National Health Policy 2017. The Alma-Ata Declaration (1978) established primary health care (PHC), community participation, and appropriate technology as the foundation for equitable health systems—a cornerstone for subsequent WHO guidance on workforce and community-based approaches.

The guidelines, developed in consonance to WHO-UNICEF guidelines, when implemented in locally contextualised manner by the States, is expected to bring forth an equitable and sustainable healthcare for the community.
