

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

**LOK SABHA
UNSTARRED QUESTION NO. 1161
TO BE ANSWERED ON 6th FEBRUARY, 2025**

HEALTH FACILITIES IN TRIBAL DOMINATED AREAS

†1161. **SMT. MAHIMA KUMARI MEWAR:**

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

- (a) whether the Government has taken any special initiatives, in collaboration with the State Government, to further develop health facilities in tribal-dominated areas of the Rajsamand Parliamentary Constituency of Rajasthan;
- (b) if so, the details thereof; and
- (c) the efforts being made by the Government to provide 100 percent health coverage to tribal women in the country, State/UT-wise including Rajasthan?

ANSWER

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

(a) to (c): The National Health Mission (NHM) provides support for improvement in health infrastructure, availability of adequate human resources in health facilities, to improve availability, affordability and accessibility to quality health care for all including women in urban, rural, and tribal/hilly and remote areas including Rajsamand Parliamentary Constituency of Rajasthan. The Ministry of Health and Family Welfare provides technical and financial support to the States/UTs to strengthen the public healthcare system, based on the proposals received in the form of Programme Implementation Plans (PIPs) under NHM. Government of India provides approval for the proposals in the form of Record of Proceedings (RoPs) as per norms & available resources.

Under NHM, norms have been relaxed for tribal/hilly/hard-to-reach areas to strengthen healthcare access. Population criteria for setting up of Sub Health Centres (SHCs), Primary Health Centres (PHCs) and Community Health Centres (CHCs) have been reduced to 3,000, 20,000 and 80,000 respectively. One Accredited Social Health Activist (ASHA) is allowed per habitation instead of per 1,000 population, and up to 4 Mobile Medical Units (MMUs) per district are permitted in tribal and hard-to-reach areas, compared to 2 in plain districts.

Under the Pradhan Mantri Janjati Adivasi Nyaya Maha Abhiyan (PM-JANMAN), launched on 15th November, 2023 by Ministry of Tribal Affairs (MoTA), further relaxation in NHM

norms has been provided up to 10 MMUs per district with Particularly Vulnerable Tribal Groups (PVTG) areas. Norms have been relaxed for one additional Auxiliary Nurse Midwife (ANM) for each Multi Purpose Centre (MPC) constructed by MoTA. As per MMU portal, 763 MMUs under PM-JANMAN and 155 MMUs under Dharti Aaba Janjatiya Gram Utkarsh Abhiyan (DA-JGUA) are operational across the country for providing basic health services in tribal areas till 31.12.2025. As on 31.12.2025, 30,817 AAMs are operational in 178 tribal districts.

The Government is making sustained efforts to ensure universal health coverage for tribal women across the country, including in Rajasthan, through the Reproductive Maternal Newborn Child Adolescent Health Plus Nutrition (RMNCAH+N) strategy under NHM, focusing on antenatal care, institutional deliveries, post-natal care and family planning services; Promotion of institutional deliveries through schemes such as Janani Suraksha Yojana (JSY) and Janani Shishu Suraksha Karyakram (JSSK); Regular outreach activities, health education and screening by ASHAs and other frontline workers in tribal habitations.
