HEALTH FACILITIES IN RURAL AREAS

1430 SHRI TIRUCHI SIVA:

Will the Minister of RURAL DEVELOPMENT be pleased to state:

(a) whether attempts have been made to improve health access in rural areas of the country, if so, the details thereof; and
(b) the plan adopted by the Ministry to improve the information dissemination regarding COVID-19 in the rural landscape?

ANSWER

MINISTER OF STATE IN THE MINISTRY OF RURAL DEVELOPMENT
(SADHVI NIRANJAN JYOTI)

(a): As “Public Health & Hospitals” is a State subject, the primary responsibility for ensuring healthcare services including for making public health care facilities accessible to people, lies with respective State/UT Governments. Under National Health Mission (NHM), Government of India provides financial and technical support to the States/UTs for strengthening their healthcare systems. However, this support is based on the Programme Implementation Plans (PIPs) submitted by the States/UTs within their overall resource envelope.

In order to make health services accessible, affordable and available to the people particularly in rural areas of the country, the Government of India has taken several steps to reduce out of pocket expenditure which inter-alia includes Implementation of National Health Mission - Free Drugs and Free Diagnostics initiative to provide essential drugs and diagnostics free of cost in public health facilities. Under National Health Mission, states are being supported for augmenting the referral network in the country by Advanced Life Support (ALS), Basic Life Support (BLS) and Patient Transport Vehicle (PTV) ambulance system in both rural and urban areas. States have the flexibility to deploy more numbers of ambulances in hilly, tribal and remotest areas to provide timely care and decrease the response time.

Support is also provided for Mobile Medical Units (MMUs) and Telemedicine under NHM to improve healthcare access particularly in rural areas. MMUs conduct outreach activities to offer range of services in remote, difficult and hard to reach areas. States have the flexibility to deploy more numbers of MMUs in hilly, tribal and remotest areas for better coverage of outreach.

As part of Ayushman Bharat, the Government is supporting the States for transformation of Sub Health Centres and Primary Health Centres into 1.5 lakh Health and Wellness Centres across the country by December, 2022 for provision of Comprehensive Primary Health Care (CPHC) that includes preventive healthcare and health promotion at the community level with continuum of care approach. Further Ayushman Bharat, Pradhan Mantri Jan ArogyaYojana
(AB-PMJAY) provides health coverage up to Rs 5 Lakh per family per year to around 10.74 crore poor and vulnerable families as per Socio Economic Caste Census (SECC).

The various schemes of the Ministry of Rural Development also promote better health access and sanitation in rural areas. The details in this regard are given below:

(i) Under Phase-III of the Pradhan Mantri Gram Sadak Yojana (PMGSY), emphasis has been given, inter-alia, to connect rural habitations with hospitals. Under PMGSY-III, against the target of 1,25,000 km, 62,968 km has been sanctioned and 13,917 km has been completed. Various independent impact assessment studies on PMGSY suggest that this has made health facilities accessible to people. Women have been the major beneficiaries with most of the child birth taking place in government hospitals.

(ii) Under Shyama Prasad Mukherji Rurban Mission (SPMRM), access to healthcare has been envisaged as one of the components in the list of twenty one (21) desirable components to be the key drivers for inclusive growth in cluster areas.

(iii) Mahatma Gandhi National Rural Employment Guarantee Scheme (Mahatma Gandhi NREGS) promotes health and hygiene through various permissible rural sanitation works in the rural areas.

(b): The Ministry of Rural Development has adopted various steps to improve the information dissemination on Covid-19 through its various Schemes/programmes implemented in the rural areas of the country:

(i) Ministry has issued advisory on 15.04.2020 to all States/UTs regarding protective measures during Covid-19 while taking up works under the Mahatma Gandhi NREGS. Further, this Ministry had communicated to all States/UTs regarding Jan Andolan Covid-19 Campaign in October, 2020 along with various Information Education and Communication (IEC) activities. Similar advisories have been issued by other Programme Divisions of this Ministry.

(ii) A cascading model of training on COVID-19 Appropriate Behaviours, Vaccine and related issues were conducted in June, 2020 and April, 2021. During 2020 (June-August), 20065 Mission Staff, District and Block Resource Persons, 5.10 lakh Community Resource Persons, Community Based Organization staff, community cadres and 5.10 crore SHG members were trained. During 2021 (April – June) 14000 Mission Staff, District and Block Resource Persons, 4.55 lakh Community Resource Persons, Community Based Organization staff, community cadres, 5.52 crore SHG members were trained.