

National Rural Health Mission: the current scenario

The National Rural Health Mission (NRHM) claimed the lives of two senior doctors in Uttar Pradesh in the past year (1). Their only fault, it seems, was they had a large budget at their disposal and were trying to clean up the system.

The annual renewal of the Samvida staff for the year 2011-12 was due from April 1, 2011. At the time of renewal, those who wish to be reappointed are expected to pay up to two months' salary as commission. This comes to around Rs 40 lakh if just 100 staff members renew their contracts. Commissions are also taken with every monthly salary cheque. The Rogi Kalyan Kosh, at all primary health centres (PHCs), community health centres (CHCs) and district hospitals, has large budgets which come under the NRHM. So one can appreciate the sums of money involved in the day-to-day running of the department.

The effect of the second murder was that both health ministers in the state were sacked, and the health secretary and chief medical officer (CMO), Lucknow, were relieved of their posts.

The renewal of AYUSH doctors and staff has been put on hold till further orders. This is despite the fact that the NRHM scheme promotes the AYUSH system of medicine as a means to provide affordable health to all, and the state receives grants from the central government for this purpose.

In 2010, the post of district project officer was created to look after the implementation of NRHM. It was later renamed 'chief medical officer (family planning)'. This led to confusion as the Samvida staff came under the CMO (FP) but were posted in the PHC and additional PHCs under the CMO. Disputes arose about their jurisdiction, aggravated by the fact that large budgets were involved. There was a case where the CMO filed a report with the superintendent of police requesting police protection. Finally both the CMO and CMO (FP) were transferred out of the district as the situation was causing great embarrassment to the administration. Now the posts of additional CMO and deputy CMO, NRHM, have been created to supervise the programme.

After *IJME* published an article on the NRHM (2), salaries have been paid monthly by cheque. However, gratification must still be paid to get the cheque. Further, even now, deliveries under Rashtriya Janani Yojna are not above board. The ASHAs

fight amongst themselves to get credit for the deliveries and prefer to go to Auxiliary Nurse Midwife (ANM) centres and not the PHCs, as they make money for the deliveries; they do this even for high risk deliveries, which doctors would refer to a higher centre, in order to get the money which they lose when deliveries are referred. If there is a mishap, the Samvida doctor is made a scapegoat; he/she is the weakest link in the chain being a contract employee. At government hospitals, the pharmacist dispenses less than what is actually prescribed by the doctor on duty. But entries are made in the registers as though the correct drug and correct quantity have been dispensed.

Given these circumstances, one should not be surprised if one gets to hear of more doctors in government service being terrorised and murdered. The powers-that-be realise the potential of the money being generated in the NRHM and other national programmes. They will now demand their pound of flesh.

Under the Rashtriya Swasthya Bima Yojna, families certified as living "below the poverty line" and possessing a smart card are entitled to reimbursement of Rs 30,000 per family per year for medical treatment at approved government and private hospitals. This generates a huge amount of money for insurance company employees, doctors and government revenue staff. False smart cards have been manufactured and used to compensate for various treatments. Today smart card holders approach doctors or their close associates and ask them to create falsified records for operative procedures, and share the reimbursements under the scheme. Some arrests have already been made in this regard.

In such circumstances, to believe that the benefits of any scheme can percolate to those who need it would be asking for the sun.

References

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Editor's note: The name of the author is being withheld on request.