

## **BA II(POL CC 409): PUBLIC POLICY AND ADMINISTRATION IN INDIA**

### **Unit-5**

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### **FOOD:RIGHT TO FOOD SECURITY**

#### **INTRODUCTION-**

The issue of 'food security' encompasses the twin aspects of adequate availability of foodgrains and its effective distribution to ensure its access to all. The availability needs to be ensured as 'entitlement' i.e. creation of conditions under which the really needy can access them with ease. This means that if the purchasing power of the poor is not adequate enough to buy the food, they should be enabled to either buy them at a subsidised price or their purchasing power should be suitably enhanced. While the former is achieved by a distributional policy, the latter is achieved by the implementation of specific programmes. The task of distribution (i.e. taking the food to the door step of every household, particularly the household living below the poverty line i.e. BPL families) is a gigantic task which is carried out in India by the public distribution system (PDS). The PDS is implemented through the operation of fair price shops (FPS) established all over the country. The task of such a mammoth distribution is preceded by the 'procurement of foodgrains' from the farmers under a policy of price support called the 'minimum support price' (MSP). By implementing such policies (i.e. procuring and distributing foodgrains through FPS, running food-for-work programmes, etc.) over the last six decades, the government has succeeded in according a measure of 'food security' to millions of poor people. The impact of this is seen in the declining poverty ratios over time. The accuracy of estimates of people living below the poverty line in India, estimated by different methodological frameworks, is subject to debate. However, as per a UN report, in the post-reform years of 1990s alone, the proportion of poor below the poverty line has declined from 51.3 percent in 1990 to around 26 percent in 2010. Notwithstanding this degree of success, there are three serious issues which cast a deep shadow on the efficiency of our food security policy. These are: (i) the 'buffer stock' is getting affected due to inadequate storage space, (ii) the targeting error in the PDS system has excluded many real poor from the PDS benefit (and many non-poor included), and most serious of all, (iii) the surplus subsidised foodgrains are exported to other countries with a huge further burden on the exchequer as subsidies. It is, thus, ironic that while millions continue to face acute poverty [with their children (of below 5 years) suffering from severe malnutrition with the consequent high rates of infant mortality; which in 2009 was estimated by UNICEF as 66 per 1000 live births (having declined from 118 in 1990)], the buffer stock of foodgrains is exported where they are used by animal feed manufacturers in countries like Malaysia, Indonesia, Oman, Iraq, Philippines, etc. It is in the face of this tragic truth that the term 'food insecurity' is used to describe a condition in which severe malnutrition persists among children in a population where there is no scarcity of food supply

*Food Self Sufficiency*-A country is said to have achieved 'self sufficiency in food *production*' when its food production at the aggregate level matches with the food requirement of all its people. In other words, it refers to a state in which a country is in a position to feed its people from its own domestic production without having to depend on import of foodgrains from other countries.

*Net Production*-The entire foodgrains produced in a country is not available for human consumption. A part of it would be used as seeds for its subsequent ploughing while another part of it may be lost due to improper storage. A part of foodgrains output is also used as animal feed. The remaining portion, which is available for human consumption, is termed as 'net production'.

*Public Distribution System (PDS)*-In a free-market economy characterised by inequalities in income among households, there are many poor households who are not in a position to buy adequate food at the

prevailing market price. Such households are, therefore, food insecure. A mechanism by which food at a cheaper rate is made available to such poor households is the 'public distribution system' (PDS).

Buffer stock-Buffer stock is an important pre-requisite for providing food security. It is well known that consumption of food takes place throughout the year while output of foodgrain comes at specific periods in a year. To bridge the inter-seasonal differences in production and consumption, there is a need to maintain a stock of foodgrains called the 'buffer stock'.

Minimum Support Price-To insulate cultivators from price risk, the government announces the purchase price for a crop at the beginning of each agricultural season. This is called as the minimum support price or the MSP.

FOODGRAINS SCENARIO IN INDIA -In order to understand the concept of food security vis-à-vis the level of its attainment, it is important to look at some empirical facts. In this section, we take a look at the trends, over 1951-2010, in: (i) total area under agriculture, its production and productivity; and (ii) per-capita availability/consumption of foodgrains. While the area/ production/productivity throws light on the overall availability of foodgrains, the per- capita availability/consumption helps us to relate food security to the distribution/policy dimensions. Further, for agrarian economies with abundant population, '*for the availability of foodgrains to increase, it is important that the growth rate of food production is greater than the growth rate of population*'.

#### POLICIES AND PROGRAMMES FOR FOOD SECURITY-

- Efforts Under PDS-Of all the food safety operations in India, the most far reaching, in terms of coverage as well as public expenditure on subsidy, is the PDS. The main objectives of the PDS are: (i) provide essential consumer goods at affordable price to the poor; (ii) maintain stability in open market prices of foodgrains; (iii) procure foodgrains from surplus regions and distribute it in deficit regions; and (iv) protect the domestic producers of foodgrains from unfair practices of traders by procuring foodgrains directly from farmers at remunerative prices. Both the central and state governments participate in the procurement and distribution of foodgrains. The Central Government has the responsibility for procurement, storage, transportation and bulk allocation of essential commodities (viz. wheat, rice, sugar, imported edible oil and kerosene) to the states. The state governments have the responsibility of its distribution to the consumers through a network of fair price shops (FPSs) spread over the length and breadth of the country. The commodities are made available by the centre to the state governments at a price called the central issue price (CIP).
- Food Based Welfare Schemes-Many specific programmes or schemes involving the distribution of foodgrains at concessional prices to the poor households have been launched by the government. Some of the important ones are: (i) the Antyodaya Anna Yojana (AAY) launched in 2000; (ii) the Annapurna Scheme launched in 2001; and (iii) the Sampoorna Gramin Rozgar Yojna (SGRY) launched in 2001. The AAY aims at providing subsidized foodgrains (at the rates of Rs. 2 per kg. for wheat and Rs. 3 per kg. for rice) to 1 crore poorest of the poor families (or around 5 crore persons) identified as unable to get two square meals a day on sustained basis through out the year. The identification of the families is done by gram panchayats and gram sabhas. The Annapurna Scheme targets poor senior citizens above the age of 65 years (and who are not covered by the National Old Age Pension Scheme) to provide 10 kgs. of foodgrains per person per month free of cost. The SGRY envisages the undertaking of employment based programmes in which foodgrains (supplied free of cost by the centre to the states) are used to give payment for work done i.e. the compensation for work done is paid in kind through foodgrains. Another important welfare scheme is the 'midday meal programme (MMP)' in government schools in which cooked food is provided to children of classes I-VIII. The programme aims at enhancing the energy and protein level of poor children besides providing an incentive to attend schools. Additional nutrients like iron, folic acid and vitamin-A are also provided to the poor children as supplements in a larger scheme of convergence viz. the 'national rural health mission' (NRHM).

- National Food Security Mission (NFSM)-The NFSM was launched in 2007 as a crop development scheme. The mission aims at achieving the enhanced production of rice, wheat and pulses by 10, 8 and 2 million tons respectively. The time target for this achievement was the end of XI<sup>th</sup> plan (i.e.2012).
- National Food Security (NFS) Bill-Apart from reiterating the provision of foodgrains to priority households, the NFS Bill proposes to reform the targeted-PDS by: (i) doorstep delivery of foodgrains; and (ii) application of ICT (i.e. information and communication technology). The latter is further leveraged with 'aadhaar', the scheme for allotment of unique identification number, for efficient identification/targeting of beneficiaries.

#### IMPACT OF GOVERNMENT POLICY-

- Consequences of Excess Stock-it has deprived consumers of more free access to grain. Had the foodgrains not been procured, to that extent a larger quantity would have been available in the market. Second, it is not the case that this additional procurement was in the interest of expanding the buffer stock.
- Unhealthy/Unsustainable Production Practices-High procurement prices of rice encouraged farmers to produce rice, a highly water-intensive crop. As a result of intensive use of ground water for irrigation, water table in these regions has depleted. Farmers now have to bore much deeper for water. This has drastically increased irrigation costs.
- Decentralisation of PDS: In recent past, instead of providing foodgrains, the centre is providing financial assistance to the state governments to procure and distribute foodgrains to BPL families at subsidized rates.
- Exports of Foodgrains- With the increase in production, India has become a net exporter of foodgrains. This is happening even when a large part of the country's population goes hungry.
- Impact of PDS on Poverty: The gains in terms of income transfer from PDS to the poor is low as PDS is not effective in states with high incidence of poverty. Consequently, wide inter-state differences in performance of PDS and reduction in poverty levels have resulted.

FUTURE STRATEGY -India has made great strides towards increasing the production of foodgrains since the mid-sixties. Presently, India ranks high in the production of rice, wheat, fruits and vegetables, etc. However, technological break-through achieved in 1960s has outlived its effective duration. The demand for foodgrains is, inter-alia, increasing due to increase in income of people in general. Further, as we noted above, the government has initiated steps to introduce the food security Act which would impose larger burden on our domestic production compelling us to import foodgrains from other countries. This, therefore, requires appropriate strategies to be adopted. The poor being ill-equipped to withstand the impact of food inflation, there is a need to institute safety nets for their welfare. The Antyodaya Anna Yojana should be expanded to cover more poor families with enhanced entitlements. Unlike other schemes such as mid-day meals which are marred by logistic problems, the AAY scheme can be better administered. It is projected that the demand for cereals in 2020 range between 224-296 million tonnes. On the other hand, estimates of availability of cereals from domestic production range between 222 to 268 million tonnes. To meet the gap, there is a need for focusing on integrated approaches/mechanisms to achieve a second green revolution.

### EDUCATION:RIGHT TO EDUCATION

The Act is completely titled “**the Right of Children to Free and Compulsory Education Act**”. It was passed by the Parliament in August 2009. When the Act came into force in 2010, India became one among 135 countries where education is a fundamental right of every child.

- The 86th Constitutional Amendment (2002) inserted Article 21A in the Indian Constitution which states:
  - “The State shall provide **free and compulsory education to all children of 6 to 14 years** in such manner as the State, may by law determine.”

- As per this, the right to education was made a fundamental right and removed from the list of Directive Principles of State Policy.
- The RTE is the consequential legislation envisaged under the 86th Amendment.
- The article incorporates the word “free” in its title. What it means is that no child (other than those admitted by his/her parents in a school not supported by the government) is liable to pay any kind of fee or charges or expenses which may prevent him or her from pursuing and completing elementary education.
- This Act makes it obligatory on the part of the government to ensure admission, attendance and completion of elementary education by all children falling in the age bracket six to fourteen years.
- Essentially, this Act ensures free elementary education to all children in the economically weaker sections of society.

The provisions of the RTE Act are briefly described below. The Act provides for:

- The right of free and compulsory education to children until they complete their elementary education in a school in the neighbourhood.
- The Act makes it clear that ‘compulsory education’ implies that it is an obligation on the part of the government to ensure the admission, attendance and completion of elementary education of children between the ages of six and fourteen. The word ‘free’ indicates that no charge is payable by the child which may prevent him/her from completing such education.
- The Act provides for the admission of a non-admitted child to a class of his/her appropriate age.
- It mentions the duties of the respective governments, the local authorities and parents in ensuring the education of a child. It also specifies the sharing of the financial burden between the central and the state governments.
- It specifies standards and norms for Pupil Teacher Ratios (PTR), infrastructure and buildings, working days of the school and for the teachers.
- It also says there should be no urban-rural imbalance in teacher postings. The Act also provides for the prohibition of the employment of teachers for non-educational work, other than census, elections and disaster relief work.
- The Act provides that the teachers appointed should be appropriately trained and qualified.
- The Act prohibits:
  - Mental harassment and physical punishment.
  - Screening procedures for the admission of children.
  - Capitation fees.
  - Private tuition by the teachers.
  - Running schools with no recognition.
- The Act envisages that the curriculum should be developed in coherence with the values enshrined in the Indian Constitution, and that which would take care of the all-round development of the child. The curriculum should build on the knowledge of the child, on his/her potentiality and talents, help make the child free of trauma, fear and anxiety via a system that is both child-centric and child-friendly.

Significance of RTE-With the passing of the Right to Education Act, India has moved to a rights-based approach towards implementing education for all. This Act casts a legal obligation on the state and central governments to execute the fundamental rights of a child (as per Article 21 A of the Constitution).

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- The Act lays down specific standards for the student-teacher ratio, which is a very important concept in providing quality education.

- It also talks about providing separate toilet facilities for girls and boys, having adequate standards for classroom conditions, drinking water facilities, etc.
  - The stress on avoiding the urban-rural imbalance in teachers' posting is important as there is a big gap in the quality and numbers regarding education in the villages compared to the urban areas in the country.
  - The Act provides for zero tolerance against the harassment and discrimination of children. The prohibition of screening procedures for admission ensures that there would be no discrimination of children on the basis of caste, religion, gender, etc.
  - **The Act also mandates that no kid is detained until class 8.** It introduced the Continuous Comprehensive Evaluation (CCE) system in 2009 to have grade-appropriate learning outcomes in schools.
  - The Act also provides for the formation of a School Management Committee (SMC) in every school in order to promote participatory democracy and governance in all elementary schools. These committees have the authority to monitor the school's functioning and prepare developmental plans for it.
  - The Act is justiciable and has a Grievance Redressal mechanism which permits people to take action when the provisions of the Act are not complied with.
- **The RTE Act mandates for all private schools to reserve 25 per cent of their seats for children from socially disadvantaged and economically backward sections.** This move is intended to boost social inclusion and pave the way for a more just and equal country.
    - This provision is included in Section 12(1)(c) of the RTE Act. All schools (private, unaided, aided or special category) must reserve 25% of their seats at the entry-level for students from the Economically Weaker Sections (EWS) and disadvantaged groups.
    - When the rough version of the Act was drafted in 2005, there was a lot of outcry in the country against this large percentage of seats being reserved for the underprivileged. However, the framers of the draft stood their ground and were able to justify the 25% reservation in private schools.
    - This provision is a far-reaching move and perhaps the most important step in so far as **inclusive education** is concerned.
    - This provision seeks to achieve social integration.
    - The loss incurred by the schools as a result of this would be reimbursed by the central government.
  - The Act has increased enrolment in the upper primary level (Class 6-8) between 2009 and 2016 by 19.4%.
  - In rural areas, in 2016, only 3.3% of children in the 6 – 14 years bracket were out of school.

**Criticism of RTE Act**-Even though the RTE Act is a step in the right direction towards the achievement of making education truly free and compulsory in India, it has met with several criticisms. Some of the criticisms are given below:

- The Act was drafted hastily without much thought or consultation being given to the quality of education imparted.
- Children below 6 years are not covered under the Act.
- Many of the schemes under the Act have been compared to the previous schemes on education such as the Sarva Shiksha Abhiyan, and have been plagued with corruption charges and inefficiency.
- At the time of admissions, many documents such as birth certificate, BPL certificate, etc. are required. This move seems to have left out orphans from being beneficiaries of the Act.
- There have been implementational hurdles in the 25% reservation of seats for EWS and others in private schools. Some of the challenges in this regard are discriminatory behaviour towards parents and difficulties experienced by students to fit in with a different socio-cultural milieu.

- Regarding the 'no detention' policy till class 8, an amendment to the Act in 2019, introduced regular annual exams in classes 5 and 8.
  - In case a student fails in the annual exam, he/she is given extra training and made to appear for a re-exam. If this re-exam is not passed, the student can be detained in the class.
  - This amendment was made after many states complained that without regular exams, the learning levels of children could not be evaluated effectively.
  - The states which were against this amendment were six states with higher learning outcomes due to their effective implementation of the CCE system as mandated in the Act. (The six states were Andhra Pradesh, Karnataka, Kerala, Goa, Telangana and Maharashtra.)
- It has been found that many states find it difficult to move to the CCE system of assessment. This is chiefly due to a lack of teachers' training and orientation.
- Another criticism levelled against the Act is that instead of increasing the standards and outcomes of the public education system in India, it passes the buck to private schools to some respect.

Making the right to education a fundamental right took more than 6 decades after independence. Now, the government and all stakeholders should focus on the quality of education, and gradually move towards having a single educational system and platform across the country for all sections of society in order to foster equality, inclusion, and unity.

### **EMPLOYMENT-MAHATMA GANDHI NATIONAL RURAL EMPLOYMENT GUARANTEE ACT(MNREGA)**

The Mahatma Gandhi National Rural Employment Guarantee Act, earlier known as the National Rural Employment Guarantee Act was passed on 7th September 2005 to augment employment generation and social security in India. It covers all districts of India except the ones with 100% urban population.

#### **MGNREGA History:**

In 1991, the P.V Narashima Rao government proposed a pilot scheme for generating employment in rural areas with the following goals:

- Employment Generation for agricultural labour during the lean season.
- Infrastructure Development
- Enhanced Food Security
- This scheme was called the Employment Assurance Scheme which later evolved into the MGNREGA after the merger with the Food for Work Programme in the early 2000s.

#### **Objectives of MGNREGA:**

The Mahatma Gandhi National Rural Employment Guarantee Act (MGNREGA) has the following objectives:

- Provide 100 days of guaranteed wage employment to rural unskilled labour
- Increase economic security
- Decrease migration of labour from rural to urban areas
- MGNREGA differentiates itself from earlier welfare schemes by taking a grassroots-driven approach to employment generation. The programmes under the act are demand driven and provide legal provisions for appeal in case, work is not provided or payments are delayed. The scheme is funded by the central government which bears the full cost of unskilled labour and 75% of the cost of material for works undertaken under this law. The central and state governments audit the works undertaken under this act through annual reports prepared by CEGC (Central

Employment Guarantee Council) and the SEGC (State Employment Guarantee Councils). These reports have to be presented by the incumbent government in the legislature.

A few salient features of the scheme are:

- It gives a significant amount of control to the Gram Panchayats for managing public works, strengthening Panchayati Raj Institutions. Gram Sabhas are free to accept or reject recommendations from Intermediate and District Panchayats.
- It incorporates accountability in its operational guidelines and ensures compliance and transparency at all levels.
- Ever since the scheme was implemented, the number of jobs has increased by 240% in the past 10 years. The scheme has been successful in enhancing economic empowerment in rural India and helping overcome the exploitation of labour. The scheme has also diminished wage volatility and the gender pay gap in labour.

## **NATIONAL HEALTH MISSION**

### **1. NATIONAL RURAL HEALTH MISSION (NRHM)**

The National Rural Health Mission (NRHM) was launched by the Prime Minister on 12th April 2005, to provide accessible, affordable and quality health care to the rural population, especially the vulnerable groups. A special focus has been given to the Empowered Action Group (EAG) States. The States of North-East, J&K and Himachal Pradesh are also considered. This is to ensure that the necessary attention is delivered wherever needed.

#### **Objectives and Components of NRHM**

The essence of NRHM is a health delivery system that functions independently, is community-owned and decentralized. The mission also aims to deliver a constant support to those who contribute to the social determinants of health. Basic objectives to implement NRHM are:

- Reduction in infant mortality rate and maternal mortality rate
- Ensuring population stabilization
- Prevention and control of communicable and non-communicable diseases
- Upgrading AYUSH(Ayurvedic Yoga Unani Siddh and Homoeopath) for promotion of a healthy lifestyle.

And the major initiatives under NRHM are as follows.

#### **ASHA:**

The Accredited Social Health Activists aka ASHAs are the volunteers that engage in this mission that will establish a link between the health system and the targeted community. More than 8.84 lakh of these community health volunteers have contributed to this mission.

ASHA is the first port of call for any health-related demands of deprived sections of the population, especially women and children, who find it difficult to access health services in rural areas.

This programme is expanding across States and has particularly been successful in bringing people back to the Public Health System. It has also increased the utilization of outpatient services, diagnostic facilities, institutional deliveries and inpatient care.

#### **Rogi Kalyan Samiti (Patient Welfare Committee)/Hospital Management Society:**

It is a registered society that acts as a group of trustees to manage the affairs of the hospitals.

A united fund looks after the funding and other financial assistance for these communities that are involved in patient welfare activities. It has given new confidence to auxiliary nurse midwives (ANMs) in the field who are better equipped now with Blood Pressure measuring equipment, Stethoscope, weighing machine, etc. They can actually undertake proper antenatal care and other health care services. Another important tool of community empowerment is the Village Health Sanitation and Nutrition Committee (VHSNC) which works at the grassroots levels.

### Health Care Service Delivery

Health Care Service Delivery requires intensive human resource inputs. As can be seen from various surveys, there is an enormous shortage of human resources in the public health care sector in the country. NRHM has attempted to fill the gaps in human resources by providing nearly 1.7 lakh people for health services to States including 8,871 Doctors, 2025 Specialists, 76,643 ANMs, 41,609 Staff Nurses, etc. on contractual basis. Many unserved areas have been covered through Mobile Medical Units (MMU). So far 2024 MMU are operational in 459 districts across the country.

The government also provides free ambulance services in every nook and corner of the country connected with a toll-free number and available within 30 minutes of the call. Over 12,000 basic and emergency patient transport vehicles have been provided under NRHM.

Janani Shishu Suraksha Karyakram. In order to promote universal healthcare, the government started the Janani Shishu Suraksha Karyakram (JSSK) initiative which provides free to & fro transport, free drugs, free diagnostics, free blood, free diet to pregnant women who come for delivery in public health institutions and sick new-borns.

### Related questions:

How many states have initiated Janani Suraksha Yojana?

The scheme focuses on the poor pregnant women with a special dispensation for states that have low institutional delivery rates, namely, Uttar Pradesh, Uttarakhand, Bihar, Jharkhand, Madhya Pradesh, Chhattisgarh, Assam, Rajasthan, Orissa, and Jammu and Kashmir. While these states have been named Low Performing States (LPS), the remaining states have been named High Performing States (HPS).

The NRHM works under which ministry of the government?

Ministry of Health and Family Welfare oversees the functionality of the National Health Mission which includes the National Rural Health Mission (NRHM) and the National Urban Health Mission (NUHM).

## **2.NATIONAL URBAN HEALTH MISSION (NUHM)**

The National Urban Health Mission (NUHM) as a sub-mission of National Health Mission (NHM) will meet the health needs of the urban population with a focus on urban poor, by making available to them essential primary health care services and reducing out of pocket expenses for treatment.

### Objectives and Components of NUHM

As a part of the overarching National Health Mission, the National Urban Health Mission (NUHM) aims to ensure the following:

- Availability of resources for addressing the health problems in urban areas, especially among the urban poor.
- Develop a health care system based on the specific health needs of the city. This system will take care of vulnerable and poor sections of the urban population and meet the diverse medical and health needs.
- Partnership with the community for more proactive involvement in planning, implementation and monitoring of health activities.
- Growth in urban population is directly proportional to their health risks. These challenges need to be fixed by a mechanism involving different institutions and management systems.
- Framework for partnership with NGOs, for profit and not for profit health service providers and other stakeholders.
- NUHM would cover all cities/towns with a population of more than 50000. Towns below 50000 populations will be covered under the National Rural Health Mission (NRHM).

### Components of NUHM

#### 1.Population Policy



The National Population Policy (2000) not only focused on the unmet needs of contraception but also stressed the need for integrated service delivery for basic reproductive and child health care. Accordingly, the long term goals set under this policy envisaged a reduction in Total Fertility Rate (TFR) to replacement levels, Infant Mortality Rate of less than 30/1000 live births and Maternal Mortality Ratio to less than 100/100,000 live births by 2010

## 2. Jansankhya Sthirata Kosh (JSK)

The National Population Stabilisation Fund was constituted under the National Commission on Population in July 2000. Subsequently, it was transferred to the Department of Health and Family Welfare in April 2002. It was renamed and reconstituted as Jansankhya Sthirata Kosh (JSK) under the Societies Registration Act (1860) on June 2003.

## 3. Geographical Information System (GIS) Mapping

As part of this initiative, JSK mapped 450 districts in India through a unique amalgamation of GIS maps and Census data. The mapping gives a picture of each district, its subdivisions and the population of every village along with the distance to the health facility. The maps highlight inequities in coverage down to the village level to enable resources to be targeted where they are needed the most.

## Funding Pattern of NUHM

The Funding necessary for this scheme is split between the Central government and the State government. The centre-state funding is split in 75:25 ratio for all the States except North-Eastern states including Sikkim and other special category states like Himachal Pradesh, Uttarakhand and J&K. For these states, the centre-state funding will be split in 90:10 ratio. The Programme Implementation Plans (PIPs) sent by the states are appraised and approved by the Ministry.

## Related questions:

Who all are covered under the NUHM Scheme and what is the cover?

National Urban Health Mission would cover all State capitals, district headquarters and cities/towns with a population of more than 50000. Slum-dwellers and other marginalized groups like rickshaw pullers, street vendors, railway and bus station coolies, homeless people, street children, construction site workers are the set of people that are primarily focused under this scheme.

What is UPHC?

The Urban Primary Health Center is envisaged as the nodal point for the delivery of health care services under the National Urban Health Mission. While the basic concept remains the same, the services and services delivery mechanism of UPHCs is modified to address the unique health and livelihood challenges faced by the urban population.

What is Mahila Arogya Samiti of the NUHM?

Mahila Arogya Samiti (MAS) is a scheme overlooked by the NUHM for the group of people belonging to the slum level of the urban population. The objective of MAS is to help improve the health needs and develop them further by establishing a community framework for planning, execution, monitoring and evaluation of the activities that help the targeted population. MAS will also overlook the activities or programs related to water, health, nutrition and sanitation in the urban areas of the state.