

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

**LOK SABHA  
STARRED QUESTION NO. 307  
TO BE ANSWERED ON 21<sup>st</sup> MARCH, 2025**

**PUBLIC HEALTH OUTCOMES**

**†\*307. SMT. HEMA MALINI:**

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

- (a) whether the National Health Mission (NHM) has significantly contributed in improving public health outcomes of the country through efforts to expand human resources, address serious health issues and promote an integrated response to health emergencies;
- (b) if so, the details thereof;
- (c) whether there has been substantial improvement and progress in various areas of health including maternal and child health, elimination of diseases and healthcare infrastructure in the country through NHM over the years; and
- (d) if so, the details thereof?

**ANSWER  
THE MINISTER OF HEALTH AND FAMILY WELFARE  
(SHRI JAGAT PRAKASH NADDA)**

**(a) to (d):** A Statement is laid on the Table of the House.

**STATEMENT REFERRED TO IN REPLY TO LOK SABHA STARRED QUESTION NO.  
307 FOR 21<sup>st</sup> MARCH, 2025**

(a) to (d): 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.

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. The Ministry of Health and Family Welfare provides technical and financial support to the States/UTs to strengthen the public healthcare system including strengthening of health workforce based on the proposals received under National Health Mission as per norms and available resources.

Under NHM, as on 30.09.2024, nearly 5.19 lakh additional health human resources have been supported in the States on contractual basis. Under NHM, following types of incentives and honorarium are provided for encouraging doctors to practice in rural and remote areas of the country:

1. 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.
2. States are also allowed to offer negotiable salary to attract specialist including flexibility in strategies such as "You Quote We Pay".
3. 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.
4. 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.

NHM supports upgradation of health infrastructure through operationalisation of a total of 1,76,573 Ayushman Arogya Mandir (AAM) by upgrading existing Sub-Health Centres (SHCs) and Primary Health Centres (PHCs) to deliver Comprehensive Primary Health Care (CPHC) that includes preventive, promotive, curative, palliative and rehabilitative services which are universal, free, and closer to the community. Under National Programme for Prevention and Control of Non-Communicable Diseases (NP-NCD), 770 District NCD Clinics, 372 District Day Care Centres, 233 Cardiac Care Units, and 6410 Community Health Centre NCD Clinics have been set up.

NHM supports the provision of free services such as maternal health, child health, adolescent health, family planning, universal immunisation programme and management of serious diseases such as communicable diseases like Tuberculosis, vector borne diseases like

Malaria, Dengue and Kala Azar, Leprosy, Sickle Cell Anemia etc. A population-based initiative for screening, management, and prevention of common NCDs has been rolled out as a part of comprehensive Primary Health Care in the country under the NHM.

NHM has strengthened emergency healthcare services by establishing 24/7 Primary Health Centres (PHCs) and First Referral Units (FRUs), ensuring a coordinated response to health crises. To augment critical care services, Guidelines on Emergency Care in district hospitals have been issued in order to ensure availability of comprehensive emergency care at district hospitals.

This Ministry supports States/UTs in enhancing preparedness for public health emergencies through the Integrated Health Information Platform (IHIP) and the Integrated Disease Surveillance Programme (IDSP).

India COVID-19 Emergency Response & Health System Preparedness Package (ECRP-I & II package), was launched under NHM for providing support to Primary, Secondary and Tertiary care facilities during the pandemic.

There has been substantial improvement and progress in various health indicators.

#### Maternal and Child Health Indicators:

Maternal Mortality Ratio (MMR) declined from 130/lakh live births in 2014-16 to 97/lakh live births in 2018-20.

Institutional Deliveries increased from 78.9% in 2014 to 88.6% in 2019-21.

Infant Mortality Rate (IMR) reduced from 39 per 1000 live births in 2014 to 28 per 1000 live births in 2020.

Neonatal Mortality Rate (NMR) decreased from 26 per 1000 live births in 2014 to 20 per 1000 live births in 2020.

Under 5 Mortality Rate (U5MR) decreased from 45 per 1000 live births in 2014 to 32 per 1000 live births in 2020.

#### Disease Elimination:

India declared Polio-free in 2014 and maintained this status.

Maternal and Neonatal Tetanus eliminated in 2015.

Trachoma eliminated as a public health problem in October 2024.

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