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Urban Areas:

1. The City Health Mission (CHM) would be headed the Mayor if the district is predominantly urban. The City Mission or Society may be established based on local context. (*Para 3.9*)
2. The city health action plans will be prepared on the basis of a socio-epidemiological profile with a focus on the health needs of vulnerable population including the poor, homeless, street children, construction and migrant workers, rag-pickers, vendors, beggars, sex workers, etc. The action plan will clearly prioritize areas which are more difficult to reach, or have lower baseline indicators and devise plans to improve access to services. (*Para 5.1.5*)
3. Urban Primary Health Centres (U-PHC) would serve as the first point for delivery of primary health care. The U-PHC would be appropriately staffed with doctors, staff nurses, pharmacist, laboratory technician, and ANMs, depending upon the caseloads and populations covered.
4. Outreach services would be provided through ANMs based in UPHCs. ANMs would provide preventive, promotive and curative health care services to households through routine outreach sessions. Where the population is dense, the gap can be met by positioning multiple service provider teams at existing UPHCs. (*Para 5.4.3*) Mobile Medical Units (MMUs) to take health services to difficult to reach urban slums shall be supported. The MMUs will have a package of services equivalent to a U-PHC and have the necessary HR, equipment and supplies. (*Para 5.4.11*)
5. ASHAs in urban areas would be a new feature. The selection processes and roles would be broadly similar with rural ASHA but would be tailored to the urban context. They would be selected at the level of 200-500 households, using community based selection mechanisms. (*Para 5.5.1.1*)
6. One major social determinant of health is gender. Mainstreaming gender concerns shall be done by sensitizing providers and mid level managers to gender issues, and making facility level care women friendly, both as patients or care givers. (*Para 5.5.4.6*)
7. There is also a section of the population who are not only poor, but also suffers from additional cause of vulnerability and marginalization- migrant worker, homeless, street children, occupational groups like rag-pickers, sanitation workers, trans-