

Panel reviews healthcare mission in villages

'Give sops to attract docs to rural jobs'

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THE SHORTAGE of nurses and doctors in rural areas is affecting the Centre's pet project, National Rural Health Mission (NRHM), which has an annual budget of Rs 12,056 crore. A Common Review Mission (CRM) set up to assess the progress of the programme in 13 states across the country recommended that compensation packages for health service cadres be greatly enhanced to attract health professionals to work in rural areas.

The team found that an acute shortage of doctors, paramedics, nurses and lab technicians at the district level is the biggest roadblock in the implementation of the rural health mission. "There needs to be a systematic examination of the compensation packages and incentives being provided to the various health service cadre, and the opportunities for advancement in their careers along with a fair transfer and posting policy," it said in its report.

With a mandate to identify the constraints and make recommendations for course correction, the CRM reviewed the implementation of the programme in 13 states - Andhra Pradesh, Assam, Bihar, Chhattisgarh, Gujarat, Jammu and Kashmir, Madhya Pradesh, Orissa, Rajasthan, Tamil Nadu, Tripura, Uttar Pradesh and West Bengal. The team comprised independent public health experts and central and state health officials.

This year, NRHM got the lion's share of the Rs 16,534-crore budget allocation for health. NRHM's target is



PANCHAYAT ROLE

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strengthening healthcare delivery in rural areas by training 462,000 accredited social health activists (ASHAs) and link workers in villages and upgrading 323 district hospitals. The good news is that the ASHA programme is functioning in all states with active community participation.

Interestingly, the CRM notes that the "actual devolution of facilities to the panchayats is a feature only in West Bengal, Kerala and Nagaland. In states like Tripura and Tamil Nadu, panchayats were found to be proactive and very valuable." The team found states with better baselines and similar programmes in place such as Andhra Pradesh and Gujarat were quicker to take off.