

Ministry of Health and Family Welfare Schemes

Ayushman Bharat Programme

- ABY or National Health Protection Mission is a national initiative launched in order to achieve the vision of Universal Health Coverage
- It comprises of two inter-related components
 1. Establishment of Health and Wellness Centre
 2. Pradhan Mantri Jan Arogya Yojana (PMJAY)
- **Health and Wellness Centre** - National Health Policy, 2017 envisioned Health and Wellness Centres as the foundation of India's health system.
- Under this, 1.5 lakh centres will bring health care system closer to the homes of people.
- The centres will provide comprehensive health care, including for non-communicable diseases and maternal and child health services. 2
- These will also provide free essential drugs and diagnostic services.
- Contributions through CSR and philanthropic institutions in adopting these centres are also envisaged.
- First 'health and wellness centre' has been inaugurated in Bijapur district in Chhattisgarh.
- **Pradhan Mantri Jan Arogya Yojana (PMJAY)** - It aims to reduce out of pocket hospitalisation expenses by providing health insurance coverage upto Rs.5 lakh/family/year for **secondary and tertiary care hospitalization**.
- The scheme will integrate two ongoing centrally sponsored schemes Rashtriya Swasthya Bima Yojana (RSBY) and Senior Citizen Health Insurance Scheme (SCHIS).
- The NHPS remains disconnected from primary health care services.
- Also, a beneficiary covered under the scheme will be allowed to take cashless benefits from any public/private empanelled hospitals across the country.
- **Coverage** - The scheme will aim to target over 10 crore families based on SECC (Socio-Economic Caste Census) database.
- Rashtriya Swasthya Bima Yojna (RSBY) beneficiaries in state where it is active is also included.

Rashtriya Swasthya Bima Yojana (RSBY)

- It is a centrally sponsored health insurance scheme with a main objective of this scheme is to
 1. Provide financial protection against catastrophic health costs
 2. Improve access to quality health care for BPL and other vulnerable groups
- The premium cost is shared by Centre and the State.
- The beneficiaries are entitled to hospitalization coverage up to Rs. 30,000/- per annum on family floater basis i.e can be utilised by any family member.
- The coverage extends to maximum 5 members of the family which includes the head of household, spouse and up to three dependents including the provision to pay transport expense.
- The beneficiaries need to pay only Rs. 30 as registration fee.

- Beneficiaries get a biometric-enabled smart card containing their fingerprints and photographs and this Single central smart card also to include other welfare schemes like Aam Aadmi Bima Yojana and national old age pension scheme.
 - To ensure that nobody from the vulnerable group is left out of the benefit cover, there will be no cap on family size and age in the scheme.
 - The insurance scheme will cover pre and post-hospitalisation expenses.
 - All pre-existing diseases are also covered.
 - It will also pay defined transport allowance per hospitalization to the beneficiary.
 - **Funding** - The expenditure incurred in premium payment will be shared between central and state governments in a specified ratio
1. 60:40 for all states and UTs with their own legislature.
 2. 90:10 in NE states and the 3 Himalayan states of J&K, HP and Uttarakhand.
 3. 100% central funding for UTs without legislature.
- The State governments have the main responsibility of health service delivery.
 - States will be allowed to expand the scheme both horizontally and vertically.
 - Mode of funding - In a trust model, bills are reimbursed directly by the government.
 - Andhra Pradesh, Telangana, Madhya Pradesh, Assam, Sikkim and Chandigarh are the states that will use a trust model for the mission.
 - In an insurance model, the government pays a fixed premium to an insurance company, which pays the hospitals.
 - Gujarat and Tamil Nadu have opted for mixed mode implementation.
 - The scheme is creating a cadre of certified frontline health service professionals called Pradhan Mantri Aarogya Mitras (PMAMs).
 - PMAM will be primary point of facilitation for the beneficiaries to avail treatment at the hospital and thus, act as a support system to streamline health service delivery.
 - Besides, 24 new Government Medical Colleges and Hospitals will be set up, by up-grading existing district hospitals in the country.
 - This would ensure that there is at least 1 Medical College for every 3 Parliamentary Constituencies.
 - Also, at least 1 Government Medical College in each State of the country.

National Health Mission

- The broad objectives of National Health Mission includes the following
1. Reduce MMR to 1/1000 live births
 2. Reduce IMR to 25/1000 live births
 3. Reduce TFR to 2.1
 4. Prevention and reduction of anemia in women aged 15–49 years
 5. Prevent and reduce mortality & morbidity from communicable, non- communicable; injuries and emerging diseases
 6. Reduce household out-of-pocket expenditure on total health care expenditure
 7. Reduce annual incidence and mortality from Tuberculosis by half
 8. Reduce prevalence of Leprosy to <1/10000 population and incidence to zero in all districts
 9. Annual Malaria Incidence to be <1/1000
 10. Less than 1 per cent microfilaria prevalence in all districts
 11. Kala-azar Elimination by 2015, <1 case per 10000 population in all blocks

- The Mission has two sub missions such as National Rural Health Mission and National Urban Health Mission.
- **Public health being a state subject**, the aim is to support States/UTs through NHM, for strengthening their health care delivery systems

National Rural Health Mission

NRHM aims to provide Reproductive, Maternal, Newborn, Child and Health and Adolescent (RMNCH+A) services to the rural deprived people through its network of ASHA, ANMs and AWWs.

NRHM, also called NRHM-RCH Flexipool is one of the components of NHM and is for all towns and villages below the population of 50,000.

Various initiatives under NRHM

Accredited social health activists

Janani Suraksha Yojana

Janani Shishu Suraksha Karyakram (JSSK)

Rashtriya Bal Swasthya Karyakram (RBSK)

Mainstreaming AYUSH – revitalizing local health traditions.

National Urban Health Mission

- To meet health care needs of the urban population with the focus on urban poor, slum dwellers, by making available to them essential primary health care services and Reducing their out of pocket expenses for treatment.
- It seeks to strengthen the existing health care service delivery system converging with various schemes implemented by the Ministries of Urban Development, Housing & Urban Poverty Alleviation, Human Resource Development and Women & Child Development.
- It works in partnership with community and local bodies and NGOs and District health action plan is prepared.
- NUHM would cover all State capitals, district headquarters and cities/towns with a population of more than 50000.
- Centre-state funding pattern will be 75:25 for all the states and 90:10 for Special Category States.

ASHA, ANM and AWW

- Accredited Social Health Activist (ASHA) is a trained female community health activist who acts as a interface between the community and the public health system.
- ASHA must be women resident of the village who is literate with formal education upto class eight and preferably in the age group of 25-45 years.
- Auxiliary Nurse Midwife is a resource person for ASHA and provides on-job training and guidance and ensures that ASHA gets the compensation for performance.

- Anganwadi Worker guides ASHA in performing activities such as organising Health Day at Anganwadi Centre and AWW is a depot holder for drug kits and will be issuing it to ASHA.

Janani Suraksha Yojana

- The objective of the JSY is to reduce maternal and infant mortality by promoting institutional delivery among pregnant women by **providing conditional cash assistance of Rs.1400**.
- There is no bar on age of mother, number of children or type of institution i.e a government or accredited private health facility.
- Financial assistance under JSY is available to all pregnant women in states that have low institutional delivery rates, namely, UP, Uttarakhand, Bihar, Jharkhand, MP, Chhattisgarh, Assam, Rajasthan, Odisha, and J&K. They are categorized as **Low Performing States (LPS)**.
- In **High Performing States (HPS)**, where the levels of institutional delivery are satisfactory, pregnant women from BPL/SC/ST households only are entitled for JSY benefit.
- The scheme also provides performance based incentives to ASHAs.

Janani Shishu Suraksha Karyakram

- The scheme entitles all pregnant women delivering in public health institutions to an absolutely free and no expense delivery including C- section.
- All expenses are borne by the government.
- A pregnant woman is also entitled to free transport from home to the government health facility.
- Entitlements include free drugs and consumables, free diagnostic, free blood, free diet up to 3 days for normal delivery and 7 days for C-section.
- Similar entitlements have been put in place for all sick newborns accessing public health institutions for healthcare till 30 days after birth.
- It also provides for free transport from home to institution, between facilities in case of a referral and drop back home.
- This initiative will also help in reducing maternal and infant mortality and morbidity.

Rashtriya Bal Swasthya Karyakram

- RBSY envisages Child Health Screening and Early Intervention Services and subsumes the existing school health programme.
- The scheme aims at early identification and early intervention for children from birth to 18 years to cover 4 'D's viz. Defects at birth, Deficiencies, Diseases, Development delays including disability.
- The 0 - 6 years age group will be specifically managed at District Early Intervention Center (DEIC) level while for 6 -18 years age group, managed at existing public health facilities.
- DEIC will act as referral linkages for both the age groups.
- Children under 6 years will be screened by Mobile Block Health teams at the Anganwadi centre and those between 6-18 years will be screened at the local schools at least once a year in government and government aided schools

Rashtriya Kishor Swasthya Karyakram

- It is a **health programme for adolescents**, which focuses on age groups 10-19 years with universal coverage.

- Key Principles are adolescent participation and leadership, Equity and inclusion, Gender Equity and strategic partnerships with other sectors and stakeholders.
- **Focus areas**
 1. Improve nutrition - Reduce the prevalence of malnutrition and iron- deficiency anaemia (IDA) among adolescent girls and boys.
 2. Improve sexual and reproductive health
 3. Enhance mental health
 4. Prevent injuries and violence
 5. Prevent substance misuse
 6. Address Non-Communicable diseases such as hypertension, stroke, cardio- vascular diseases and diabetes.

Pradhan Mantri Surakshit Matritva Abhiyan

- The program aims to provide assured, comprehensive and quality antenatal care, free of cost, universally to all pregnant women on the 9th of every month.
- It guarantees a minimum package of antenatal care services to women in their **2nd/3rd trimesters of pregnancy** at designated **government health facilities**.
- The health check-up includes a minimum package of prenatal care/antenatal care services i.e care given during pregnancy and medicines such as IFA supplements, calcium supplements etc would be provided to all pregnant women.
- The programme follows a systematic approach for **engagement with private sector** which includes motivating private practitioners to volunteer for the campaign.
- It also laid special emphasis on early diagnosis, adequate and appropriate management of women with malnutrition and adolescent and early pregnancies as these pregnancies need extra and specialized care.
- Thus it aims to improve the quality and coverage of Antenatal Care (ANC) including diagnostics and counselling services as part of the Reproductive Maternal Neonatal Child and Adolescent Health (RMNCH+A) **Strategy**.

Pradhan Mantri Swasthya Suraksha Yojana

- It is a central sector scheme aims to correct regional imbalances in the availability of affordable/reliable tertiary healthcare services and also to augment facilities for quality medical education in the country.
- It has two components
 1. Setting up of AIIMS like institutions and
 2. Upgradation of Government medical college institutions.

Rashtriya Arogya Nidhi

- RAN aims to provide financial assistance to BPL patients, who are suffering from major life threatening diseases, to receive medical treatment at any of the 13 listed super specialty institutes or government hospitals.
- The central government/state government/PSU employees are not eligible.

- The financial assistance to such patients is provided in the form of 'one-time grant', which is released to the Medical Superintendent of the Hospital in which the treatment has is being received.
- The States are needed to create their own State Illness Assistance funds in which central government contribute 50% of the fund and the fund is granted to Medical superintendent for treatment.
- The State government can grant up to Rs. 1.5 lakh in each individual case in their state and forward the cases that exceed Rs.1.5 lakh to RAN headquarters.
- A —Revolving Fundl has been set up in 13 Central Government hospitals/institutes.
- These hospitals can sanction financial assistance up to Rs.5 lakh, but beyond Rs.5 lakh it has to be referred to RAN headquarters.

Universal Immunization Programme

- The UIP basket has vaccines for ten diseases i.e
 3. BCG for **TB**, OPV for **poliomyelitis**,
 4. monovalent measles vaccine for **measles**,
 5. Rota Virus vaccine for **Diarrhoea**,
 6. JEV for **Japanese Encephalitis** &
 7. Pentavalent Vaccine for DPT (**diphtheria, pertussis** i.e whooping cough & **tetanus**) and
 8. Vaccine for **Hepatitis B** & **Pneumonia** due to Hib.
 9. Measles-rubella vaccine (MR) is also added now to the UIP.
- India has set a target of **eliminating measles** and **controlling congenital rubella syndrome (CRS)**, caused by the rubella virus, by 2020.

Mothers' Absolute Affection Program

- The program aims to enhance optimal breastfeeding practices in the country through Community awareness generation, Strengthening inter personal communication through ASHA, skilled support for breastfeeding and Award/recognition

LaQshya Initiative

- Labour Room Quality Improvement Initiative's objective is to reduce preventable maternal and new-born mortality, morbidity and stillbirths by improving the quality of care provided in the labour room.
- It will be implemented in Government Medical Colleges besides District Hospitals, and Sub- District Hospitals and Community Health Centres.
- The initiative plans to conduct quality certification of labour rooms and also incentivize facilities achieving the targets outlined.

National Strategic Plan and Mission Sampark

- They were launched on the occasion of World AIDS Day, 2017.
- The National Strategic Plan on HIV/AIDS and Sexually Transmitted Infections (STI), 2017-24 was released.
- The plan will pave a roadmap not only for achieving the target of 90:90:90 but also strive along with partners towards fast track strategy of **ending the AIDS epidemic by 2030**.

- By 2020, 90% of all people living with HIV will know their HIV status. By 2020, 90% of all people with diagnosed HIV infection will receive sustained antiretroviral therapy. By 2020, 90% of all people receiving antiretroviral therapy will have viral suppression.
- The strategic plan is aimed at eradicating HIV/AIDS by 2030.
- It also aimed to achieve elimination of mother-to-child transmission of HIV and Syphilis as well as elimination of HIV/AIDS related stigma and discrimination by 2020.
- The —**Mission Sampark** was launched to bring People Living with HIV who has left treatment back to Anti Retro Viral Treatment (ART).

Mission Indradhanush

- The mission aims to cover all those children by 2020 who are either unvaccinated, or are partially vaccinated against 7 vaccine preventable diseases.
- It includes diphtheria, whooping cough, tetanus, polio, tuberculosis, measles and hepatitis B.
- It aims to fully immunize children under the age of two years and pregnant women with all available vaccines.
- The Mission is being implemented in 201 high focus districts in the country in the first phase which has nearly 50% of all unvaccinated or partially vaccinated children.
- The campaign is part of the Universal Immunisation Programme by 2020.
- The Ministry will be technically supported by WHO, UNICEF, Rotary International and other donor partners.

Electronic Vaccine Intelligence Network (eVIN)

- It is an indigenously developed technology system in India that digitizes vaccine stocks and monitors the temperature of the cold chain through a smartphone application.
- The innovative eVIN is presently being implemented across twelve states in India.
- eVIN aims to support the Government of India's Universal Immunization Programme by providing real-time information on vaccine stocks and flows, and storage temperatures across all cold chain points in these states.
- The technological innovation is implemented by the United Nations Development Programme (UNDP).
- It aims to strengthen the evidence base for improved policy-making in vaccine delivery, procurement and planning for new antigens in India.

Mission Parivar Vikas

- It was launched on the occasion of World Population Day to accelerate access to high quality family planning.
- It focuses on family planning initiatives and targeted approaches for population stabilisation through better services delivery approach.
- It will focus on 146 high fertility districts in 7 states with high TFR (Total Fertility Rate).
- A new program named —**Antara** was launched under this mission.
- Under this, an injectable hormonal contraceptive method for women that prevents pregnancy for 3 months.

Project Sunrise

- The project is to tackle the increasing HIV prevalence in the eight North-Eastern states.
- It aims to diagnose 90% of such drug addicts with HIV and put them under treatment by 2020.
- It will cover one lakh people living with HIV/AIDS by giving them treatment and care facilities free of cost.
- It will be implemented in addition to the existing projects of the National AIDS Control Organization (NACO).
- The project has been sponsored by US based Centre for Disease Control and would be implemented by Family Health International 360.

National Deworming Mission

- According to WHO, India has the highest burden of Soil-Transmitted Helminths (STH/ intestinal worms in the world.
- The mission is aimed to protect **children in the ages of 1-19 years** from these worms.
- **Albendazole** tablets will be given to all targeted children through Anganwadi centres and all schools.

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