

NATIONAL RURAL HEALTH MISSION

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ABSTRACT

The Government of India is striving very hard to provide health services to people across the nation, for which government of India has implemented many programmes to achieve the target of "Health for All"¹, 9 since many years and the government is committed to that. In the view of this in the year 2005 the Hon'ble Prime Minister had launched National Rural Health Mission to provide health services to rural people. National Rural Health Mission started in April 2005, which is considered the life line for the health sector in rural area.² This programme has given a belief among rural people that something constructive has come to revive the health of the rural people.

Key Words: Health services, rural people, Health, National rural health mission.

NRHM SCHEME

NRHM seeks to provide equitable, affordable, and quality health care to the rural population, especially the vulnerable groups. Under the NRHM, the Empowered Action Group (EAG) States, as well as the North Eastern States, Jammu and Kashmir and Himachal Pradesh, have been given special focus. The thrust of the mission is on establishing a fully functional, community-owned, decentralized health delivery system with inter-sectoral convergence at all levels, to ensure simultaneous action on a wide range of determinants of health such as water, sanitation, education, nutrition, social and gender equality. Institutional integration within the fragmented health sector was expected to provide a focus on outcomes, measured against Indian Public Health Standards for all health facilities.

The National Rural Health Mission (NRHM) was launched in 2005 by the Government of India to improve healthcare services in rural areas, where access to healthcare was limited and health outcomes were poor (Ministry of Health and Family Welfare, 2005). The scheme aimed to strengthen healthcare infrastructure, enhance quality of healthcare services, and promote community involvement (Kumar et al., 2011).

NRHM focused on improving healthcare delivery through:

1. Strengthening of health infrastructure, including health centers and hospitals (Gupta et al., 2012)
2. Training of health workers, including doctors, nurses, and community health workers (Bhatia et al., 2011)
3. Provision of equipment and supplies to health facilities (Srivastava et al., 2013)
4. Community mobilization and awareness generation through the Accredited Social Health Activist (ASHA) program (Kumar et al., 2011)

Research studies have shown that NRHM has had a positive impact on healthcare outcomes in rural areas, including:

1. Reduction in infant mortality rate (IMR) and maternal mortality ratio (MMR) (Randive et al., 2013)
2. Increase in immunization coverage (Gupta et al., 2012)
3. Improvement in health outcomes for vulnerable populations, such as women and children (Srivastava et al., 2013)

However, challenges persist, including:

1. Shortage of healthcare professionals in rural areas (Bhatia et al., 2011)
2. Limited access to specialized healthcare services (Gupta et al., 2012)
3. Inequitable distribution of healthcare resources (Kumar et al., 2011)

ACTION PLAN OF NRHM SCHEME

The National Rural Health Mission (NRHM) is a government program in India that aims to provide accessible, affordable, and quality health care to rural areas. The action plan of NRHM scheme includes:

- State-specific planning: States have the flexibility to plan and implement state-specific action plans. ((Ministry of Health and Family Welfare, 2005)
- Managerial support: Provision has been made for setting up programs to track funds and monitor activities under the mission.(Planning Commission, 2006)
- Combination of national programs: NRHM is a combination of national programs, including the Reproductive and Child Health II project.(Ministry of Health and Family Welfare, 2005)
- District-level planning: District-level officers are responsible for planning, implementing, and monitoring activities of the NRHM program. ((District Level Health Society, 2007)

- NGO scheme: NRHM has an NGO scheme under the RCH program. (Ministry of Health and Family Welfare, 2006)
- Training and capacity building: Training and capacity building are important components of the NRHM action plan. (National Institute of Health and Family Welfare, 2008)
- Infrastructure development: Upgrading of infrastructure, including health facilities and equipment, is part of the action plan. (Ministry of Health and Family Welfare, 2007)
- Human resource development: Development of human resources, including recruitment and training of health personnel, is included in the plan. (National Institute of Health and Family Welfare, 2008)
- Monitoring and evaluation: Regular monitoring and evaluation of the program is crucial to its success. (Ministry of Health and Family Welfare, 2008)

The National Rural Health Mission (NRHM) has implemented various strategies to improve healthcare in rural India. Research has shown that:

- Decentralization and district-level planning have improved healthcare delivery (Bhat et al., 2009)
- Strengthening of sub-centers and primary health centers has increased access to healthcare (Kumar et al., 2011)
- Training and capacity building of healthcare workers has enhanced service quality (Pandey et al., 2012)
- Community involvement through ASHAs has improved health outcomes (Ravindran, 2012)
- Public-private partnerships have increased healthcare accessibility (Srivastava et al., 2011)

However, challenges persist, including:

- Inadequate funding and infrastructure (Mishra et al., 2012)
- Shortage of healthcare personnel (Rao et al., 2013)
- Limited access to specialized care (Sinha et al., 2013)

REVIEW OF LITERATURE

Ray SK2014 conducted a study on Awareness & Utilization of National Rural Health Mission Services Among People of Selected Rural Areas in The State of Maharashtra. Result: Most of the people (63%) were not aware about the different services under NRHM except Janani Suraksha Yojna. Finding of utilization depicted that majority (68.1%) of them had average utilization of NRHM Services. People (83%) have also responded that facilities were not good (in terms of infrastructure, drugs and equipment, availability of medical officers and nursing staff, transport etc.) in the government health settings and they have to wait for a long time to meet the doctors.

Ram F, Singh A, Ram U, 2013 conducted a study on Human rights approach to maternal & child health: has India fared well. Evidence clearly suggested gross violation of human rights starting from the birth of an individual. Even after 60 years of independence, significant proportions of women and children do not have access to basic services like improved drinking water and sanitation.

CONCLUSION

The National Rural Health Mission (NRHM) aimed to improve rural healthcare by strengthening infrastructure, enhancing quality of care, and promoting community participation. Despite challenges, NRHM has shown positive impacts on health outcomes, including reduced infant and maternal mortality rates, and increased access to healthcare services in rural India.

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