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Health service plagued by massive vacancies for doctors in Majhi land

THUAMUL/RAMPUR/KALAHANDI: It's about 3 o'clock in the afternoon. The Community Health Centre (CHC) of Thuamul Rampur, a block headquarters town located about 65 km from Bhawanipatna in Odisha, wears a desolate look. Abinash Rath is the only doctor present.

Abinash is a harried man today. The young MBBS doctor has to see all the 100 or so patients who come to the CHC every day. The CHC has a sanction for five MBBS doctor posts. Two posts are vacant. Two doctors have been drafted to Thuamul Rampur from elsewhere. But today, one of them is out on court duty, and the other is attending audit work. That leaves young Dr Rath to hold the fort.

This is Dana Majhi's Odisha. Rural healthcare in this landscape of diseases and privation is in such shambles that an ambulance carrying the dead home in dignity is just one of the many niceties not available.

The zone being a high rainfall one, gastrointestinal diseases, malaria and maternal and infant health issues are endemic. Cholera and diarrhoea in particular are major and frequent threats in the remoter villages, which have been rendered out of reach due to the missing PMGSY roads. Like Bollywood and cricket, absence of doctors in rural hospitals is a pan-India phenomenon. This is quite evident in the Dana Majhi country too. The government health service network is plagued by massive vacancies.

There are 16 CHCs and 42 primary health centres (PHCs) in Kalahandi. Out of the sanctioned 212 doctor posts for the peripheral healthcare centres, just about 129 doctors are in position, rest are empty.

And if that lone reluctant doctor is not in at the CHC, tribal people like Dana Majhi simply have no second option. They just have to sit down on their haunches and wait - either for the doctor or for the fever to pass.

I stop at the Chief District Medical Office (CDMO) to ask why 40 per cent of the PHC jobs would go vacant in a scenario of unemployment. Officers there told me that as many as 26 doctors were appointed on contract to fill those vacancies but the new doctors quit in no time. "MBBS degree holders opt for

Kalahandi-Bolangir-Koraput (KBK) districts because they get weightage for PG admission. Once they qualify, they leave,” one officer pointed out.

The Odisha Government has been trying to recruit doctors on an ad-hoc basis, offering a salary of Rs 40,000 and a location-based incentive of Rs 20,000 per month. But it has not worked. The fact is, no doctor wants to be posted in this back-of-beyond region that is devoid of basic infrastructure such as residential quarters, electricity and educational institutions. Doctors apart, basic healthcare services are also not in place in many parts of the block. The Thuamul Rampur CHC, for instance, does not have a pathology lab and patients have to rely on a private lab for basic diagnostics.

Niramaya, a free medicine scheme launched amidst much fanfare by Chief Minister Naveen Patnaik across the State last year, is not available here. The Niramaya Centre at the Thuamul Rampur CHC was built about seven months back but has not become operational as yet.

Niramaya is meant to make 426 drugs including 82 anti-cancer medicines freely available to patients. Last year, the government claimed to have spent Rs 200 crore on the scheme. This year, it has made a provision for Rs 239 crore. But it makes no sense to Dana Majhi and his ilk.

The situation is even worse in those parts of the block that are difficult to reach. The village is reachable by the two motor boats. But neither of them has any life jackets. Last month, the Talnagi panchayat, located in the Indravati reservoir, reported 17 deaths, mostly attributed to febrile illness. At least six were children. With only one doctor at the CHC, it was impossible to take the immunisation programme there.

Back at the District Headquarters Hospital in Bhawanipatna, from where Dana Majhi set out on his funeral march, the scenario is not better. Of the 71 doctor posts, at least 39 are vacant. There are no specialists for the skin, cardiology and neurology departments. The DHH receives at least 700 patients in its out-patient department and 315 in the indoor wing. The bed strength is barely 165.