Provision for spectacles, dentures and hearing aids under NRHM

- 138. SHRI RAM KUMAR KASHYAP: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:
- (a) whether there is no provision in the National Rural Health Mission (NRHM) to provide spectacles, dentures and hearing aids etc. particularly to senior citizens in the rural areas; and
- (b) if so, whether there is any proposal to provide spectacles, dentures and hearing aids etc. free of cost to the senior citizens in the rural areas under NRHM and if not, the reasons therefor?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) and (b) Public Health being a State subject, the primary responsibility to provide healthcare services is that of the respective State/UT Governments. However, under the National Health Mission (NHM), Government of India provides financial and technical support to States/UTs for strengthening of healthcare systems based on the requirements posed by the States/UTs in their Programme Implementation Plans (PIPs). The financial support could also be provided for spectacles, hearing aids etc. if the States so propose in their PIPs.

Failure of TB control programme in tribal areas

- 139. SHRI DEVENDER GOUD T.: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:
- (a) the reaction of the Ministry to ICMR's study which indicated that TB Control Programme has failed in most of the tribal areas of the country;
 - (b) the details of other findings of the study; and
- (c) the manner in which the Ministry is planning to revisit the Revised National TB Control Programme in tribal areas?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) to (c) The study by National Institute for Research in Tribal Health, Jabalpur, undertaken through analysis of Revised National Tuberculosis Control Programme (RNTCP) data for 2010 to 2012 has stated that the overall RNTCP performance in tribal areas of the country was not optimal.

However, the study results itself indicate that the proportion of districts that had low smear positive case detection rate was almost similar in all categories (backward, tribal and others) during year 2010 and 2012; the cure rates observed