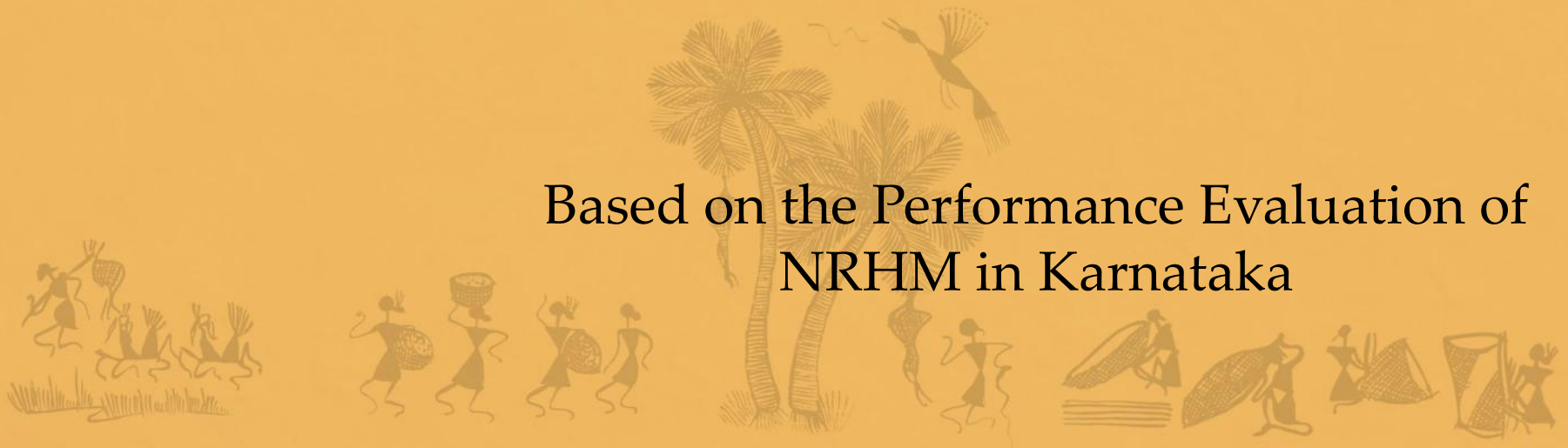




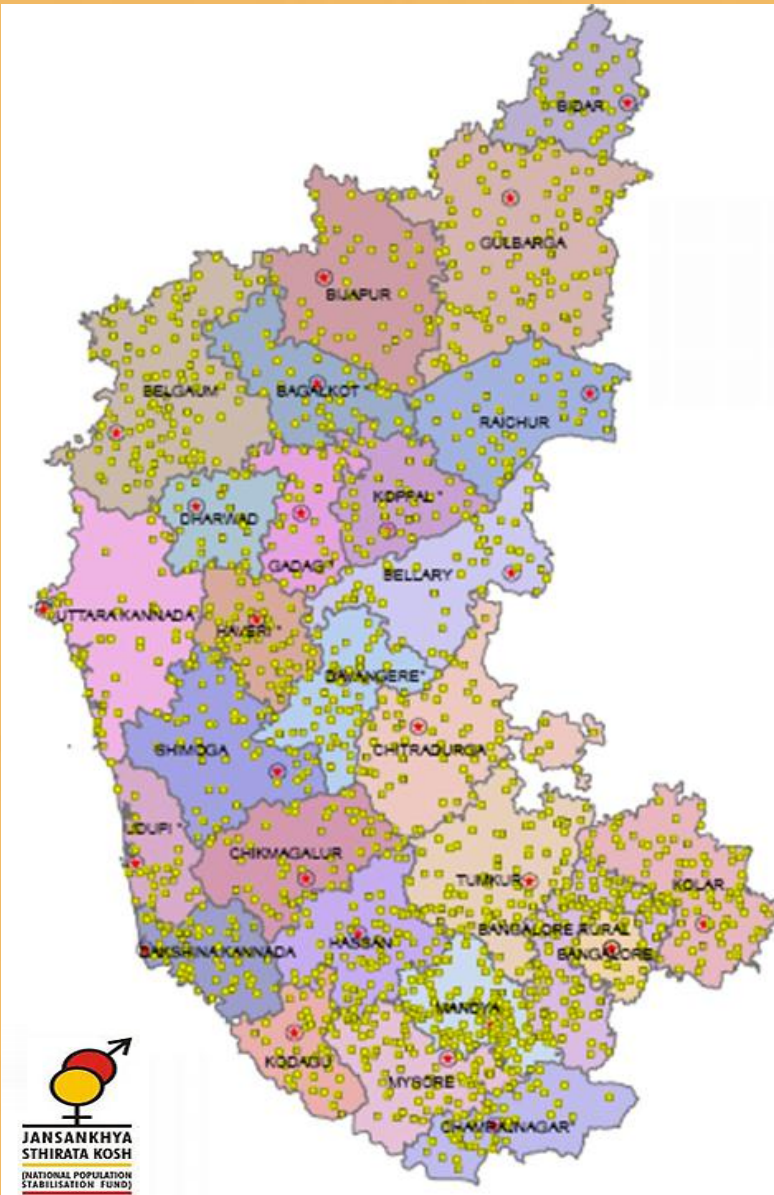
Evidence of regional disparities in health infrastructure in Karnataka

Based on the Performance Evaluation of NRHM in Karnataka

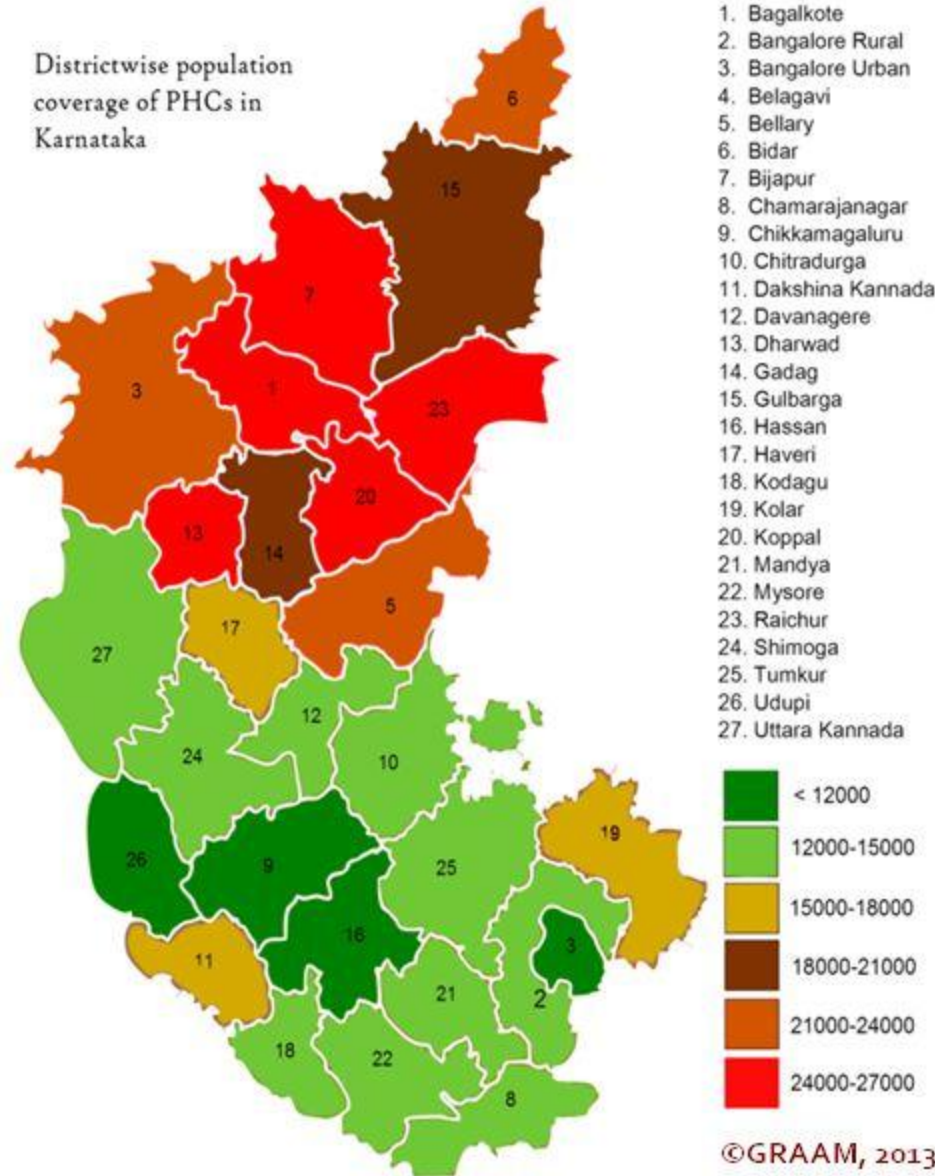


Mapping of PHCs in Karnataka

Regional imbalances



Districtwise population coverage of PHCs in Karnataka

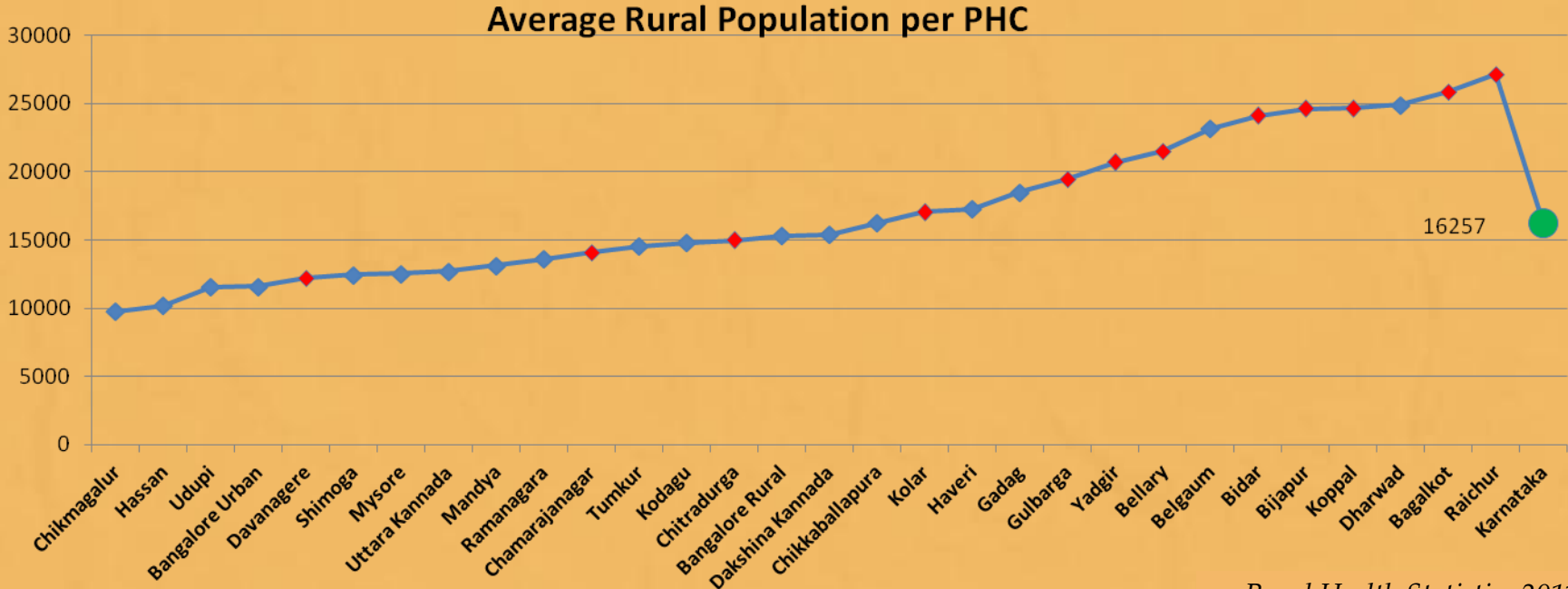


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Regional Imbalances



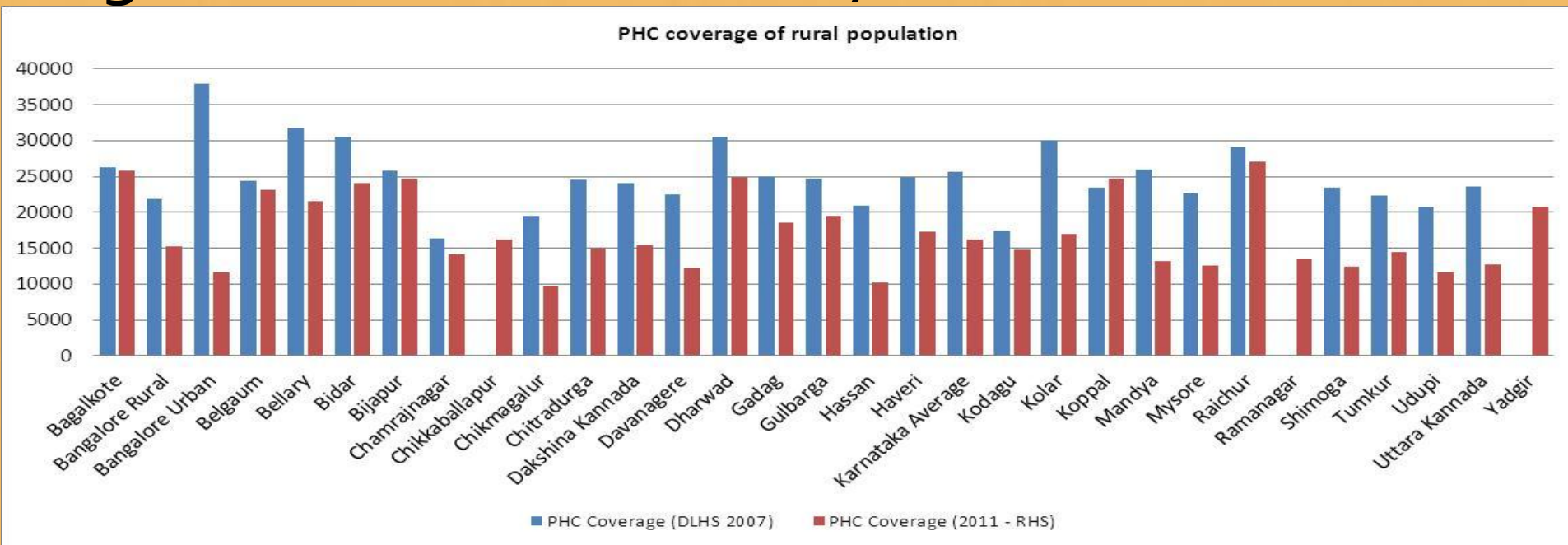
Rural Health Statistics 2011

Regional disparities – Field evidence

PHC	District	Population covered
Savalagi	Bagalkot	65167
Hippargi	Bagalkot	45000
Thurvihala	Raichur	62000
Chowdanakuppe	Tumkur	4500
Somanathpura (TNP)	Mysore	5410

District	Surplus PHCs
Mysore	81
Hassan	81
Tumkur	74
Davanagere	64
Mandya	64

Regional Imbalances (2007 vs 2011)



- Places like Mandya, Mysore, Shimoga, Uttara Kannada have gained more through NRHM than the vulnerable districts. In North Karnataka districts like Bagalkote, Bellary and Bijapur, the coverage of rural population by Sub Centres has actually deteriorated (in comparison to populations in 2007)
- Over-all expenditure is strongly and positively correlated with existing infrastructure; due to facility based approach (rather than need based approach) for funding health institutions.
- Infrastructure does not have significant correlation with health indicators
- NRHM expenditures are not significantly correlated to the composite health indicator

Recommendations

- **Addressing regional disparities through NRHM**
 - Facility based approach, rather than need based approach is adopted for funding health institutions
 - In few districts, situation has actually worsened (Bagalkote, Bellary and Bijapur, the coverage of rural population by Sub Centres has actually deteriorated)
 - **For the 6C and other vulnerable districts, focus on the improvement of infrastructure, field presence (specifically ASHAs and ANMs) and *larger facility based funds* (like Untied Funds, Maintenance and Corpus Funds)**
 - **If not feasible in the short run, supplement NRHM funds for these districts through special quotas at the state level**
 - **For other districts, focus on *demand/need based funding mechanisms* and optimization of HR based on rotation and shared responsibilities**

6C: Bagalkot, Bidar, Bijapur, Gulbarga, Koppal, Raichur

Vulnerable districts: Chamarajanagar, Chitradurga,

Davanagere, Kolar



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