

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

**RAJYA SABHA  
UNSTARRED QUESTION NO.253  
TO BE ANSWERED ON 20<sup>TH</sup> JULY, 2021**

**SPECIAL HEALTH CARE UNITS IN TRIBAL DOMINATED REGIONS**

**253 SHRI SUJEET KUMAR:**

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

(a) whether there are special health care units in the tribal dominated regions of the country according to their health care and nutrition needs

(b) if so, the details thereof and

(c) the number of tribal populations of Odisha that have been covered under the National Health Mission?

**ANSWER  
THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND  
FAMILY WELFARE  
(DR. BHARATI PRAVIN PAWAR)**

(a) & (b): “Public Health and Hospital” being a State subject, the primary responsibility of ensuring availability of healthcare facilities including development of special health care units in the tribal dominated regions of the country lies with respective State/UT Governments.

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 including tribal areas. Currently, NRHM is a sub-mission of National Health Mission (NHM).

Under the National Health Mission (NHM), financial and technical support is provided to States/UTs to strengthen their health care systems including setting-up/upgrading public health facilities and augmenting health human resource on contractual basis for provision of equitable, affordable healthcare to all its citizens particularly the poor and vulnerable population including tribal population based on requirements posed by the States in their Programme Implementation Plans (PIPs).

Various interventions that are implemented for better healthcare in tribal areas and beneficiaries are as follows;

- The population norms for setting up Health Facilities in tribal areas are relaxed. Against the population norms of 5,000, 30,000, and 1,20,000 for setting up of Sub Centre, PHC and CHC respectively, in tribal and desert areas its 3,000, 20,000 and 80,000.

- Relaxed norms for Mobile Medical Units (MMUs)
- Implementation of Free Drugs and Free Diagnostics Service Initiatives.
- SC/ST households are covered under Ayushman Bharat, Pradhan Mantri Jan Arogya Yojana (AB-PMJAY) for health coverage up to Rs 5 Lakh per family per year as per Socio Economic Caste Census (SECC).

Under NHM, tribal areas already enjoy relaxed norms for setting up public health facilities including “time to care” norm for setting-up sub health Centres in tribal areas within 30 minutes of walk from habitation and relaxed norm for Mobile Medical Units for tribal areas; extra one MMU if it exceeds 30 patients per day against 60 patients per day in plain areas for bringing healthcare delivery to the doorsteps of the population.

Further, all tribal majority districts whose composite health index is below the State average have been identified as High Priority Districts (HPDs) and these districts receive more resources per capita under the NHM as compared to the rest of the districts in the State. These districts receive higher per capita funding, have enhanced monitoring and focussed supportive supervision and are encouraged to adopt innovative approaches to address their peculiar health challenges.

Rural Health Statistics (RHS) is an annual publication, based on Health care administrative data reported by States/UTs. RHS provides information on rural health infrastructure and requirements of public health facilities in rural/tribal areas as reported by States. As per the RHS 2020, the state-wise details of number of Sub Centres (SCs), Primary Health Centres (PHCs), Health and Wellness Centres Sub-Centres (HWCs-SCs), Health and Wellness Centres-PHCs (HWCs-PHCs) & Community Health Centres (CHCs) functioning in tribal areas is at Annexure.

Due to above interventions under NHM, there has been 73% increase in Health Facilities available in Tribal areas as compared to 10% increase in all India

Type of Facility	All India			Tribal Areas		
	RHS 2005	RHS 2020	% Increase	RHS 2005	RHS 2020	% Increase
SHCs	1,42,655	1,55,404	9%	16,748	29,745	78%
PHCs	23,109	24,918	8%	2,809	4,203	50%
CHCs	3,222	5,183	61%	643	1035	61%
Total	1,68,986	1,85,505	10%	20,200	34,983	73%

(c) One of the objectives of National Health Mission is to strengthen public health facilities to enhance access to primary and secondary health services in rural, urban and tribal areas, and reduce barriers to access on account of gender, poverty, caste, and other forms of social exclusion and geographies and the support provided under NHM is universal to cover all populations visiting public healthcare facilities and appropriate community outreach activities including tribal population of a State/UT and accordingly, support is provided under NHM for strengthening their healthcare system based on requirements posed by the States/UTs in their Programme Implementation Plans.

## Annexure

NUMBER OF SUB-CENTRES, PHCs, HWCs-SCs, HWCs-PHCs & CHCs FUNCTIONING in Tribal Areas						
S. No.	State/UT	(As on 31st March 2019)				
		Sub centre	PHCs	HWC-SC	HWC-PHC	CHCs
1	Andhra Pradesh	762	0	40	153	21
2	Arunachal Pradesh #	307	101	78	42	63
3	Assam	664	131	114	50	27
4	Bihar	NA	NA	NA	NA	NA
5	Chhattisgarh	2440	288	372	107	81
6	Goa	66	0	0	8	1
7	Gujarat	2519	203	259	218	92
8	Haryana *	N App	N App	N App	N App	N App
9	Himachal Pradesh	104	47	0	0	8
10	Jammu & Kashmir	304	42	3	6	11
11	Jharkhand	2522	103	143	89	98
12	Karnataka	321	64	0	0	7
13	Kerala	831	137	0	0	12
14	Madhya Pradesh	3274	306	0	32	99
15	Maharashtra	2162	341	420	126	67
16	Manipur	234	53	18	2	7
17	Meghalaya #	445	110	32	8	28
18	Mizoram #	370	65	0	4	9
19	Nagaland #	397	126	56	5	21
20	Odisha	2674	116	27	311	133
21	Punjab *	N App	N App	N App	N App	N App
22	Rajasthan	1564	211	10	22	67
23	Sikkim	48	12	9	1	0
24	Tamil Nadu	332	66	100	39	25
25	Telangana	698	0	0	93	23
26	Tripura	484	45	0	3	9
27	Uttarakhand	155	10	0	0	5
28	Uttar Pradesh	NA	NA	NA	NA	NA
29	West Bengal	3206	300	0	0	104
30	A&N Island	33	4	8	0	1
31	Chandigarh *	N App	N App	N App	N App	N App
32	D&N Haveli #	34	4	24	3	0
33	Daman & Diu	0	0	5	0	0
34	Delhi *	N App	N App	N App	N App	N App
35	Lakshadweep#	14	4	0	0	3
36	Puducherry *	N App	N App	N App	N App	N App
	<b>All India</b>	<b>26964</b>	<b>2889</b>	<b>1718</b>	<b>1322</b>	<b>1022</b>
<i>Note:</i>						
#:States are predominantly tribal areas						
*: State / UT has no separate Tribal Area / Population						
N App - Not applicable						
N A - Data not available						