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Reaching The Unreached: Evaluating The National Health Mission in Odisha

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ABSTRACT

The National Rural Health Mission (NRHM), launched in 2005, aimed to strengthen rural healthcare infrastructure and improve service delivery. In Odisha, one of the focus states, significant progress has been made under NRHM—now integrated into the National Health Mission (NHM)—in areas like infrastructure, maternal and child health, and disease prevention. Initiatives such as Janani Suraksha Yojana (JSY), LaQshya, and Special Newborn Care Units (SNCUs) have contributed to improved maternal and infant health outcomes. Digital innovations, including telemedicine and the Odisha e-Hospital Management Information System (OeHMIS), have enhanced access to care. Additionally, the Biju Swasthya Kalyan Yojana (BSKY) has expanded coverage, offering cashless healthcare services.

Despite these achievements, the mission faces challenges, including inadequate funding, workforce shortages, and healthcare disparities between urban and rural regions. Overburdened facilities and underdeveloped infrastructure in remote areas continue to limit service delivery. A SWOT analysis of NHM in Odisha reveals its strengths in infrastructure and digital health innovations, and its vulnerabilities to geographical and logistical constraints. Addressing these issues requires sustained policy commitment, equitable funding, and strategic planning. Odisha's vision, "Sustha Odisha, Sukhi Odisha" (Healthy Odisha, Happy Odisha), highlights its goal of delivering equitable, quality healthcare to all citizens.

KEYWORDS: National Health Mission, Rural healthcare services, Health infrastructure, Maternal health, Child health services.

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INTRODUCTION

India's economic growth is closely linked to the health of its population. Since the Bhore Committee's recommendations in 1946, India's healthcare system has experienced major developments, all focused on strengthening healthcare services for every segment of the population. Notably, health sector reforms in the 1990s shifted the perception of healthcare from a service to a commodity. [1] Understanding the vital importance of community engagement in enhancing public health, especially in rural regions, Honourable Prime Minister Dr. Manmohan Singh launched the National Rural Health Mission (NRHM) in 12th April 2005, aimed to enhance healthcare services in rural India. Its vision, "Meeting people's health needs in rural areas," targeted 18 states, including those with significant healthcare challenges like Bihar, Jharkhand, Madhya Pradesh, and Odisha.[2] By focusing on accessible, affordable, and reliable primary healthcare, NRHM sought to bridge the gaps in rural healthcare delivery, notably through the Accredited Social Health Activist (ASHA) cadre, empowering local women to promote health awareness and facilitate access to health services. [3]

In 2013, the Government of India merged National Rural Health Mission (NRHM) with the National Urban Health Mission (NUHM) to form the National Health Mission (NHM). This strategic shift was aimed at focusing on the health needs of communities in both rural and urban regions. [4] While NRHM primarily focused on improving rural health systems, the addition of NUHM enabled the mission to expand its reach to urban slums and underserved urban areas.[5] The broadening of NHM's scope ensured universal health

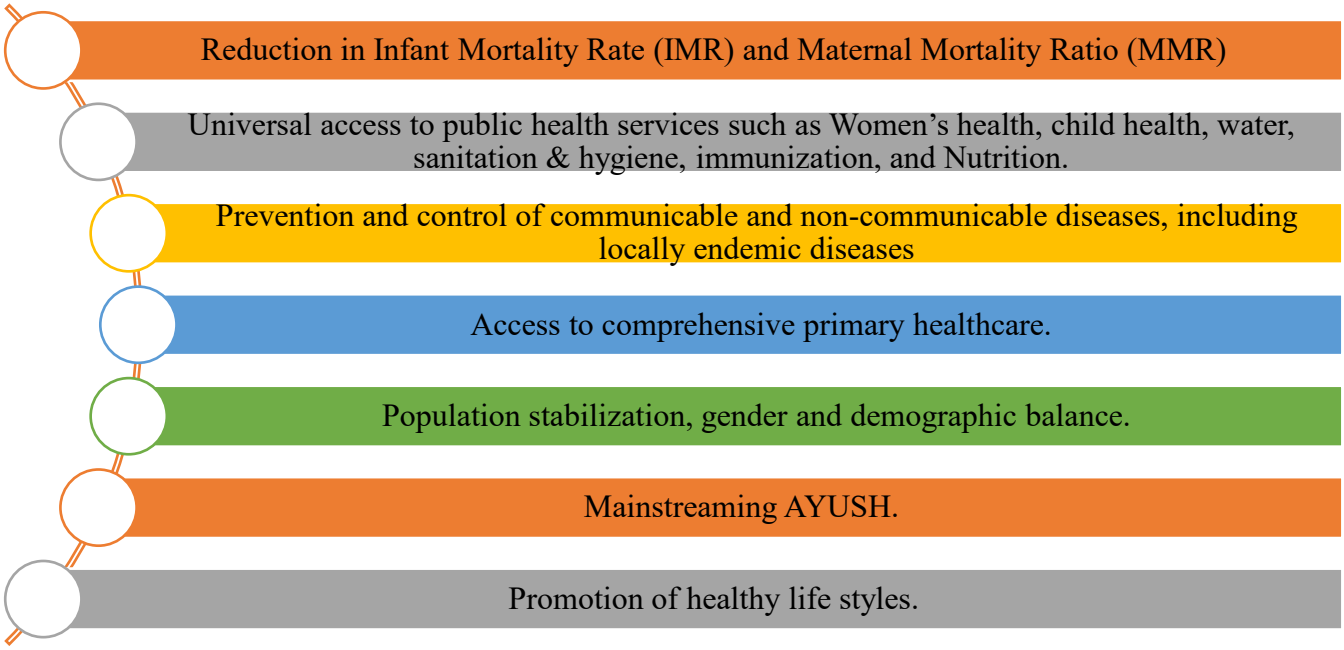
coverage for all, with a focus on strengthening healthcare infrastructure, enhancing quality service delivery, and ensuring accountability, particularly for marginalized communities. [6]

NHM's commitment to universal access to affordable, equitable, quality healthcare remains central to its vision, with particular attention to maternal and child health, disease control, and improving healthcare infrastructure. [7] The mission's alignment with the National Health Policy has been critical in driving these efforts at a national level.

The Health & Family Welfare Department of Odisha has embraced NHM's guiding principles, working diligently to give equitable, affordable, accessible, high-quality healthcare particularly in underserved and hard-to-reach areas. In line with these priorities, the Odisha government has placed significant emphasis on infrastructure development, human resource management, and the procurement of essential medical equipment, along with the free supply of medicines across its public health facilities.

Odisha's public health system is anchored in the principles of "Sustha Odisha, Sukhi Odisha" (Healthy Odisha, Happy Odisha) and "Healthcare for All – Each Life Matters." With a population exceeding 46 million, the state is making significant strides toward universal health coverage. This is being achieved through substantial increases in the health sector budget, addressing the shortage of medical professionals, and strengthening healthcare infrastructure to ensure that services are responsive and accountable to the needs of all residents.[8]

OBJECTIVES OF NHM: [9]



This article's objective is to conduct a critical appraisal of the National Health Mission's implementation and assess its progress, with a view to guiding future strategies for enhancing rural healthcare.

ACHIEVEMENTS OF NHM:

Strengthening Healthcare Infrastructure:

The NRHM in Odisha has achieved significant milestones in strengthening healthcare infrastructure. Twenty new District Headquarter Hospitals (DHHs) were either constructed or upgraded, improving accessibility to healthcare services.[10] Community Health Centres (CHCs) were expanded to improve emergency care services and inpatient facilities in rural areas.[10] Maternal & Child Health (MCH) wings were upgraded with better-equipped labor rooms and additional maternity beds.[11] Over 6,400 Health and Wellness Centers (HWCs) became operational, offering comprehensive primary healthcare, including non-communicable disease (NCD) screening and wellness activities.[11] Additionally, ten new medical colleges were constructed, with seven already functional, improving access to tertiary care. Public Health Laboratories and Health Units were also established to strengthen disease surveillance and epidemic response.[11]

Human resource development

Human resource development has been a key focus. To address workforce shortages, NHM recruited 6,486 paramedics and 2,153 medical officers, enhancing the doctor-patient ratio in both urban and rural facilities. Nursing services were bolstered with the creation of 17,006 new positions, bridging critical gaps in patient care. [11] Financial incentives and career advancement options were introduced to encourage medical professionals to serve in remote areas. Training programs focused on emergency care, telemedicine, and maternal-child health services ensured skill enhancement among healthcare providers.[12]

Maternal and Child Health Improvements

Odisha has made remarkable progress in maternal and child health, with institutional births surging from 22.6% in 1998-99 to 92.2% in 2019-21.[13] Programs such as Janani Suraksha Yojana (JSY) and LaQshya have been instrumental in enhancing maternal care, while the establishment of Special Newborn Care Units (SNCUs) and Maternity Waiting Homes has provided critical support to both mothers and infants.[14,15] These initiatives have led to a substantial reduction in maternal and infant mortality rates, with the Maternal Mortality Ratio (MMR) dropping from 424 per 100,000 live births in 1999 to 119 in 2020, underscoring the state's commitment to improving healthcare outcomes.[11]

Communicable and Non-Communicable Disease Controller

The fight against both communicable and non-communicable diseases has seen Odisha making commendable strides. Tuberculosis (TB) control measures have resulted in a 92% notification rate, placing the state second nationally in TB elimination efforts.[16] Malaria cases have drastically declined, earning Odisha global recognition.[17] District-level cancer care and chemotherapy units have been established, along with the provision of free dialysis services for kidney patients.[11]

Expansion of Preventive Healthcare

Preventive healthcare under NHM has also expanded significantly. The National Sickle Cell Disease Mission screened over 24 million people for sickle cell anemia and thalassemia.[18] The Khushi Scheme provided free sanitary napkins to schoolgirls, promoting menstrual hygiene and reducing absenteeism.[19] Mental health services were enhanced through the expansion of District Mental Health Programs (DMHPs), improving access to psychiatric care and essential medication.[20] Nutrition and immunization programs led to reductions in childhood malnutrition and improved vaccination rates for children and pregnant women.

Digital Transformation of Healthcare Services

In parallel, the digital transformation under NHM 2022-23 has revolutionized healthcare management. The implementation of the Odisha e-Hospital Management Information System (OeHMIS) digitized patient records and streamlined hospital operations, while expanded telemedicine services bridged specialist care gaps in remote areas.[21] Telemedicine services were expanded to bridge gaps in specialist care across remote areas. Under the Ayushman Bharat initiative, digital health IDs improved patient tracking and continuity of care, supplemented by mobile apps, teleconsultation platforms, and the e-Sanjeevani system. [22]

Emergency and Critical Care Strengthening

Emergency and critical care services have been reinforced with the establishment of functional ICUs in multiple districts, setting up maternal and child health centers and widening access to free diagnostic services through the NIDAAN scheme. [11] The Biju Swasthya Kalyan Yojana (BSKY) has provided cashless treatment to lakhs of beneficiaries, demonstrating Odisha's commitment to universal health coverage. [23]

Community-Based Health Interventions

Community-based interventions have further enhanced health delivery at the grassroots level. Over 48,000 ASHA workers are actively engaged in outreach, immunization, and maternal health services.[11] Gaon Kalyan Samitis and targeted campaigns against malaria, dengue, and diarrhoea in vulnerable zones contributed to improved health outcomes. BSKY advanced universal health coverage by providing cashless treatment in public and private facilities, benefitting over 7.6 lakh people with services worth ₹1681 crores in 2022–23.[23] The AMLAN Campaign addressed anemia through targeted testing and treatment for women, adolescent girls, and children.[11]

Table 1: Achievements of NHM in Odisha

Area of Focus	Achievements
Infrastructure Development	10 new medical colleges (7 functional), 8 DHHs completed, 51 of 73 MCH complexes built, 6,400+ HWCs operationalized.
Human Resources	6,000+ paramedics & medical officers recruited, training programs for staff capacity building.
Emergency & Critical Care	ICUs established in 10 districts, 7+ lakh free dialysis sessions in 36 centers.
Diagnostic Services	2.7+ crore free tests under NIDAAN, 29,920 MRI scans, 1.5 lakh CT scans, public health labs in all district hospitals.
Telemedicine	e-Sanjeevani teleconsultation expanded, medical colleges as specialist hubs.
Maternal Health	36+ lakh JSY beneficiaries, 2.3+ lakh women benefited under JSSK, 93 Maternity Waiting Homes functional.

Child Health	44 SNCUs, 46 NBSUs operational, expanded immunization, 65+ lakh children screened under RBSK.
Community Engagement	48,000+ ASHA workers active, GKS involved in village-level health promotion.
Disease Control	56+ lakh screened for NCDs (hypertension, diabetes), malaria, dengue, diarrhea awareness campaigns.
Universal Health Coverage	BSKY benefited 7.6+ lakh people, free sanitary napkins under Khushi scheme, AMLAN campaign against anemia.

Comparison Of Health Indicators: Odisha Vs. India (NFHS Data)

The National Family Health Survey (NFHS) provides valuable insights into Odisha's progress in key health indicators compared to national trends. Over successive NFHS rounds, Odisha has demonstrated significant improvements in maternal and child health, surpassing the national average in several areas.

The Infant Mortality Rate (IMR) in Odisha declined from 81 per 1,000 live births (NFHS-2, 1998-99) to 36.3 (NFHS-5, 2019-21), performing better than India's 35.2 in NFHS-5. Similarly, the Under-5 Mortality Rate reduced from 104.4 to 41.1, aligning closely with India's 41.9. [24]

Odisha has made commendable progress in full immunization coverage, increasing from 43.7% in NFHS-2 to 90.5% in NFHS-5, exceeding the national figure of 76.4%. The state has also seen a significant rise in institutional deliveries, jumping from 22.6% to 92.2%, surpassing the national rate of 88.6%. Additionally, maternal healthcare access has improved, with 76.9% of pregnant women receiving antenatal check-ups in the first trimester (NFHS-5), higher than India's 70%.[24]

The Total Fertility Rate (TFR) in Odisha decreased from 2.46 to 1.8, remaining below India's 2.0, indicating successful family planning initiatives. Furthermore, the unmet need for family planning declined from 15.5% to 7.2%, outperforming the national average of 9.4%[24]

However, child malnutrition remains an area of concern. Despite improvement, 29.7% of children under five in Odisha are underweight (NFHS-5), though slightly better than India's 32.1%.[24]

CHALLENGES

Despite significant progress, the National Health Mission (NHM) in Odisha faces several challenges that hinder its full potential. Funding constraints and delays in financial disbursement affect timely implementation, while insufficient budget allocation exacerbates infrastructure deficits and service gaps, particularly in rural and tribal areas. A critical shortage of healthcare professionals further compromises the quality of care, with overburdened public health facilities impacting patient safety. Additionally, regional disparities in healthcare delivery and a limited focus on urban health complicate efforts toward universal healthcare. Weak data monitoring and accountability mechanisms, coupled with inadequate training and low incentives for ASHA workers, further undermine effective program implementation. Addressing these multifaceted challenges requires sustained commitment from policymakers, healthcare providers, and the community.

SWOT ANALYSIS

A SWOT analysis of NHM in Odisha highlights its strengths, weaknesses, opportunities, and threats.

- **Strengths:**
  Odisha has significantly enhanced its healthcare infrastructure through the construction of new District Headquarter Hospitals (DHHs) and the setting up of Health and Wellness Centres (HWCs), ensuring comprehensive primary healthcare services. The expansion of medical education through new medical colleges in various districts aims to increase the availability of trained professionals, thereby improving healthcare delivery. Additionally, digital health initiatives—such as telemedicine services implemented at sub-centers and HWCs—have notably improved access to timely consultations in remote areas. Community-based programs, including the "Khushi Scheme" that provides free sanitary napkins to schoolgirls and the "Ama Clinic" offering specialist services in urban PHCs/CHCs, further underscore the state's commitment to preventive care and community health.

- **Weaknesses:**
  Despite these strengths, NHM in Odisha faces critical challenges. Human resource shortages, particularly in rural and remote regions, continue to hinder service delivery and compromise patient care. Infrastructure disparities persist, with urban centers benefiting more from recent developments compared to rural and tribal areas. Limited financial support, such as inadequate budgeting and delays in releasing funds, continues to hinder the fair distribution and long-term sustainability of healthcare services.

- **Opportunities:**
  There is considerable potential to leverage technology by expanding telemedicine and digital health platforms, which can bridge

gaps in specialist care across underserved regions. Strengthening public-private partnerships presents an opportunity to mobilize additional resources for infrastructure development and enhanced service delivery. Moreover, a focused emphasis on preventive healthcare—through regular screenings, immunization drives, and community outreach—can significantly reduce the overall disease burden and lower associated healthcare costs.

- **Threats:**
  Odisha's diverse terrain poses logistical challenges in reaching remote and hard-to-access areas, which can impede effective healthcare delivery and infrastructure expansion. The dual burden of communicable and non-communicable diseases demands continuous monitoring and resource allocation to prevent outbreaks and manage chronic conditions effectively. Furthermore, concerns regarding the long-term sustainability of health programs persist amid financial constraints and shifting political priorities.

CONCLUSION

The NHM has been instrumental in transforming healthcare in Odisha, particularly for rural communities. The progress made in maternal and child health, disease control, and digital healthcare initiatives is commendable. However, persistent challenges must be addressed to sustain and expand these achievements. A strategic, well-funded, and inclusive approach is necessary to ensure a resilient healthcare system that serves the needs of all citizens. Odisha's commitment to "Sustha Odisha, Sukhi Odisha" (Healthy Odisha, Happy Odisha) reflects the broader vision of a healthier future for its people.

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