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

LOK SABHA UNSTARRED QUESTION NO. 4321 TO BE ANSWERED ON 20.12.2024

NATIONAL HEALTH MISSION IN RURAL AREAS

4321. SHRI RAJESH RANJAN:

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

- (a) whether it is a fact that the National Rural Health Mission (NRHM) launched to provide accessible, affordable, accountable, effective and reliable healthcare facilities in the rural areas has failed to achieve its objectives, if so, the details thereof;
- (b) whether there is acute shortage of Sub-Health Centres (SCs), Primary Health Centres (PHCs), and Community Health Centres (CHCs) against the specified population norm, in the rural areas, if so, the details thereof;
- (c) the sanctioned/actual number of SCs, PHCs and CHCs functioning in rural areas against the specified population norm;
- (d) the number of PHCs and CHCs functioning without Doctor, Lab Technician and pharmacist in the country; and
- (e) the steps taken/proposed to be taken to provide required numbers of SCs, PHCs and CHCs in rural areas and to ensure improvement in their functioning and availability of requisite Doctor, Lab Technician and pharmacist therein?

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

- (a) to (e): To address the healthcare challenges, particularly in rural areas, the National Rural Health Mission (NRHM) was launched in 2005 to supplement the efforts of the State/UT governments to provide accessible, affordable and quality healthcare to all those who access public health facilities. NRHM is a sub-Mission under the overarching National Health Mission (NHM), along with National Urban Health Mission (NUHM) as the other sub-Mission. The major objectives of NHM are as under:
- (i) Reduction in child and maternal mortality.
- (ii) Prevention and control of communicable and non-communicable diseases, including locally endemic diseases.
- (iii) Access to integrated comprehensive primary health care.

- (iv) Population stabilisation, gender equality and demographic balance.
- (v) Revitalize local health traditions & mainstream AYUSH.
- (vi) Universal access to public services for food and nutrition, sanitation and hygiene and universal access to public health care services with emphasis on services addressing women's and children's health and universal immunisation.
- (vii) Promotion of healthy life styles.

The details of target set and achieved under NHM are listed below:

Targets (as per NHM extension for 2021-26)	Status
Reduce MMR to 87 per 1 lakh	97 per 1 lakh live births (SRS 2018-20)
Reduce IMR to 22 per thousand	28 per thousand (SRS 2020)
Sustain TFR to 2.0 at national level	2.0 (NFHS 5)
Achieve the operationalization of 1.5 lakh Ayushman Arogya Mandir (erstwhile AB-HWC)	1,75,338
	(as on 30.11.2024)

Health Dynamics of India (HDI) (Infrastructure & Human Resources), 2022-23 is an annual publication, based on Health care administrative data reported by States/UTs. Details of healthcare infrastructure along with status of health manpower in rural & urban areas in the country may be seen at the following link of HDI 2022-23:

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

This Ministry 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. However, the primary responsibility for engagement/availability of human resources in public health facilities lies with the respective State Government.
