

## 7.2. Medical and Public Health

"Health is Wealth". Realizing this adage the State has extended concerted efforts to the health sector by giving importance both in the preventive and curative health care services. Several preventive measures have been taken for the welfare of poor people. The curative services have been strengthened by providing modern and sophisticated equipments to the Government hospitals. For producing skilled human resources, a number of medical, para medical institutions including Ayurveda, Yoga and Naturopathy, Unani, Siddha and Homoeopathy (AYUSH) have been established.

The important objectives of the Medical and Public Health sector are as follows:

- To provide effective tertiary care to all sections of the public by making available the modern medical techniques and technologies in Government teaching hospitals
- To provide research relevant to human development and quality of life
- To increase the access and utilization of health services, particularly among the unreached and underserved population
- To design and implement the effective interventions in the area of Maternal and Child Health to reduce IMR and MMR to the expected levels
- To prevent and control communicable diseases and non-communicable diseases with special focus on newly emerging vector borne diseases and life style diseases
- To create awareness and to ensure timely availability of accident and trauma care services to reduce morbidity and mortality
- To upgrade the quality of educational standard in the Indian Systems of Medicine and Homoeopathy colleges in the State
- To draw up schemes for promotion, cultivation and re-generation of medicinal plants used in these systems
- To popularize the benefits of these systems among the public, both within our country and abroad

As a result of implementation of various programmes in the health field over the past years the state has registered significant progress in major health indicators such as life expectancy, child mortality, Infant Mortality Rate and

Maternal Mortality Rate. The demographic indicators, 2007 estimated for All India and Tamil Nadu are as follows:

Indicators	All India	Tamil Nadu
Crude Birth rate (per 1000 population)	23.1	15.8
Crude Death rate (per 1000 population)	7.4	7.2
Infant Mortality Rate (per 1000 live births)	55	35
Maternal Mortality Rate (per 1000 live births) as in 2004	3.01	0.9
Total Fertility Rate	2.8	1.7
Life Expectancy at Birth (2001-2006) (Years)		
Male	63	67
Female	64	70
Couple Protection Rate (%)	49	49
Natural Growth Rate (%)	1.5	0.9
SRS 2007, 2008 and Department of Family Welfare		

## **Health Infrastructure**

Towards the objective of providing cost effective, efficient and quality health care services to the people, the health physical infrastructure and personnel available in the State are outlined below:

### ***Directorate of Medical Education***

At present 45 institutions provide medical educational services under the overall control of the Directorate of Medical Education. These institutions have 4686 doctors, 5147 nurses and 5734 para medical staff. The total bed strength of these hospitals is 23336, with an average of 22105 inpatients and 77019 outpatients getting treatment per day. Besides the Government medical and para medical institutions, there has been a growth of self-financing institutions offering courses in medicine, dentistry, pharmacy, physiotherapy, nursing, and occupational therapy.

Government have announced to start 3 new Government Medical Colleges at Villupuram, Dhramapuri and Thiruvavur in 2007-08. Preliminary works have been initiated and the necessary lands have been identified. In addition, Government have now been announced to start 2 more new medical colleges one at Sivagangai and the other at Perambalur. Government of India have proposed to upgrade the Government Mohan Kumaramangalam Medical College hospital, Salem to the level of all India Institute of Medical Sciences, New Delhi under

Pradhan Manthri Swathaya Suraksha Yojana Programme. The other programmes are infrastructure improvement of teaching hospitals, strengthening the medical colleges, purchase of modern and high-tech equipments for the hospitals, construction of hostels for students etc.,

### ***Directorate of Medical and Rural Health Services***

The services are rendered through a grid of 26 District Headquarter Hospitals, 155 Taluk Headquarter Hospitals, 80 Non-Taluk Hospitals, 11 Government Dispensaries and 11 mobile units, 7 women and children hospitals, 2 TB hospitals, 2 TB clinics and 7 leprosy hospitals under the administrative control of the Director of Medical and Rural Health Services. Totally there are 301 Medical Institutions functioning with the bed strength of 20400. The Directorate is implementing various medical services programmes such as TB control, mental health, HIV, blood bank besides implementation of various schemes like Human Organ Transplantation Act and Private Clinical Establishment Regulation Act, Pre-Natal Diagnostic Techniques Act, recognition of private hospitals etc. The non-taluk and taluk hospitals are the first referral units in the chain of medical services in the State and the 26 District Headquarter Hospitals are the second referral units, which have been strengthened in a phased manner under Tamil Nadu Health Systems Project (TNHSP).

### **Tamil Nadu State Illness Assistance Society**

The Government of Tamil Nadu have constituted the Tamil Nadu State Illness Assistance Society with a revolving fund of Rs.15 crore as an initial corpus fund. The society provides financial assistance to the poor patients below poverty line for undergoing life saving surgical treatment in specified categories like open heart surgery, kidney transplantation, skull opening, hip replacement, spinal cord surgeries etc. in accredited private hospitals through the District collectors as was done under Chief Minister's Public Relief Fund Scheme. So far, 17 reputed hospitals have been selected and 200 children have been provided assistance for heart surgery. For the year 2009-10, an amount of Rs.100.00 lakh is proposed for this scheme.

## **Indian Medicine and Homoeopathy**

In Tamil Nadu, special importance has been given to the Siddha system, which is an indigenous medicine system of our State which is intertwined with Tamil culture. Both the State and Central Government have taken many efforts to popularize these systems using a multi-pronged approach consisting of education, research and documentation of old documents as well as making these systems of medicine accessible to the people at the lowest level. The effort of the Government has also focused on production, standardization, and quality control of herbs and drugs, so as to improve the accessibility of these systems of medicine. The Government have started Medical colleges for the Indian System of Medicine (ISM). Private colleges are also allowed so long as they conform to the required standards.

For the year 2009-10, the activities proposed are improvement of hospitals, colleges, opening of ISM wings, setting up of Regional pharmacies imparting re-orientation training, translation of manuscripts, purchase of books for the libraries, printing and publishing of new books etc.

## **Directorate of Public Health and Preventive Medicine**

There are 1422 Primary Health Centres and 8706 Health Sub-Centres functioning in the state. Totally, 4773 beds and 2893 doctors are on roll of DPH to provide primary health care to the community and this Directorate is responsible for implementing all the National and State Health Programmes for Immunization, School health, Maternal and Child Health Care, Food Adulteration and Health education. It is also concerned with the prevention of diseases particularly vector borne diseases like malaria, filaria and Japanese encephalitis. The other programmes relate to control of diseases like small pox, cholera, typhoid, acute gastro-enteritis, leptospirosis, dengue, chikungunya and infective hepatitis. This major flagship scheme viz., Dr. Muthulakhsmi Reddy Maternity Cash Benefit Scheme is mainly for improving the nutrition and health status of pregnant women is bound to have a major impact on the rapid reduction of MMR and IMR. Rs.1000/- p.m. for a total period of 6 months covering 3 months in

ante-natal period and 3 months post-natal period. An amount of Rs.270 crore is proposed (includes SCSP) for year 2009-10 and 4500 pregnant women will be benefited under this scheme.

With the aim of covering 100% achievement of infants and pregnant women universal immunization programme was launched during 1985. Annually around 12.5 lakh pregnant women and 11.5 lakh infants are being benefited by this scheme. Due to the successful implementation of the immunization programme, diphtheria, pertussis has almost controlled.

The Varumun Kappom Thittam is an innovative and popular scheme to provide comprehensive health check up, treatment and health education to the rural and urban people. The health check up camps are conducted at the Health Sub Centres level, every week covering 5000 populations. 7877 Varumun Kappom Thittam camps have been conducted as on 26.09.2008. Totally, 80.04 lakh people were benefited under Varumun Kappom Thittam. For the year 2009-10 an amount of Rs. 678.82 lakh is proposed for this scheme.

### ***Directorate of Drugs Control***

The Directorate of Drugs control is the authority for grant and renewal of licenses for manufacture and sale of medicines and cosmetics. The Drug Testing Laboratory attached to the Department undertakes testing of samples drawn by Drug Inspectors from retail and wholesale units, manufacturing units and hospitals.

### ***Tamil Nadu State Health Transport Department***

The Tamil Nadu State Health Transport Department is attending to the maintenance and servicing of motor vehicles attached to the various Directorates relating to health.

### **Family Welfare**

The Family Welfare Programme is implemented through 1422 Primary Health Centres including 69 Community Health Centres, 8706 Health Sub-Centres, 110 post- partum centres, 382 rural family welfare bureau, 193 urban

health posts, 104 urban family welfare centres, 1706 Approved Nursing Homes and 27 Voluntary Organisations (N.G.Os).

Out of the total sterilisations in the State, 57.3% is performed in Government Institutions, 6.5% in Voluntary Organisations, 29.3% in Approved Nursing Homes, 4.2% in the Local Bodies and the remaining in unapproved Nursing Homes.

The National Leprosy control programme has been in operation since 1954 with the main thrust on detection and sustained regular treatment of all leprosy patients. There are 102 leprosy control units and 1 leprosy hospital functioning in the State. In 2004, the prevalence rate was 1.4 per 10,000 population. Now, Tamil Nadu is marching towards a caseload of less than one (0.6 per 10000 Population).

Tuberculosis is a serious public health problem in the country. India accounts for nearly 1/2 of the global TB burden. To control TB, the National Tuberculosis Control Programme (NTCP) was launched in 1962. The Revised National TB Control Programme (RNTCP) using Directly Observed Treatment Short Course (DOTS) strategy was launched on 26<sup>th</sup> March, 1997 and is being implemented in a phased manner. 135 cases were detected during 2007 and the cure rate was 82%. The Government of India under external assistance component meets the expenditure of drugs, logistics and the establishment expenditure of contractual staff including IEC activities. During 2007-08 nearly 4 lakh persons were examined and diagnosed about 64051 TB patients. Of them 24923 persons had identified as new sputum positive patients and 83% persons have been cured.

The National Programme for Control of Blindness (NPCB) was launched in 1976. The main objective of the programme is to reduce the prevalence of blindness to 0.8 by 2007. During 2007-08, nearly 2955 cataract operations were conducted in 30 districts.

## **National Rural Health Mission (NRHM) - State Health Society (SHS)**

The National Rural Health Mission (NRHM) has been launched in Tamil Nadu with the view to bring architectural correction of the health system to enable it to effectively handle increased allocations and promote policies that strengthen public health management and service delivery. It aims to improve the health status of the people, especially those who live in the villages. The vision is to provide universal access to equitable, affordable and quality health care services, which is accountable and responsive to the needs of the people.

The major focus of NRHM will be on reproductive and child health, coupled with family welfare, the National Programme for Control of Blindness and Revised National Tuberculosis Control Programme will also be implemented through the State Health Society as part of NRHM. There will also be a thrust towards control of vector borne diseases, especially newly emerging ones such as dengue and chikungunya which have affected the state in the past few years. The Integrated Disease Surveillance Project will also be continued under the NRHM budget. An amount of Rs.50.00 crore is proposed for the implementation of the NRHM programmes.

### **Tamil Nadu Health Systems Project**

The project aims to improve the effectiveness of the secondary Health care system in Tamil Nadu. The original outlay of Rs. 597.15 crore was revised to Rs. 482.49 crore due to diversion of funds for Tsunami relief activities in Tamil Nadu during 2005. In order to reform the existing health system and also to upgrade the public hospitals by providing the necessary inputs, the Health System Development Project was launched encompassing activities such as civil works, provision of equipments, Information, Education and Communication (IEC), training, health management information system, infrastructure development, provision of specialised medical personnel, NGO supported activities, tribal health, health care waste management, public private partnership and so on. The project has been implemented in 3 phases. The project had undertaken improvements to hospitals in 5 districts viz., Dharmapuri, Krishnagiri, Theni,

Pudukottai and Kancheepuram districts during phase I - 2005-2006. All the hospitals in the remaining districts have been taken up for improvement with provision of buildings, equipments, infrastructure and staff.

### **Tamil Nadu AIDS Control Society (TANSACS)**

Tamil Nadu has the unique distinction of bringing a consistent decline in the HIV prevalence in the State. This has been made possible due to concerted efforts of all the stakeholders in the State. The civil society, non Governmental organizations and several partners have strengthened the hands of the Government to ensure that the epidemic is controlled effectively. The key activities of TANSACS include awareness programmes and social mobilization activities, targeted intervention programmes through NGOs, training and capacity building activities, STD/RTI care and also outreach services, condom promotion activities, blood safety and voluntary blood donation activities, voluntary counseling and testing centres to identify HIV affected and to provide counseling etc. The outlay provided for Tamil Nadu Aids Control Society is Rs.5.00 crore for the year 2009-10.

### **Plan Outlay for 2009-10**

The outlay for Eleventh Plan (2007-12) is Rs.2730 crore for this sector. The outlay approved for Medical and Public Health for 2009-10 is Rs. 893.46 crore. Of this, the outlays for Scheduled Caste Sub Plan and Tribal Area Sub Plan are Rs.120.00 crore and Rs.4.33 crore respectively.