

**GOVERNMENT OF INDIA  
HEALTH AND FAMILY WELFARE  
LOK SABHA**

UNSTARRED QUESTION NO:2650  
ANSWERED ON:09.12.2011  
HEALTH PROJECTS  
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**Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:**

(a) the details of ongoing/pending health projects in the country including Bihar/ Jharkhand during the last three years and the current year; and

(b) the works undertaken by Central Government and State Governments for improvement and development of health in the country during the said period?

**Answer**

MINISTER OF THE STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI GHULAM NABIAZAD)

(a) &(b):

1. Integrated Disease Surveillance Project (IDSP) Government of India initiated Integrated Disease Surveillance Project (IDSP) with the aim to detect and respond to outbreaks of epidemic prone diseases. Surveillance units have been established in all States/districts including Bihar and Jharkhand.

Under IDSP, the districts and States have been strengthened by providing additional manpower, training of identified RRT members for outbreak investigations, strengthening of laboratories for detection of epidemic prone diseases, ICT equipment for data entry, analysis and data transfer, and provision of funds for operationalization. Presently, 82% of districts in Bihar report weekly data for epidemic prone diseases under IDSP. These data are analyzed by District Surveillance Unit (DSU) and State Surveillance Unit (SSU) to diagnose and control the outbreak. The State/districts have reported and responded to 6 outbreaks in 2009, 21 in 2010 & 127 in 2011 (data till 20th November, 2011). Presently, 86% of districts in Jharkhand report weekly data for epidemic prone diseases under IDSP. These data are analyzed by District Surveillance Unit (DSU) and State Surveillance Unit (SSU) to diagnose and control the outbreak. The State/districts have reported and responded to 5 outbreaks in 2009, 4 in 2010 & 22 in 2011 (data till 20th November, 2011). The funds provided to Bihar & Jharkhand in last three years and the current year are as under;

Bihar As on 30.11.11 (Rs. in Lakhs)

	Fund Released	Expenditure
2007-08	125.00	0.00
2008-09	0.00	0.00
2009-10	10.00	46.56
2010-11	121.17	127.71

2011-12 59.79 56.15

Total 315.96 230.42

Jharkhand As on 30.11.11 (Rs. in Lakhs)

Fund Released Expenditure

2007-08 100.00 0.17

2008-09 0.00 3.17

2009-10 81.78 38.80

2010-11 65.00 53.51

2011-12 0.00 28.45

Total 246.78 124.10

## 2. National Programme for Control of Blindness (NPCB):

National Programme for Control of Blindness (NPCB) is one of the ongoing Centrally Sponsored Schemes in implementation in the country including Bihar and Jharkhand. Major activities undertaken for eye health during the last three years including current year are:

# Performance of 2,01,10,795 cataract operations.

# Distribution of 16,78,213 free spectacles to school children.

# Collection 1,48,944 donated eyes for corneal transplantation.

## 3. Revised National TB Control Programme (RNTCP):

Revised National TB Control Programme (RNTCP) widely known as DOTS, which is WHO recommended strategy, is being implemented as a 100% Centrally Sponsored Scheme in the entire country including Bihar/Jharkhand. Under the programme, diagnosis and treatment facilities including anti TB drugs are provided free of cost to all TB patients. For quality diagnosis, designated microscopy centers have been established for every one lac population in the general areas and for every 50,000 population in the tribal, hilly and difficult areas. More than 12900 microscopy centers have been established in the country. Treatment centers (DOT centers) have been established near to residence of patients to the extent possible. All government hospitals, Community Health Centers (CHC), Primary Health Centers (PHCs), Sub-centers are DOT Centers. In addition, NGOs, Private Practitioners (PPs) involved under the RNTCP, Community Volunteers, Anganwadi workers, Women Self Groups etc. also function as DOT Providers/DOT Centers. Drugs are provided under direct observation and the patients are monitored so that they complete their

treatment. DOTS Plus services, for the management of multi-drug resistance tuberculosis (MDR-TB) and TB-HIV collaborative activities for TB-HIV co-infection are being implemented throughout the country.

#### 4. Maternal Health Programme:

Under Maternal Health, two schemes i.e. Janani Suraksha Yojna (JSY) and Janani Shishu Suraksha Karyakaram (JSSK) are running for the whole country for the welfare of Women and children. The details of JSSK are given below.

# Government of India has launched Janani Shishu Suraksha Karyakaram (JSSK) on 1st June, 2011, which entitles all pregnant women delivering in public health institutions to absolutely free and no expense delivery including Caesarean section. The initiative stipulates free drugs, diagnostics, blood and diet, besides free transport from home to institution, between facilities in case of a referral and drop back home. Similar entitlements have been put up in place for all sick newborns accessing public health institutions for treatment till 30th days after birth. The Government of Bihar and Jharkhand have launched JSSK in their respective States.

#### 5. National Programme for Prevention & Control of Deafness (NPPCD):

The proposal related to National Programme for Prevention & Control of Deafness (NPPCD) were received in the state PIP from the state Government for implementation of the programme in their state. At present the programme is being implemented in 176 districts of 16 states and 3 UTs.

No such proposal has been received from the state of Bihar and Jharkhand till date for implementing the National Programme for Prevention & Control of Deafness in their state.

#### 6. National Mental Health Program :

The National Mental Health Program has no schemes in Bihar. District mental health program is operational in three districts of Jharkhand. RINPAS is state run mental health institute and has been supported under Scheme B of NMHP to start Post graduate courses in Psychiatry, clinical psychology diploma psychiatry nursing and psychiatry social work. Scheme B of NMHP is scheme to produce manpower in mental health. The details are at annexure-1. The PG Courses in all four specialties have been started in RINPAS and one batch of Diploma Psychiatry nursing has passed out as a result of support provided under Scheme B of NMHP.

#### 7. National AIDS Control Programme(NACP):

The National AIDS Control Programme (NACP), launched in 1992, is being implemented as a comprehensive programme for prevention and control of HIV/AIDS in India. Overtime, the focus has shifted from raising awareness to behaviour change, from a national response to a more decentralized response and to increasing involvement of NGOs and networks of PLHA. Phase-III (2007-2012) of NACP-III is a scientifically well-evolved programme, grounded on a strong structure of policies, programmes, schemes, operational guidelines, rules and norms. The details of the activities undertaken by central Government and State Government on health projects are as under:

I. Counseling and Testing services have been scaled up significantly and 110.34 lakh persons including 48.69 lakh pregnant women were counseled and tested during 2011-12(April to October, 2011) through 9,448 Integrated Counseling & Testing Centres which includes 4973 facility integrated model ICTCs. During the same period, 7788 Mother and Baby pairs were provided with Nevirapine Prophylaxis for prevention of transmission of HIV from mother to child. Under the HIV-TB Collaborative activities, there has been HIV-TB cross referrals of 6.57 lakhs (April- September,2011).

II. Under STI/RTI prevention and control component of NACP during 2011-12, 4,417,341 lakh new Sexually Transmitted Infections (STI) / Reproductive Tract Infection (RTI) episodes have been treated. Convergence strategy with National Rural Health Mission (NRHM) through standardized treatment protocols and common operational guidelines has also been developed.

III. Under Blood Safety Programme, 1,127 blood banks are being supported under the programme, including 155 Blood Component Separation facilities. Voluntary blood donation account for 81% of blood units collected during April to Aug. 2011-12.

IV. Under the Condom Social Marketing Programme, 27.07 crore pieces and 40.09 crore pieces of condom were distributed during 2009-10 and 2010-11. During 2011-12(till Aug., 2011), 22.73 crore pieces of condoms were distributed. Under phase-III of programme Condom Social Marketing is being scaled up to reach 370 high priority districts with the focus on ensuring availability of condoms in rural as well as in high risk areas. The programme would be servicing 8 lakh retail outlets in 26 states/ UTs.

V. Targeted Intervention (TI) is being implemented through non-government organizations (NGOs) and community-based organizations (CBOs), which provide services on behavior change communication, condom promotion, STI care, needle syringe exchange programme, Opioid Substitution Therapy (OST) and referrals for HIV testing and Anti-Retroviral Treatment. At the beginning of NACP III, there were a total of 789 TIs in the country. It was envisaged that a total of 2100 TIs would be required to achieve the goal of 80% saturation, SACS undertakes mapping exercise to estimate the HRG numbers and on the basis of this the TIs are contracted. At present there are 1595 SACS funded TIs and 180 donor funded TIs with the coverage of Female Sex Workers (80.6%), Injecting Drug Users (71%), Men having sex with Men (66.5%) and bridge population including Migrants (40%) and Truckers (56.5%). Through these TIs in total 31.32 Lakhs HRGs are being provided services. New initiatives include Opioid Substitution Therapy, A new migrant strategy has been also been launched to tackle transmission through migrants at source, transit and destination. Key achievements during the last three years, state-wise are given in annexure-II.

VI. Link Worker Scheme is a rural based intervention for prevention and care needs of HRG and vulnerable population of rural area including of referral to ICTC services and STI services, Condom promotion & distribution, information related to HIV prevention and

related services. Details of Link Worker Scheme state-wise is given in annexure-III.

VII. Information Education & Communication activities aim at effecting behaviour change with the target of creating an empowering and enabling environment for all. The focus is on promoting safe behaviours, reduction of stigma and discrimination and promotion of services, while giving special emphasis to high risk groups, bridge populations including truckers and migrants and youth and women in general population. The state-wise status of mainstreaming training conducted year-wise is also mentioned in annexure-IV.

Regular IEC campaigns are conducted at national and state level through mass-media, mid-media and interpersonal communication to disseminate messages on HIV/AIDS and promote safe behavioral practices. The following is the summary of key programme areas.

#### Mass Media Campaigns

Mass Media campaigns are being undertaken by National AIDS Control Organization (NACO) and State AIDS Control Organization (SACS). These Mass Media Campaigns are conducted on thematic areas i.e. Youth vulnerability, Counseling & Testing, HIV-TB, Condom promotion, Treatment services, Stigma & Discrimination and Blood Safety are conducted on TV and Radio through television, radio and newspapers, which cover all the states.

# Every year, six episodes on HIV /AIDS were broadcast in the Kalyani Health Magazine by Doordarshan in the regional networks of eight states including Uttar Pradesh, Madhya Pradesh, Rajasthan, Bihar, Jharkhand, Chattisgarh, Odisha and Assam during 2008-09, 2009-10, 2010-11.

# Forty episodes on HIV/AIDS were telecast in the TV serial "Kyunki Jeena Isi Ka Naam Hai" on Doordarshan during 2009-10 while fifty episodes were on air during 2010-11.

# 156 episodes of three radio programmes were broadcast during 2009-10 in Hindi nationally across Hindi speaking states, in addition, a number of State AIDS Control Societies also produced and broadcast radio and TV programmes.

# As per National Targets 10, 6 and 2 mass media campaigns on TV/Radio were conducted consecutively during 2009-10, 2010-11 and 2011-12(till Dec.)

#### Outdoor and Mid Media activities:

These activities are implemented as per the approved action plan by states, which includes folk performances addressing different issues related to HIV/AIDS, Mobilization through IEC vans, Hoardings, wall writings, bus panels and information kiosks, IEC material are being printed and distributed for general population as well as high risk population . Information concerning to folk performances. The state-wise information is available on table below:

During the last 3 years, there has been significant up scaling of Care, Support & Treatment activities in terms of the number of ART centres, number of patients registered and number of patients on-ART.

CST Programme activities Mar 2008 Dec-2010 September -2011

ART Centres 157 292 324

Centres of Excellence 2 10 10

Link ART Centres - 550 678

Community Care Centres 122 259 259

PLHIV Registered 1,94,607 11,69,050 1,384,170

No. of PLHIV on ART 1,34,927 3,84,726 4,48,860

No. of PLHIV on Second-

line ART - 1,929 2,558

Strategic Information Management System (SIMS) developed as a mechanism for improving on the CMIS, was launched in August 2010. Training on SIMS has been completed in five phases at National and State level. Roll out of SIMS on pilot basis in Delhi and in the states of Andhra Pradesh, Goa, Gujarat, Karnataka, Maharashtra, Puducherry and Tamil Nadu was done from 15 September, 2011. SIMS is going to be roll out in West Bengal from 1st December, 2011.