



Report on

The STATE of HEALTH of

DELHI

July 2017

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I. Foreword

In the monsoon of 2015, Delhi was caught unawares by an outbreak of dengue. Various government authorities had seemed unable to spot the massive wave of the vector-borne disease coming their way. The spurt in dengue cases had brought the focus on the capital city's failing health infrastructure. Two monsoons later, is the city better prepared to predict and deal with challenges to public health?

The signs are not encouraging. Take for instance diarrhoea, a disease which remains relatively outside the media spotlight. Delhi, it would seem, has had a terribly upset stomach in recent years. The city saw as many as 5,82,152 cases of the disease in 2014, 5,64,416 cases in 2015 and 6,22,480 cases in 2016. But this is only part of the story. As many as 41% of deaths due to diarrhoea in the year 2015 were of children younger than 4 years. This statistic is tragic, but not particularly surprising. After all, the maximum number (2,27,444) of civic complaints in 2016 by far were on water supply. These constituted 50% of the total complaints in that year. Thus, while citizens did their bit in terms complaining to the relevant authorities, the authorities have been found wanting in their response.

Delhi, like much of the country, is characterised by high levels of privatisation of healthcare and low coverage of health insurance. Consequently, the average Delhite spends an astronomical sum on healthcare. On the basis of a survey commissioned by Praja to research organisation Hansa Research, the overall annual household expenditure on health is estimated to be as high as Rs. 36,009 crores. The per household annual expenditure on health is estimated to be Rs. 1,07,793. Thus, Delhi is characterised by a high risk to various major diseases and a high cost of treatment. This is a very worrisome situation indeed.

But government authorities can only frame appropriate policies to tackle diseases if they can estimate the magnitude of the problem at hand. With no accurate database of the total number of cases of various sensitive diseases, this an uphill task. Data on cases of various important diseases was not available at a centralised level, and Praja had to file RTIs in individual hospitals for this purpose. Further, there was no consistency in the kind of data provided by the hospitals, indicating that there is a long way to go in terms of strengthening the health management information system of the city. While the Municipal Corporations of Delhi (MCDs) are responsible for maintaining this data, the Directorate of Health Services of the Delhi state government is responsible for supervising the collection of this data.

It is precisely this paucity of data that we wish to address through our first Health White Paper in Delhi. We hope that the Municipal Corporations of Delhi and the Delhi state government will undertake a similar exercise to analyse their own data and identify steps which need to be taken.

Nitai Mehta

Managing Trustee, Praja Foundation

II. Acknowledgements

Praja has obtained the data used in compiling this report card through Right to Information Act, 2005. Hence it is very important to acknowledge the RTI Act and everyone involved, especially from the officials who have provided us this information diligently.

We are also most grateful to – our Elected Representatives, the Civil Society Organisations (CSOs) and journalists who utilise and publicise our data and, by doing so, ensure that awareness regarding various issues we discuss is distributed to a wide ranging population. We would also like to extend our gratitude to all government officials for their cooperation and support.

This White Paper has been made possible by the support provided to us by our supporters and we would like to take this opportunity to express our sincere gratitude to them. First and foremost, we would like to thank the Initiatives of Change (IC) Centre for Governance, a prominent organisation working on improving governance structures and United Residents Joint Action (URJA), a well-known organisation which addresses the gap in last mile governance by connecting citizens and RWA. Our work in Delhi has been conducted in partnership with them and we have been able to conduct data driven research on vital issues affecting the governance of Delhi on aspects such as performance of Elected Representatives (ER), Health, Education, Crime and policing and Civic issues.

Praja Foundation appreciates the support given by our supporters and donors, namely European Union Fund, Friedrich Naumann Foundation, Ford Foundation, Dasra, Narotam Sekhsaria Foundation and Madhu Mehta Foundation and numerous other individual supporters. Their support has made it possible for us to conduct our study & publish this white paper.

We would also like to thank our group of Advisors & Trustees and lastly but not the least, we would like to acknowledge the contributions of all members of Praja’s team, who worked to make this white paper a reality.



The content of the report is the sole responsibility of Praja Foundation.

III. Note on Public Health Department Data

i. RTI Data

Data in this paper has been collected from different government institutions through RTI (Right to Information Act.). In the sections given below, we have analysed data of diseases and ailments from January 2014 to December 2016 from Municipal/Government hospitals and dispensaries. Through this data, we have attempted to assess the performance of health services provided at various levels of government using government's own data. We have collected this information through the Right to Information Act (RTI), 2005

a. Occurrences of diseases and ailments in municipal dispensaries and government hospitals

Delhi is divided into 11 districts(state) and 12 zones (Municipal Corporation Delhi), each headed by one Chief District Medical Officer (11 CDMOs) and 12 Chief Administrative Medical Officers (12 CAMOs) respectively. The CDMOs are under the administrative control of Delhi Government Health Scheme (DGHS) and the CAMOs are responsible for monitoring the functioning of health centres/dispensaries in their respective districts¹.

There are 39 State hospitals in Delhi, 6 MCD hospitals, 263 state dispensaries, and 74 MCD dispensaries and 10 chest clinics. We received data on cases of 12 sensitive diseases from 39 government hospitals from 2014 to 2015, but for the year 2016 we have collected data on 13 sensitive diseases. Till 2015 there were 39 State hospitals, but in 2016 they were 38 as one hospital got converted into Aam Aadmi Polyclinic; hence for the year 2016 we have received information under RTI from only 38 state hospitals. Through RTI queries, we had sought to know the total number of cases of these diseases from each hospital. However, this data has not been provided in a uniform format by the hospitals. Some hospitals mentioned only Out Patient Department (OPD) cases, some only In-Patient Department(IPD) cases, while some mentioned both. Some did not mention whether the cases were from OPD or IPD. Further, in some cases, the same hospitals have given data in different formats in different years.

Therefore, where only IPD or only OPD data has been provided, we have counted it as the total. In the data provided where both OPD and IPD cases have been mentioned, we have calculated the total of these two numbers. In cases where the hospitals did not mention whether the cases were from OPD or IPD, we assumed the number given to be the total (kindly refer Table 1 for summarised data on diseases/ailments from 2014 to 2016). Summary status of the data received from dispensaries and hospitals is mentioned below:

¹ http://www.delhi.gov.in/wps/wcm/connect/doi_health/Health/Home/Directorate+General+of+Health+Services/

Summary of Data received from dispensaries and hospitals

MCD dispensaries					
2014		2015		2016	
Total Dispensaries	Data Received	Total Dispensaries	Data Received	Total Dispensaries	Data Received
84	50	84	55	84	65
State dispensaries					
2014		2015		2016	
Total Dispensaries	Data Received	Total Dispensaries	Data Received	Total Dispensaries	Data Received
263	250	263	255	263	257
MCD Hospitals					
2014		2015		2016	
Total Hospitals	Data Received	Total Hospitals	Data Received	Total Hospitals	Data Received
6	6	6	6	6	6
State hospitals					
2014		2015		2016	
Total Hospitals	Data Received	Total Hospitals	Data Received	Total Hospitals	Data Received
39	33	39	33	39	37

b. Health Personnel

Personnel refers to the people who are employed in an institution. In this report, personnel include all the staff from medical, para-medical, administrable, labour, to nursing positions in all the municipal and state government hospitals, dispensaries and administrative units.

Data received from municipal and state hospitals and dispensaries explains the gaps that exist in the requirement for staff in these units as compared to the deployed staff. Staff shortage clearly reflects in the department's performance and directly compromises on the quality of services being provided to the citizens.

In RTI replies from CDMOs (Chief District Medical Officers) we have been told that the Directorate of Health Services (DHS) sanctions post to the CDMO then the CDMO office deploys the staff to the dispensaries as per their requirement. There is no separate record with the CDMO office on how many staff are working in each dispensary. Please refer to Annexure 5 for a sample of one such reply from CDMO.

This data has been collected from MCD, state dispensaries, state hospitals and chest clinics. It has been collected from Director of Hospital Administration Department (DHA), Public Health Department & AYUSH Department of the three Municipal Corporations of Delhi & Directorate of Health Services (DHS) till 31st December 2016. Kindly refer Annexure 1 for list of Hospitals and dispensaries.

c. Budget

This data has been collected from the three Municipal Corporations of Delhi and state health budget was referred from Delhi Government website for the year 2015-16, 2016-17 & 2017-18.

d. Deliberations

- a. **Councillors:** The data on deliberations i.e. attendance, numbers of issues raised and the categories of issues raised pertain to the Public Health Committees(PHC) into account for this study. This data is collected from April 2015 to December 2016.
- b. **MLAs:** The data on deliberations i.e. attendance, number of issues raised and categories of issues raised by MLAs is collected from Vidhan Bhawan for the meetings from 24th February 2015 to 15th November 2016.

ii. Cause of death:

Cause of death is a term used to indicate the medical cause of death. It lists the disease or injuries which caused death. Specific cause of death information is recorded on the death certificate and is entered into the Vital Statistics System. Municipal Corporation of Delhi is the sole authority for registration of birth and death information. It is maintained by 12 zones of East/North/South Municipal Corporation of Delhi, New Delhi Municipal Council (NDMC) and Delhi Cantonment Board (DCB). This information is maintained in ICD 10 format which is a detailed classification list of diseases prepared by the World Health Organisation (WHO)². Data on cause of death is crucial to understand the extent to which various diseases pose a threat to public health. It can help set the policy agenda for the government in terms of identifying the diseases which need urgent attention and fix gaps in the public health delivery mechanism.

However, for several years after independence, there was no unified system for registering births and deaths in the country. Such a system only came into being in 1969 with enactment of the Registration of Births and Deaths Act. This legislation made registration of births and deaths mandatory and fixed the responsibility of co-ordinating the activities of registration throughout the country of the Registrar General, India. Implementation, however, is to be done by the state governments. The provisions relating to Medical Certified Cause of Death in Registration of Births & Deaths Act, 1969 are as follows:

Section 10(2): In any area, the State Government having regard to the facilities available there in this behalf may require that a certificate as to the cause of death shall be obtained by Registrar from such person and in such form as may be prescribed.

Section 10(3): Where the State Government has required under sub-section (2) that a certificate as to the cause of death shall be obtained, in the event of the death of any person who, during his last illness, was attended by a medical practitioner, the medical practitioner shall, after the death of that person, forthwith, issue without

² <http://www.who.int/classifications/icd/en/>

charging any fee, to the person required under this Act to give information concerning the death, a certificate in the prescribed form stating to the best of his knowledge and belief the cause of death; and the certificate shall be received and delivered by such person to the Registrar at the time of giving information concerning the death as required by this Act.

Section 17(1) (b): Subject to any rules made in this behalf by the State Government, including rules relating to the payment of fees and postal charges, any person may obtain an extract from registration-records relating to any death; provided that no extract relating to any death, issued to any person, shall disclose the particulars regarding the cause of death as entered in the register.

Section 23(3): Any medical practitioner who neglects or refuses to issue a certificate under sub-section (3) of section 10 and any person who neglects or refuses to deliver such certificates shall be punishable with fine which may extend to fifty rupees.

Refer annexure 5 for organizational structure of Registrar of Birth and Death, Delhi

This data has been taken from the online Medical Certification of Cause of Deaths (MCCD) reports³ by Government of National Capital Territory of Delhi for calendar year 2014 & 2015. Cause of Death report of 2016 has not been published by the and hence could not be included in this report.

iii. Citizen Survey

Praja Foundation collects information on cases reported of diseases/ailments and causes of death. This is government data collected under the Right to Information (RTI) Act, 2005. In this section, we are presenting a household survey mapping diseases and ailments, which should ideally be done by the Health Departments of State and MCD to understand the perception of citizens about health care facilities. (Refer Annexure 4 for Survey methodology and socio economic classification)

³<http://www.delhi.gov.in/wps/wcm/connect/409d38004e576640afa9ffbc9ada88c0/MCCD+Report+2015.pdf?MOD=AJPERES&lmod=1453436152&CACHEID=409d38004e576640afa9ffbc9ada88c0> & http://www.censusindia.gov.in/2011-Documents/mccd_Report1/mccd_report_2014.pdf

Survey Methodology

Praja Foundation had commissioned the household survey to Hansa Research and the survey methodology followed is as below:

- In order to meet the desired objectives of the study, we represented the city by covering a sample from each of its 272 wards. Target Group for the study was:
 - ✓ Both Males & Females
 - ✓ 18 years and above
 - ✓ Belonging to that particular ward.
- Sample quotas were set for representing gender and age groups on the basis of their split available through Indian Readership Study (Large scale baseline study conducted nationally by Media Research Users Council (MRUC) & Hansa Research group) for Mumbai Municipal Corporation Region.
- The required information was collected through face to face interviews with the help of structured questionnaire.
- In order to meet the respondent within a ward, following sampling process was followed:
 - ✓ 5 prominent areas in the ward were identified as the starting point
 - ✓ In each starting point about 20 individuals were selected randomly and the questionnaire was administered with them.
- Once the survey was completed, sample composition of age & gender was corrected to match the population profile using the baseline data from IRS. This helped us to make the survey findings more representatives in nature and ensured complete coverage.
- To get more accurate estimates of disease incidence, we have increased the depth of probing to ask further questions about each individual member of the household, the disease they have contracted, whether testing was sought and the nature of the hospital care availed of. This is a more robust method. What was being done earlier was that information was sought at a general household level and then this information was extrapolated to all household members.
- The numbers in the table 15 & 16 refer to the number of cases where testing was conducted and was positive for the disease in question.
- Instead of asking for details about the household in general, this year we asked for information about each member in a household who suffered from a particular disease. As a result, the overlap between private and government hospitals has reduced – this is because, now if two different members of a household visited two different types of hospitals, they are now being covered separately.
- Due to the change in methodology from a generalised household feedback to individual specific feedback, the overlap between private and government hospitals has reduced. Previously, a household where one member may have received treatment from a private hospital and another from a government hospital would be counted under ‘both’. Now, with individual data being captured for each member of the household, only those members who went to both government and private hospitals would be counted under ‘both’.
- **The total study sample was 24,301.**

IV. Data on Disease/Ailments & Health Personnel in Delhi (Data got through RTI)

Table 1: Overview of data on Disease/Ailments⁴ from January 2014 to and December 2016

Diseases	2014			2015			2016		
	Dispensary	Hospital	Total	Dispensary	Hospital	Total	Dispensary	Hospital	Total
Dengue	19	655	674	5,362	20,184	25,546	1,565	5,032	6,597
Diabetes	2,21,033	1,18,155	3,39,188	2,30,045	1,10,472	3,40,517	2,63,768	1,28,760	3,92,528
Diarrhoea	4,38,744	1,43,408	5,82,152	3,98,389	1,66,027	5,64,416	4,52,400	1,70,080	6,22,480
Hypertension	2,32,692	1,14,164	3,46,856	2,17,774	1,04,736	3,22,510	2,61,661	99,782	3,61,443
Malaria	4,638	3,230	7,868	4,069	5,956	10,025	2,493	3,570	6,063
Tuberculosis	37,590	35,506	73,096	53,586	29,622	83,208	41,685	26,484	68,169
Typhoid	7,422	35,444	42,866	43,036	34,892	77,928	15,064	39,525	54,589
Cholera	1,690	834	2,524	4,644	1,280	5,924	5,636	1,692	7,328
HIV/ AIDS	781	1,430	2,211	938	13,536	14,474	891	16,441	17,332
Other Diseases	1,29,31,503	1,45,98,624	2,75,30,127	1,34,74,354	1,87,96,024	3,22,70,378	1,43,88,009	1,78,30,407	3,22,18,416
Total	1,38,76,112	1,50,51,450	2,89,27,562	1,44,32,197	1,92,82,729	3,37,14,926	1,54,33,172	1,83,21,773	3,37,54,945

- From all the sensitive diseases, Diarrhoea, Hypertension and Diabetes have the highest occurrence in 2014, 2015 and 2016 which accounts to 5,89,683; 3,43,603 and 3,57,411 cases respectively in last three years on an average
- Amongst communicable diseases, Dengue and Tuberculosis cases were highest in the year 2015 with 25,546 and 83,208 respectively. HIV/AIDS has increased 8 times from 2014 (2,211) to 2016 (17,332).

⁴ We have tracked the occurrence of Communicable and lifestyle diseases in this report. This table is an overview of the occurrence of sensitive diseases in Delhi. You will see details of the same in this section.

Table 2: Zone wise occurrence in percentage of Diseases/ Ailments from 2014 to 2016

Corporation	Zone	Dengue	Diabetes	Diarrhoea	Hypertension	Malaria	Tuberculosis	Typhoid
EDMC	Shahdara North	5%	10%	6%	7%	17%	8%	8%
	Shahdara South	13%	8%	8%	8%	9%	9%	2%
NDMC	City	1%	4%	2%	5%	1%	0%	5%
	Rural Narela	1%	14%	22%	18%	3%	6%	3%
	Karol Bagh	13%	9%	6%	8%	18%	8%	9%
	Rohini	26%	17%	12%	16%	10%	33%	27%
	Sadar Paharganj	0%	7%	5%	7%	0%	2%	2%
	Civil Lines	10%	12%	10%	12%	26%	11%	19%
SDMC	Central	0%	2%	6%	2%	0%	6%	1%
	West	7%	9%	13%	11%	10%	5%	6%
	South	22%	2%	4%	1%	1%	6%	3%
	Najafgarh	1%	5%	8%	5%	5%	6%	15%
New Delhi Municipal Council		0%	0%	0%	1%	0%	0%	0%
Total		100%	100%	100%	100%	100%	100%	100%

- Rohini zone of NDMC has 26% of the Dengue cases registered in Delhi.
- Of total 2,24,473 Tuberculosis cases registered in Delhi, Rohini zone has the largest share (33%)
- Rural Narela zone (22%), West zone (13%) and Rohini zone (12%) have the largest share in the total cases of Diarrhoea registered.

Table 3: Malaria number of cases in government dispensaries/hospitals and institutional deaths in Delhi from January 2014 to December 2016

Years	2014	2015	2016
Number of Malaria Cases in government dispensaries/hospitals in Delhi			
MCD dispensaries/hospitals	2,838	1,909	971
State dispensaries/hospitals	5,030	8,116	5,092
Total Cases	7,868	10,025	6,063
Population /Total Cases	1,876	1,472	2,434
Number of Deaths due to Malaria in Delhi			
Institutional Deaths ⁵	160	164	_ ⁶
Total Cases/Total Deaths	49	61	

Malaria cases were highest in the year 2015 with 10,025 cases registered throughout Delhi.

Table 4: Dengue number of cases in government dispensaries/hospitals and institutional deaths in Delhi from January 2014 to December 2016

Years	2014	2015	2016
Number of Dengue Cases in government dispensaries/hospitals in Delhi			
MCD dispensaries/hospitals	156	3,087	951
State dispensaries/hospitals	518	22,459	5,646
Total Cases	674	25,546	6,597
Population /Total Cases	21,896	578	2,237
Number of Deaths due to Dengue in Delhi			
Institutional Deaths ⁷	74	486	_ ⁸
Total Cases/Total Deaths	9	53	

- Dengue was highest in the year 2015 when the cases were 25,546
- Deaths due to Dengue have increased almost seven times from 2014 to 2015.

^{5&7} The report has been prepared exclusively on the basis of data on institutional deaths in Delhi. In domiciliary cases MCCD is not reported, so the readers of this report may bear in mind that this study is confined to 62.70% of the registered deaths during 2015 in Delhi which have occurred in hospitals.

^{6&8} Cause of Death report of 2016 has not been published by the Government of NCT of Delhi, Directorate Of Economics & Statistics & Office Of The Chief Registrar (Births & Deaths), it could not be included in this report.

Table 5: Tuberculosis number of cases in government dispensaries/hospitals and institutional deaths in Delhi from January 2014 to December 2016

Years	2014	2015	2016
Number of Tuberculosis Cases in government dispensaries/hospitals in Delhi			
MCD dispensaries/hospitals	29,245	39,206	31,611
State dispensaries/hospitals	43,851	44,002	36,558
Total Cases	73,096	83,208	68,169
Population /Total Cases	202	177	216
Number of Deaths due to Tuberculosis in Delhi			
Institutional Deaths ⁹	4350	3635	_10
Total Cases/Total Deaths	17	23	

- Reported cases of Tuberculosis were 73,096 in 2014 while the cases had shot up to 83,208 in 2015. The year 2016 saw a decrease in reporting of tuberculosis cases which were 68,169
- There have been 3,635 deaths due to Tuberculosis in the year 2015.

Table 6: Diarrhoea number of cases in government dispensaries/hospitals and institutional deaths in Delhi from January 2014 to December 2016

Years	2014	2015	2016
Number of Diarrhoea Cases in dispensaries/hospitals in Delhi			
MCD dispensaries/hospitals	96,579	1,19,947	1,28,806
State dispensaries/hospitals	4,85,573	4,44,469	4,93,674
Total Cases	5,82,152	5,64,416	6,22,480
Population /Total Cases	25	26	24
Number of Deaths due to Diarrhoea in Delhi			
Institutional Deaths ¹¹	146	157	_12
Total Cases/Total Deaths	3987	3595	

- On an average in last three years, 5,85,480 people have suffered from diarrhoea in Delhi
- The registered number of cases of Diarrhoea, have been consistently high in the last three years from 2014 to 2016.

^{9 & 11} The report has been prepared exclusively on the basis of data on institutional deaths in Delhi. In domiciliary cases MCD is not reported, so the readers of this report may bear in mind that this study is confined to 62.70% of the registered deaths during 2015 in Delhi which have occurred in hospitals.

^{10 & 12} Cause of Death report of 2016 has not been published by the Government of NCT of Delhi, Directorate Of Economics & Statistics & Office Of The Chief Registrar (Births & Deaths), it could not be included in this report.

Table 7: Cholera number of cases in government dispensaries/hospitals and institutional deaths in Delhi from January 2014 to December 2016

Years	2014	2015	2016
Number of Cholera Cases in government dispensaries/hospitals in Delhi			
MCD dispensaries/hospitals	311	881	947
State dispensaries/hospitals	2,213	5,043	6,381
Total Cases	2,524	5,924	7,328
Population /Total Cases	5,847	2,491	2,014
Number of Deaths due to Cholera in Delhi			
Institutional Deaths ¹³	65	43	_ ¹⁴
Total Cases/Total Deaths	39	138	

Cholera cases in Delhi have increased from 2,524 to 7,328 in last three years from 2014 to 2016.

Table 8: Typhoid number of cases in government dispensaries/hospitals and institutional deaths in Delhi from January 2014 to December 2016

Years	2014	2015	2016
Number of Typhoid Cases in government dispensaries/hospitals in Delhi			
MCD dispensaries/hospitals	2,050	6,468	6,091
State dispensaries/hospitals	40,816	71,460	48,498
Total Cases	42,866	77,928	54,589
Population /Total Cases	344	189	270
Number of Deaths due to Typhoid in Delhi			
Institutional Deaths ¹⁵	43	10	_ ¹⁶
Total Cases/Total Deaths	997	7793	

Typhoid cases have seen a staggering increase from 2014 (42,866) to 2015 (77,928) while in 2016 the cases reported were 54,589.

¹³ & ¹⁵ The report has been prepared exclusively on the basis of data on institutional deaths in Delhi. In domiciliary cases MCCD is not reported, so the readers of this report may bear in mind that this study is confined to 62.70% of the registered deaths during 2015 in Delhi which have occurred in hospitals.

¹⁴ & ¹⁶ Cause of Death report of 2016 has not been published by the Government of NCT of Delhi, Directorate Of Economics & Statistics & Office Of The Chief Registrar (Births & Deaths), it could not be included in this report.

Table 9: Diabetes number of cases in government dispensaries/hospitals and institutional deaths in Delhi from January 2016 to December 2016

Years	2014	2015	2016
Number of Diabetes Cases in government dispensaries/hospitals in Delhi			
MCD dispensaries/hospitals	70,926	71,691	72,315
State dispensaries/hospitals	2,68,262	2,68,826	3,20,213
Total Cases	3,39,188	3,40,517	3,92,528
Population /Total Cases	44	43	38
Number of Deaths due to Diabetes in Delhi			
Institutional Deaths ¹⁷	1762	1356	_18
Total Cases/Total Deaths	193	251	

- Reported cases of Diabetes have increased from (3,39,188) in 2014, to 2016 (3,92,528)
- Institutional Deaths due to Diabetes have reduced from 1,762 in 2014 to 1,356 in 2015.

Table 10: Hypertension number of cases in government dispensaries/hospitals and institutional deaths in Delhi from January 2016 to December 2016

Years	2014	2015	2016
Number of Hypertension Cases in government dispensaries/hospitals in Delhi			
MCD dispensaries/hospitals	72,862	75,846	80,045
State dispensaries/hospitals	2,73,994	2,46,664	2,81,398
Total Cases	3,46,856	3,22,510	3,61,443
Population /Total Cases	43	46	41
Number of Deaths due to Hypertension in Delhi			
Institutional Deaths ¹⁹	1962	3890	_20
Total Cases/Total Deaths	177	83	

- Registered cases of Hypertension have increased from 3,22,510 in 2015 to 3,61,443 in 2016
- Institutional Deaths due to Hypertension have increased by 50% from 1,962 in 2014 to 3,890 in 2015.

^{17 & 19} The report has been prepared exclusively on the basis of data on institutional deaths in Delhi. In domiciliary cases MCCD is not reported, so the readers of this report may bear in mind that this study is confined to 62.70% of the registered deaths during 2015 in Delhi which have occurred in hospitals.

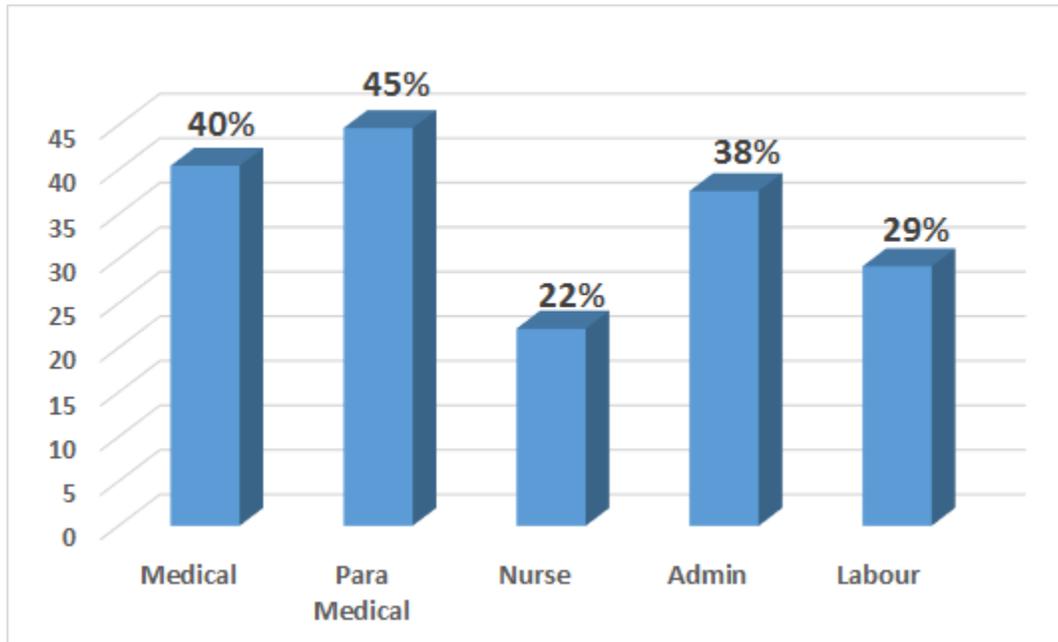
^{18 & 20} Cause of Death report of 2016 has not been published by the Government of NCT of Delhi, Directorate Of Economics & Statistics & Office Of The Chief Registrar (Births & Deaths), it could not be included in this report.

Table 11: Quarter-wise Dengue, Diarrhoea and Typhoid cases for 2014, 2015 and 2016

Year	Quarter	Dengue	Diarrhoea	Typhoid
2014	Jan-14 to Mar-14	99	117082	7275
	Apr-14 to Jun-14	99	153189	9338
	Jul-14 to Sep-14	71	178232	14517
	Oct-14 to Dec-14	405	133649	11736
2015	Jan-15 to Mar-15	93	118027	17766
	Apr-15 to Jun-15	97	146603	16882
	Jul-15 to Sep-15	15004	170597	24081
	Oct-15 to Dec-15	10352	129189	19199
2016	Jan-16 to Mar-16	1666	130167	8702
	Apr-16 to Jun-16	753	172790	13651
	Jul-16 to Sep-16	2414	189399	17714
	Oct-16 to Dec-16	1764	130124	14522

The third quarter (July to September) for all the three years, had highest number of cases registered for Dengue, Diarrhoea and Typhoid. In 2014, however, Dengue had more cases registered in the fourth quarter (October to December).

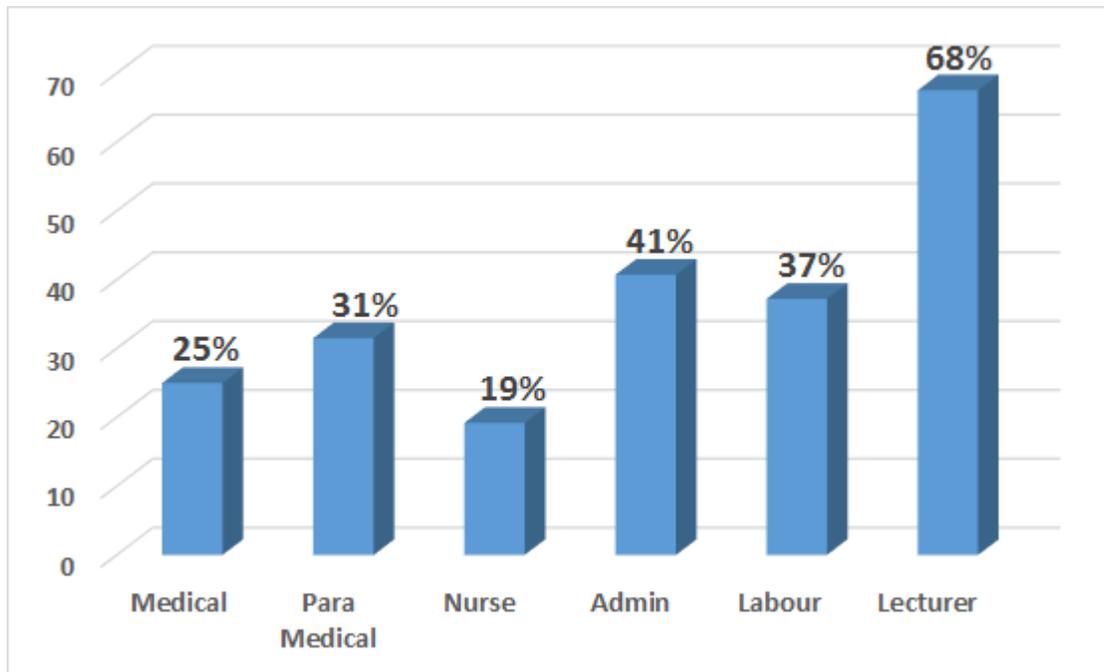
Graph 1: Shortage²¹ of staff in Municipal Corporation of Delhi dispensaries/hospitals



Municipal Corporation of Delhi (MCD) has extremely high shortage of staff in Medical (40%) and para- medical (45%) positions.

²¹ Personnel shortage has been calculated by subtracting the available positions from the sanctioned positions given by all the health units. There are some positions which have been abolished but people who were earlier working on those positions will continue to work till they retire. For such cases, sanctioned positions excluding the number of abolished positions has been considered.

Graph 2: Shortage²² of staff in State Government dispensaries/hospitals



State Government hospitals and dispensaries have extremely high shortage in Lecturer/ academic positions (68%) and administrative (41%) positions.

²² Personnel shortage has been calculated by subtracting the available positions from the sanctioned positions given by all the health units. There are some positions which have been abolished but people who were earlier working on those positions will continue to work till they retire. For such cases, sanctioned positions excluding the number of abolished positions has been considered.

Table 12: Budget²³ Estimated and Actual Expenditure Summary from 2015-16 to 2017-18 (Rs. in crore)

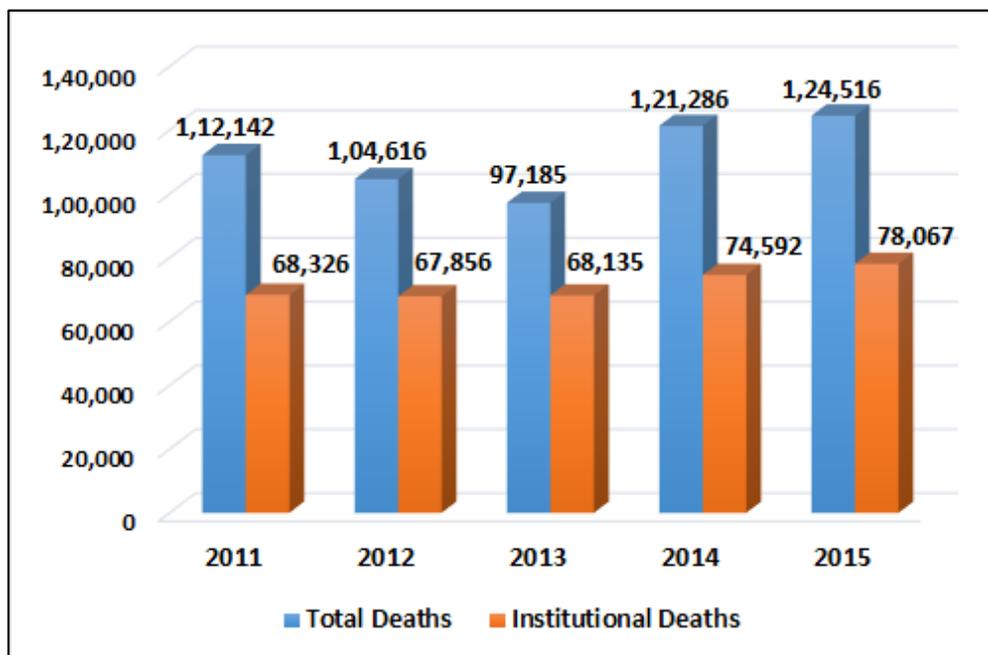
MCD	Budget Estimated 2015-16	Budget Estimated 2016-17	Budget Estimated 2017-18	Actuals Expenditure 2015-16	Utilization of 2015-16 %
NDMC	1051	1041	821	747	71%
EDMC	276	372	376	197	71%
SDMC	404	476	296	332	82%
Total	1732	1889	1493	1276	74%
NCT Delhi state	4787	5259	5736	3634	76%
Grand Total	6519	7148	7229	4910	75%

- Of the total 6,519 crore budget estimate for 2015-16, only 4,910 crores had been spent, which amount to only 75% of the total estimate
- SDMC utilized the maximum (82%) budget as against what was allocated to them followed by Delhi state government which spent 76% of the allocated budget.
- Budget estimate for NDMC in 2015-16 was 1,051 out of which only 71% was utilised.

²³ We are considering only state and MCD budget but there are other agencies which spend money on Health e.g. Centre.

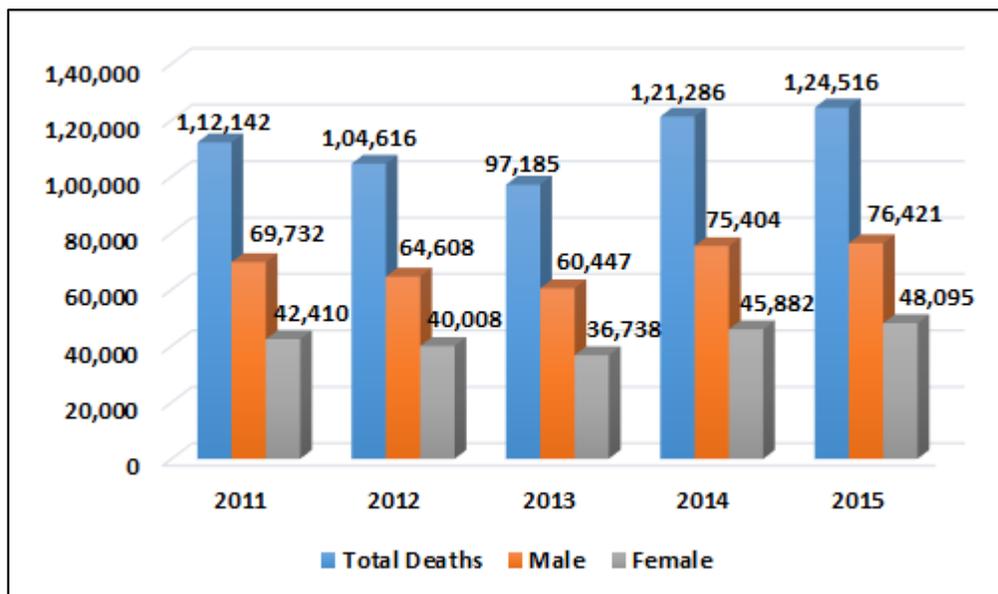
V. Cause of Death Data

Graph 3: Total Deaths and Institutional Deaths



- Total number of deaths in 2013, at 97,185 has hiked by 27,331 in 2015 with a total of 1,24,516 deaths. Institutional deaths from 2013 to 2015 have been steadily increasing
- On an average, only 60% of the total deaths are institutional deaths for the last 15 years i.e. from 2001-2015.

Graph 4: Gender-wise totals deaths in Delhi



- From 2011 to 2015, out of total institutional deaths, number of male deaths is higher than that of female deaths
- In 2015, out of 1,24,516 total institutional deaths 61.37 percent were males.

Table 13: Causes of Institutional deaths²⁴ in Delhi from 2014 to 2015

Disease	2014		2015	
	No. of Deaths	In %	No. of Deaths	In %
Malaria (B50-B54)	160	0.2	164	0.2
Dengue fever (A90)	74	0.1	486	0.6
Tuberculosis (A15-A19)	4,350	5.8	3,635	4.7
Diarrhoea (A09)	146	0.2	157	0.2
Cholera (A00)	65	0.1	43	0.1
Typhoid (A01)	43	0.1	10	0.0
Diabetes (E10-E14)	1,762	2.4	1,356	1.7
Hypertension (I10-I15)	1,962	2.6	3,890	5.0
HIV (B20-B24)	184	0.2	123	0.2
Acute Hepatitis B (B16)	132	0.2	85	0.1
Other viral hepatitis (B15, B17-B19)	21	0.0	36	0.0
Other Cause of deaths	65,693	88.1	68,082	87.2
Total Institutional Deaths	74,592		78,067	

Out of the total 78, 067 institutional deaths in 2015, the highest number of deaths have occurred from hypertension at 3,890, which is an almost a 50% increase for 2014.

²⁴ The report has been prepared exclusively on the basis of data on institutional deaths in Delhi. In domiciliary cases MCCD is not reported, so the readers of this report may bear in mind that this study is confined to 62.70% of the registered deaths during 2015 in Delhi which have occurred in hospitals.

Table 14: Age-wise causes of institutional deaths²⁵ in the year 2015

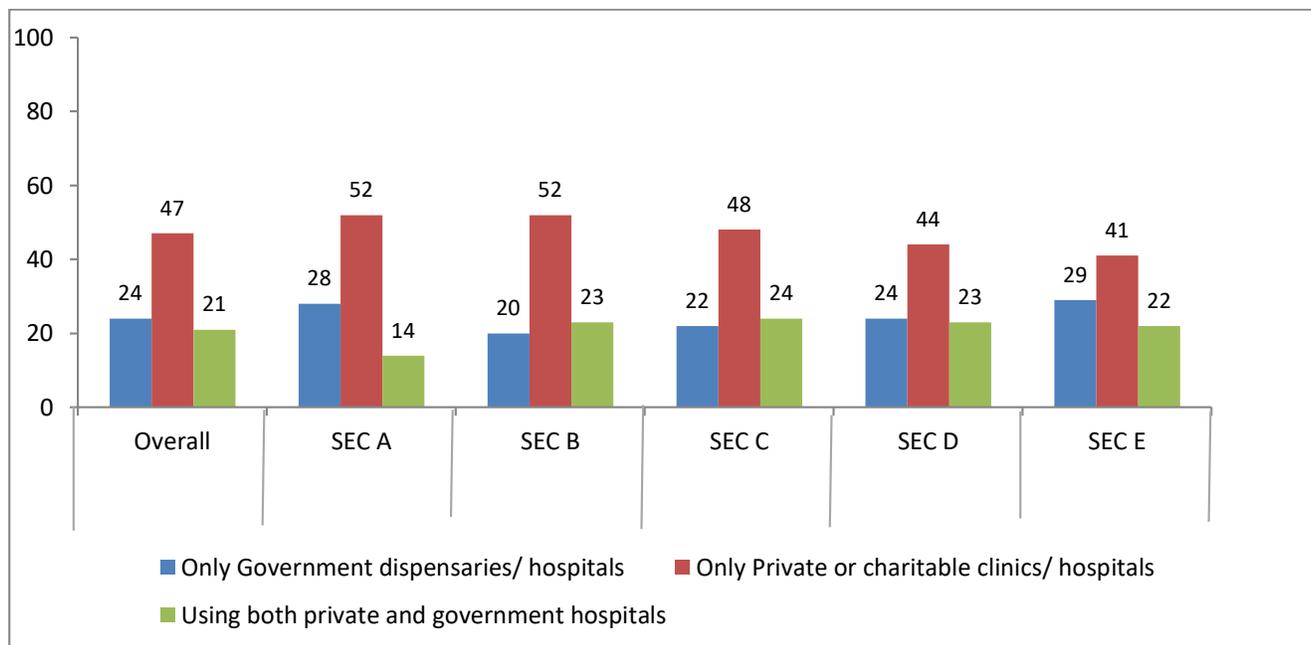
	< 4 Years	5-14 Years	15-24 Years	25-44 Years	45-64 Years	65 & above	Not stated	Total
Malaria (B50-B54)	13	16	40	47	36	12	0	164
Dengue fever (A90)	24	97	80	174	77	34	0	486
Tuberculosis (A15-A19)	98	131	558	1,169	1,182	495	2	3,635
Diarrhoea (A09)	64	7	11	19	36	20	0	157
Cholera (A00)	2	1	1	6	24	9	0	43
Typhoid (A01)	2	1	2	1	2	2	0	10
Diabetes (E10-E14)	1	5	12	100	646	592	0	1,356
Hypertensive (I10-I15)	47	31	138	634	1,690	1,350	0	3,890
HIV (B20-B24)	1	3	4	68	43	4	0	123
Acute Hepatitis B (B16)	7	4	8	29	22	15	0	85
Other viral hepatitis (B15, B17-B19)	1	2	6	14	10	3	0	36
Other diseases	10,146	2,297	4,476	13,233	20,914	16,942	74	68,082
Total	10,406	2,595	53,36	15,494	24,682	19,478	76	78,067

- In 2015, 47.51% of the total institutional deaths due to Tuberculosis are of the working population (15 to 44 years of age)
- 45.22% of the total institutional diarrhoea deaths in Delhi are of children below 14 years of age.

²⁵ The report has been prepared exclusively on the basis of data on institutional deaths in Delhi. In domiciliary cases MCCD is not reported, so the readers of this report may bear in mind that this study is confined to 62.70% of the registered deaths during 2015 in Delhi which have occurred in hospitals.

VI. Citizen Survey Data

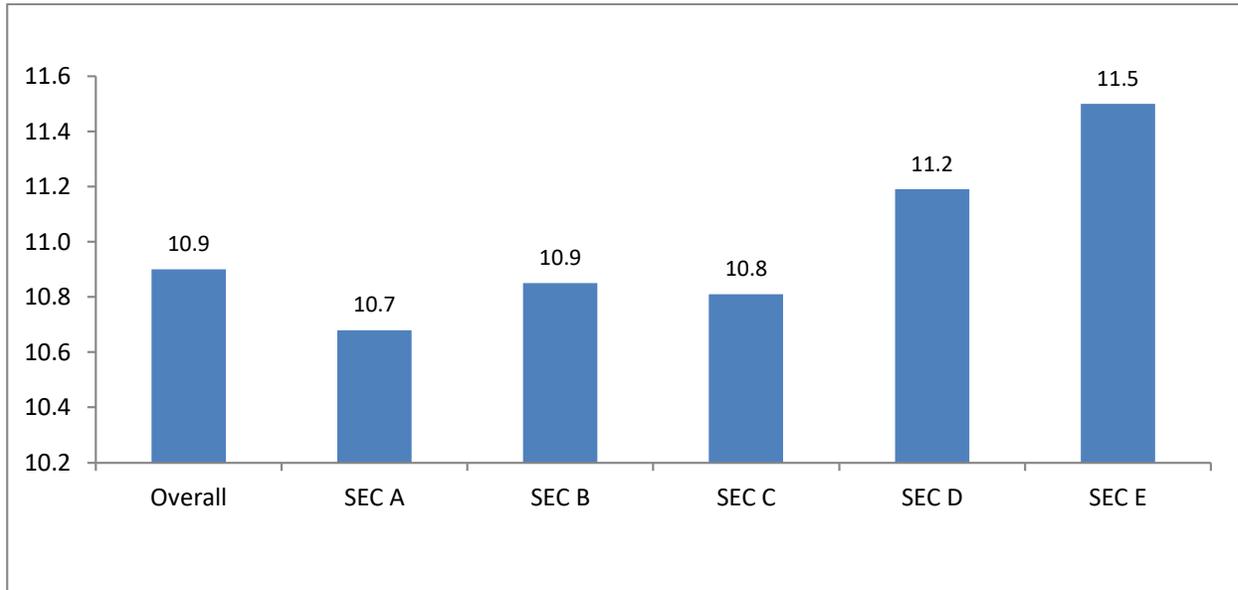
Graph 5: Type of Facilities used by the citizens across different socio-economic classes, 2017²⁶



In 2017, of the overall percentage of citizens across all SECs, only 24% of the 24,301 respondents use government dispensaries/ hospitals. At 29% citizens from the SEC E category are the highest in accessing only government dispensaries and hospitals.

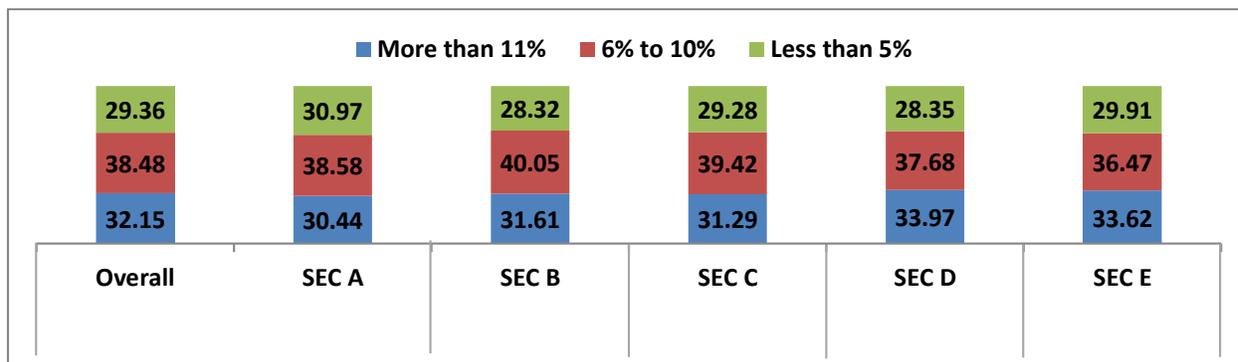
²⁶ As of March 2017

Graph 6: Estimated percentage of Annual Family Income spent on hospital/medical costs across socio-economic classes in 2017



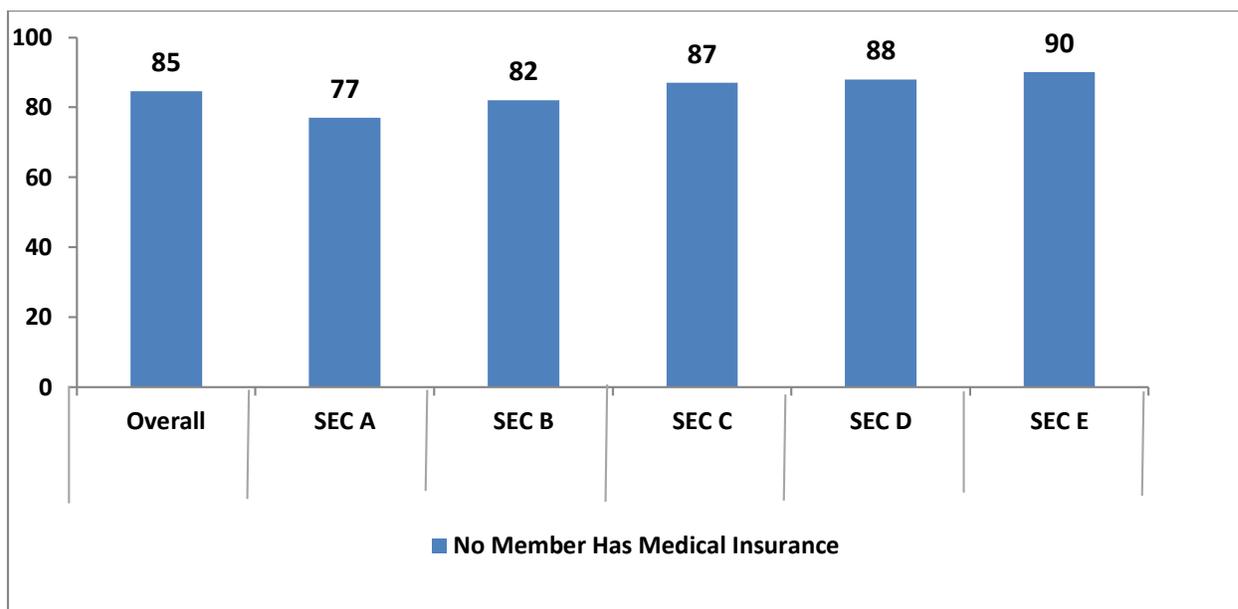
- Families belonging to SEC E spend 11.5% of their annual family income on hospital/medical costs as compared to SEC A which spends 10.7% of their annual family income
- Families from the SEC E category are lowest on the scale of affluence when compared to SEC A which is on the highest end. It is worrisome that SEC E spend 11.5% of their family income on health which is a large portion of their income as compared to SEC A for whom the 10.7% is minor portion.

Graph 7: Estimated percentage of Annual Family Income spent on hospital/medical costs across socio-economic classes in 2017



- 38.48% Delhites spend 6% to 10% of their annual family income on hospital/medical costs
- Across socio economic classes, maximum number of people (33.97%) from SEC D spend more than 11% of their family incomes on hospital/ medical costs.

Graph 8: Medical Insurance across socio-economic class families with no Medical Insurance in 2017



- 85% of Delhi families do not have medical insurance
- From all the socio economic categories, maximum number of families (90%) from SEC E have no family member with a medical insurance.

Table 15: Data²⁷ shown in below table is as per, per capita income from 2016-17

2016-17	
Annual Per Capita Income in Delhi as per GDP	Rs. 3,03,073
Less 35% (accounting for savings and taxation)	Rs.1,96,997
Annual Income per household = Per Capita X 5.02	Rs.9,88,927
Annual Expenditure on Health per household = 10.9%	Rs. 1,07,793
Overall Household Annual Expenditure on Health = Rs. 1,07,793/- X 33,40,538 household	Rs.36,009 crores

As per the Survey of Delhi, 2016-2017, people intimated that annually the average spent on medical costs was 10.9% of their family income. Therefore, the above table translates into Rs. 36,009 Crores spent on hospital/medical costs in Delhi.

²⁷ Economic Survey of Delhi, 2016-17, http://delhi.gov.in/DoIT/DoIT_Planning/ES2016_17_Eng.pdf

Table 16: Estimated cases per 1000 households of Diseases and Ailments across different socio-economic classes in the year 2017

Diseases and Ailments	Malaria	Dengue	Diabetes	Cancer	TB	Diarrhea	Chikungunya	Hypertension
Overall	55	36	66	2	14	5	47	59
SEC A	49	30	64	4	12	4	37	36
SEC B	60	36	50	2	8	6	46	57
SEC C	57	38	65	1	12	7	52	69
SEC D	52	34	72	2	12	3	52	70
SEC E	61	45	79	0	26	8	48	64

- The numbers in the table above refer to the number of cases where testing was conducted and was positive for the disease in question
- It can be seen that SEC E is most affected with Malaria (61), Dengue (45), Diabetes (79) and TB (26).

Table 17: Gender and Age-wise estimated cases per 1000 households of Diseases and Ailments across different socio-economic classes in the year 2017

Diseases and Ailments	Total Estimated Cases					
	Overall	Males	Females	18 - 25 years	26 - 40 years	40+ years
Malaria	55	56	66	59	8	39
Diabetes	66	62	71	9	32	155
Hypertension	59	55	64	16	40	103
TB	14	14	14	12	2	19
Diarrhoea	5	5	8	4	2	6
Cancer	2	2	1	0	0	4
Dengue	36	40	44	46	12	35
Chikungunya	47	59	81	55	21	70

- The numbers in the table above refer to the number of cases where testing was conducted and was positive for the disease in question
- Incidence of lifestyle diseases like Diabetes and Hypertension is higher amongst the 40+ years category
- Women have reported higher number of estimated cases across almost all diseases and ailments including malaria, dengue, hypertension, diarrhoea and chikungunya as compared to men.

Table 18: Type of Facilities used by the citizens by diseases per 1000 households in 2017

	Malaria	Dengue	Chikungunya	Cancer	T.B.
Only Government dispensaries/ hospitals	29	35	25	47	72
Only Private or Charitable clinics/ hospitals	63	58	69	51	22
Using both private and government hospitals	9	6	6	1	7

Note: We asked for information about each member in a household who suffered from a particular disease. As a result, the overlap between private and government hospitals has reduced – this is because, now if two different members of a household visited two different types of hospitals, they are now being covered separately.

Table 19: Estimated Number of Members who have visited Government and Private hospitals in the year 2017

	Malaria	Dengue
Only Government dispensaries/ hospitals	29,941	1,23,947
Only Private or Charitable clinics/ hospitals	64,919	2,05,001
Using both private and government hospitals	8,992	22,364
Total	1,03,852	3,51,312

The information received under RTI from various government institutions shows that in Delhi 6,597 & 6,063 cases of dengue and malaria were reported respectively. While the survey data across Delhi showed that the cases of dengue were as high as 3,51,312 and cases of malaria were 1,03,852.

VII. Deliberations by Municipal Councillors and MLAs on Health Issues

Table 20: Total numbers of Meeting, Attendance and Issue Raised in Medical Relief & Public Health Committee from April 2015 to December 2016

	No. of Meeting	Attendance (in %)	Total Issues Raised
April 2015 to March 2016	27	58%	214
April 2016 to December 2016	17	53%	313

Overall 53% of attendance was registered in all 17 meetings in Medical Relief & Public Health Committee and only 313 issues were raised in those meetings.

Table 21: Issues raised by Medical Relief & Public Health Committee Councillors from April 2015 to December 2016

Issues	No. of issues raised	
	2015-16	2016-17
Budget	1	19
Contaminated Water Supply	0	1
Equipment	4	15
Eradication Programme	1	11
Epidemic/Sensitive Disease	26	45
<i>Dengue/Malaria/Chikungunya</i>	23	44
<i>Diabetes</i>	2	0
<i>Hypertension</i>	0	0
<i>Diarrhoea/Typhoid/Cholera</i>	0	0
<i>Tuberculosis</i>	0	0
Fogging	7	17
Health Related Issues	7	2
Health Service Related	17	11
Health Education Institute	1	0
Health Human Resources Related	25	68
Health Infrastructure	24	36
Issue of Birth/ Death certificates	2	3
License	50	13
Maternity homes/Primary Health Centre (PHC)	0	3
Municipal Corporation Related	18	9
Negligence in duty of Municipal Corporation officials/Staff related	2	2
Nuisance due to stray dogs, monkeys etc.	11	15
Private Health Services	1	1
Schemes/Policies in Health	10	26
Vets Medical Medicines Related	1	12
Treatment Medicines	6	4
Total	214	313

- In 2016-17, 44 issues were raised by the councillors on Dengue/Malaria/Chikungunya respectively
- Total Diarrhoea cases registered in Delhi for 2015 and 2016 is 5,63,110 and 6,13,234 respectively while Medical Relief & Public Health Committee councillors did not ask a single question on diarrhoea.
- The diabetes cases registered in Delhi are as high as 3,70,965 while our councillors have raised zero issues on the matter.

Table 22: Health issues raised by MLAs from 24th February 2015 to 15th November 2016

Issues	No. of issues raised
Cemeteries/Crematorium related	3
Contaminated Water Supply	10
Eradication Programme	2
Epidemic/Sensitive Disease	41
<i>Dengue/Malaria/Chikungunya</i>	16
<i>Diabetes</i>	1
<i>Hypertension</i>	0
<i>Diarrhoea/Typhoid/Cholera</i>	0
<i>Tuberculosis</i>	0
Dispensary/Municipal Hospital/State Hospital	3
Health Related Issues	15
Health Service Related	24
Health Education Institute	1
Health Human Resources Related	17
Health Infrastructure	40
Maternity homes/Primary Health Centre (PHC)	2
Pollution	1
Private Health Services	1
Private Hospital/Clinics	2
Schemes/Policies in Health	5
Treatment Medicines	10
Total	177

The diabetes cases registered in 2016 are as high as 3,87,215 while our MLAs have raised only 1 issue on this in two years from 24th February 2015 to 15th November 2016.

Table 23: Number of Issues raised on health by MLAs from 24th February 2015 to 15th November 2016

Name of MLAs	Constituency No.	Const. Name	Party	No. of issues raised
Adarsh Shastri	33	Dwarka	AAP	9
Ajay Dutt	48	Ambedkar Nagar	AAP	5
Ajesh Yadav	5	Badli	AAP	1
Akhilesh Pati Tripathi	18	Model Town	AAP	4
Alka Lamba	20	Chandi Chowk	AAP	9
Amanatullah Khan	54	Okhla	AAP	2
Anil Kumar Bajpai	61	Gandhi Nagar	AAP	4
Avtar Singh	51	Kalkaji	AAP	5
Bhavana Gaur	37	Palam	AAP	10
Devinder Sehrawat	36	Bijwasan	AAP	2
Dinesh Mohaniya	49	Sangam Vihar	AAP	0
Fateh Singh	68	Gokalpur	AAP	3
Girish Soni	26	Madipur	AAP	4
Gulaab Singh	34	Matiala	AAP	0
Hazari Lal Chauhan	24	Patel Nagar (SC)	AAP	0
Jagdeep Singh	28	Hari Nagar	AAP	3
Jagdish Pradhan	69	Mustafabad	BJP	17
Jarnail Singh	27	Rajouri Garden	AAP	2
Jarnail Singh	29	Tilak Nagar	AAP	0
Kailash Gahlot	35	Najafgarh	AAP	1
Kartar Singh Tanwar	46	Chhatarpur	AAP	1
Madan Lal	42	Kasturba Nagar	AAP	0
Mahinder Yadav	31	Vikaspuri	AAP	0
Manoj Kumar	56	Kondli	AAP	0
Mohd. Ishraque	65	Sheelampur	AAP	0
Mohinder Goyal	6	Rithala	AAP	3
Narayan Dutt Sharma	53	Badapur	AAP	2
Naresh Balyan	32	Uttam Nagar	AAP	1
Naresh Yadav	45	Mehrauli	AAP	3
Nitin Tyagi	58	Laxmi Nagar	AAP	3
Om Prakash Sharma	59	Vishwas Nagar	BJP	14
Pankaj Kant Singhal (Puskar)	3	Timarpur	AAP	2
Parmila Tokas	44	R K Puram	AAP	1
Pawan Kumar Sharma	4	Adarsh Nagar	AAP	3
Prakash_47	47	Deoli (SC)	AAP	0
Praveen Kumar	41	Jangpura	AAP	0
Raghuvinder Shokeen	11	Nangloi Jat	AAP	0

Name of MLAs	Constituency No.	Const. Name	Party	No. of issues raised
Rajendra Pal Gautam	63	Seema puri	AAP	11
Rajesh Gupta	17	Wazirpur	AAP	2
Rajesh Rishi	30	Janakpuri	AAP	2
Raju (Dhigan)	55	Trilokpuri	AAP	1
Rakhi Birla	12	Mangol Puri (SC)	AAP	1
Rituraj Govind	9	Kirari	AAP	0
S. K. Bagga	60	Krishna Nagar	AAP	5
Sahi Ram	52	Tuglakabad Nct	AAP	0
Sanjeev Jha	2	Burari	AAP	2
Sarita Singh	64	Rohtas Nagar	AAP	0
Saurabh Bharadwaj	50	Greater Kailash	AAP	0
Sharad Kumar	1	Narela	AAP	1
Shiv Charan Goel	25	Moti Nagar	AAP	3
Shri Dutt Sharma	66	Ghonda	AAP	4
Som Dutt	19	Sadar Bazar	AAP	2
Somnath Bharti	43	Malviya Nagar	AAP	2
Sukhvir Singh	8	Mundka	AAP	0
Ved Parkash	7	Bawana (SC)	AAP	9
Vijender Garg Vijay	39	RAJINDER NAGAR	AAP	5
Vijender Kumar (Gupta)	13	Rohini	BJP	13
Vishesh Ravi	23	Karol Bagh	AAP	0
Total				177

- Out of 58 MLAs, 17 MLAs have not raised a single issue on Health
- Jagdish Pradhan (17) has raised the maximum number of issues on Health.

Table 24: Zone-wise estimated proportion of usage of various Dispensaries/Hospitals

MCD Zone	Provisional Population 2011	No. Government Dispensaries	No. Government Hospital	Density of Government dispensaries to Population
Shahdara North	34,00,000	40	6	44,156
Shahdara South		37	3	
City	52,00,000	9	6	35,135
Narela		33	2	
Karol Bagh		20	4	
Rohini		32	4	
Sadar Paharganj		15	0	
Civil Lines		39	8	
Central	59,00,000	30	1	50,000
West		27	5	
South		22	3	
Najafgarh		39	2	
New Delhi Municipal Council	2,57,803	4	0	64,451
Grand Total	1,47,57,803	347	44	37,744

Table 25: Zone- wise Malaria Data

Corporation	Zone	Population 2011	2014	2015	2016
EDMC	Shahdara North	34,00,000	129	2,859	1,197
	Shahdara South		1,293	631	191
NDMC	City	52,00,000	109	22	139
	Rural Narela		135	194	392
	Karol Bagh		440	2,757	1,042
	Rohini		136	341	1,807
	Sadar Paharganj		0	0	0
	Civil Lines		4,595	677	993
SDMC	Central	59,00,000	10	49	13
	West		55	2,140	204
	South		145	2	19
	Najafgarh		821	346	65
New Delhi Municipal Council		2,57,803	0	7	1
Total		1,47,57,803	7,868	10,025	6,063

In 2016, out of 6,063 malaria cases, 1,807 were registered in Rohini zone. This amounts to 30% of the total malaria cases registered.

Table 26: Zone- wise Dengue Data

Corporation	Zone	Population 2011	2014	2015	2016
EDMC	Shahdara North	34,00,000	22	962	597
	Shahdara South		22	3,921	410
NDMC	City	52,00,000	9	220	98
	Rural Narela		50	193	47
	Karol Bagh		23	2,423	1,953
	Rohini		125	8,442	32
	Sadar Paharganj		0	0	0
	Civil Lines		158	2,598	374
SDMC	Central	59,00,000	0	124	25
	West		67	1,956	325
	South		192	4,396	2,734
	Najafgarh		6	311	2
New Delhi Municipal Council		2,57,803	0	0	0
Total		1,47,57,803	674	25,546	6,597

- Highest number of Dengue cases were registered in 2015 (25,546)
- Dengue cases increased by 38 times from 2014 to 2015 and then saw a reduction of 4 times in 2016.

Table 27: Zone- wise Tuberculosis Data

Corporation	Zone	Population 2011	2014	2015	2016
EDMC	Shahdara North	34,00,000	7,402	6,077	5,252
	Shahdara South		9,476	7,214	2,475
NDMC	City	52,00,000	203	421	152
	Rural Narela		4,809	4,438	4,073
	Karol Bagh		4,143	6,809	7,378
	Rohini		20,968	31,225	22,284
	Sadar Paharganj		940	973	2,030
	Civil Lines		13,592	5,009	5,280
SDMC	Central	59,00,000	2,101	5,943	6,230
	West		3,763	3,924	4,129
	South		3,436	5,758	3,548
	Najafgarh		2,257	5,415	5,336
New Delhi Municipal Council		2,57,803	6	2	2
Total		1,47,57,803	73,096	83,208	68,169

In 2016, out of 68,169 Tuberculosis cases, maximum number of cases were registered in Rohini zone (22,284), followed by Karol Bagh zone (7,378 cases) and Central zone (6,230 cases).

Table 28: Zone- wise Diarrhoea Data

Corporation	Zone	Population 2011	2014	2015	2016
EDMC	Shahdara North	34,00,000	37,107	29,812	31,708
	Shahdara South		52,635	42,867	42,095
NDMC	City	52,00,000	7,299	8,725	11,688
	Rural Narela		1,13,169	1,30,542	1,40,690
	Karol Bagh		36,995	36,502	26,764
	Rohini		76,612	62,461	76,924
	Sadar Paharganj		17,580	32,052	35,199
	Civil Lines		52,782	58,896	67,783
SDMC	Central	59,00,000	41,814	32,958	27,376
	West		83,786	62,093	75,798
	South		28,373	22,192	23,183
	Najafgarh		32,279	43,639	61,906
New Delhi Municipal Council		2,57,803	1,721	1,677	1,366
Total		5,80,096	5,82,152	5,64,416	6,22,480

In 2016, out of 6,22,480 diarrhoea cases, maximum number of cases were registered in Rural Narela zone (1,40,690), followed by Rohini zone (76,924 cases) and West zone (75,798 cases).

Table 29: Zone- wise Cholera Data

Corporation	Zone	Population 2011	2014	2015	2016
EDMC	Shahdara North	34,00,000	4	1,203	169
	Shahdara South			2,221	4,247
NDMC	City	52,00,000	74	158	69
	Rural Narela		323		259
	Karol Bagh		55	3	109
	Rohini		501	112	226
	Sadar Paharganj				32
	Civil Lines		1,028	2,223	2,167
SDMC	Central	59,00,000	400		
	West		5	3	46
	South				3
	Najafgarh		6	1	1
New Delhi Municipal Council		2,57,803			
Total		1,47,57,803	2,396	5,924	7,328

In 2016, out of 7,328 Cholera cases, maximum number of cases were registered in Shahdara South zone (4,247) cases, followed by Civil Lines zone (2,167) cases.

Table 30: Zone- wise Typhoid Data

Corporation	Zone	Population 2011	2014	2015	2016
EDMC	Shahdara North	34,00,000	2,274	6,722	5,746
	Shahdara South		856	1,267	1,847
NDMC	City	52,00,000	235	7,267	494
	Rural Narela		2,438	1,111	1,185
	Karol Bagh		3,049	7,421	4,665
	Rohini		13,973	16,076	17,753
	Sadar Paharganj		23	2,665	55
	Civil Lines		5,934	22,059	5,946
SDMC	Central	59,00,000	384	1,129	789
	West		3,235	2,277	4,613
	South		1,799	1,951	1,990
	Najafgarh		8,618	7,945	9,486
New Delhi Municipal Council		2,57,803	48	38	20
Total		1,47,57,803	42,866	77,928	54,589

In 2016, out of 54,589 Typhoid cases, maximum number of cases were registered in Rohini zone (17,753), followed by Najafgarh zone (9,486 cases) and Civil Lines zone (5,946 cases).

Table 31: Zone- wise Diabetes Data

Corporation	Zone	Population 2011	2014	2015	2016
EDMC	Shahdara North	34,00,000	21,498	45,501	42,414
	Shahdara South		33,455	26,981	25,827
NDMC	City	52,00,000	9,422	13,993	20,978
	Rural Narela		52,751	46,848	50,115
	Karol Bagh		34,766	27,175	38,427
	Rohini		56,399	56,124	73,112
	Sadar Paharganj		15,472	31,211	23,289
	Civil Lines		38,291	39,798	49,639
SDMC	Central	59,00,000	8,456	3,790	8,258
	West		41,553	26,173	31,303
	South		5,801	5,080	9,117
	Najafgarh		17,767	16,821	19,745
New Delhi Municipal Council		2,57,803	3,557	1,022	304
Total		1,47,57,803	3,39,188	3,40,517	3,92,528

In 2016, out of 3,92,528 Diabetes cases, maximum number of cases were registered in Rohini zone (73,112), followed by Rural Narela zone (50,115 cases) and Civil Lines zone (49,639 cases).

Table 32: Zone- wise Hypertension Data

Corporation	Zone	Population 2011	2014	2015	2016
EDMC	Shahdara North	34,00,000	13,261	32,318	30,956
	Shahdara South		32,699	24,350	26,387
NDMC	City	52,00,000	12,044	13,785	22,069
	Rural Narela		72,437	59,846	55,674
	Karol Bagh		29,901	23,235	24,922
	Rohini		52,498	43,958	65,932
	Sadar Paharganj		15,494	28,880	24,491
	Civil Lines		35,669	37,505	47,136
SDMC	Central	59,00,000	11,596	6,221	7,136
	West		48,117	27,669	35,283
	South		4,195	5,144	5,746
	Najafgarh		13,970	17,642	15,113
New Delhi Municipal Council		2,57,803	4,975	1,957	598
Total		1,47,57,803	3,46,856	3,22,510	3,61,443

In 2016, out of 3,61,443 Hypertension cases, maximum number of cases were registered in Rohini zone (65,932), followed by Rural Narela zone (55,674 cases) and Civil Lines zone (47,136 cases).

Annexure 1 –List of Municipal & Government hospitals/Dispensaries

Sr. no.	Dispensary Name	Code ²⁸	Month received out of 36	Sr. no.	Dispensary Name	Code	Month received out of 36
Central Zone				Rohini Zone			
1	Jangpura Polyclinic	M	0	1	Nangloi Polyclinic	M	36
2	Kalkaji Colony Hospital	M	0	2	Lala Hans Raj Gupta, Rohini Polyclinic	M	33
3	Nizamuddin Polyclinic	M	0	3	Pooth Kalan Dispensary	M	36
4	Madanpur Khadar Allopathic Dispensary	M	0	4	Singhalpur Dispensary	M	31
5	Sidharth Basti allopathic Dispensary	M	0	5	Jwala heri Dispensary	M	36
6	Sarai kalen Khan Allopathic Dispensary	M	0	6	Chowdhary Deshraj Chest Clininc	M	36
7	Badarpur Polyclinic	M	0	7	Shakurpur Dispensary	M	36
8	Lajpat Nagar Colony Hospital	M	12	8	Chest Clinic Shahbad Dairy	M	9
9	Chest Clinic TB Hospital, Nehru Nagar	M	24	9	DGD Jawalपुरi	S	24
10	Defence Colony Urban Health Centre	M	12	10	Seed PUHC Chander Vihar	S	36
11	DGD Delhi Sachiwalaya	S	36	11	Seed PUHC Nihal Vihar	S	36
12	DGD Sarai Kale Khan	S	24	12	DGD Paschim Puri	S	36
13	DGD Sunlight Colony	S	24	13	DGD Paschim Vihar	S	33
14	Seed PUHC Sangam Vihar B-Block	S	36	14	Seed PUHC Laxmi Vihar	S	36
15	DGD Sangam Vihar D-1/36	S	31	15	Seed PUHC Aman Vihar	S	36
16	Seed PUHC Tughlakabad	S	36	16	DGD Kirari	S	36
17	Seed PUHC Sangam Vihar F2/474	S	36	17	Seed PUHC Prem Nagar III	S	34
18	Seed PUHC Sangam Vihar D-5/7	S	31	18	Seed PUHC Prem Nagar II	S	36
19	Seed PUHC Sangam Vihar H-16/413	S	24	19	Seed PUHC Inder Enclave - II	S	36
20	DGD Kalkaji	S	36	20	DGD Sultanपुरi	S	36
21	DGD Srinivas Puri	S	31	21	Polyclinic Sector-2, Rohini	S	36
22	DGD Garhi	S	36	22	DGD Mangolपुरi	S	36
23	Seed PUHC Pul Prahladपुर	S	36	23	Polyclinic Sector-18, Rohini	S	36
24	Seed PUHC Lal Quan	S	36	24	DGD Sector-13, Rohini	S	36
25	DGD Molarband	S	36	25	DGD Prashant Vihar	S	36
26	Seed PUHC Meetha Pur Extn	S	24	26	DGD Rohini Court	S	36
27	DGD Tajपुर	S	36	27	DGD Sector-8, Rohini	S	36
28	DGD Batla House	S	36	28	Polyclinic Pitam pura	S	36

²⁸ While M stands for municipal dispensary, S stands for state dispensary.

Sr. no.	Dispensary Name	Cod e	Month received out of 36	Sr. no.	Dispensary Name	Cod e	Month received out of 36
29	Seed PUHC Jasola Village	S	32	29	DGD Shalimar Bagh BB-Block	S	36
30	Seed PUHC Abul Fazal	S	5	30	DGD Shalimar Bagh AC- Block	S	36
City Zone				31	DGD Saraswati Vihar	S	36
1	Lal Kuan Dispensary	M	36	32	Seed PUHC Budh Vihar	S	36
2	Lahori Gate Dispensary	M	36	Sadar Paharganj Zone			
3	DGD Tis-Hazari	S	36	1	Sadar Bazar Polyclinic	M	36
4	DGD Tis-Hazari-FAP	S	36	2	Depty Ganj (F) Dispensary	M	36
5	DGD Gali Guliyan	S	35	3	Bara Hindu Rao Dispensary	M	21
6	DGD Dujana House	S	35	4	Pahar Ganj Dispensary	M	36
7	DGD Ajmeri Gate	S	34	5	Goenka Road Dispensary	M	24
8	DGD Suiwalan	S	36	6	Chest Clinic Jhandewalan	M	0
9	DGD Hindustani Dawakhana	S	34	7	Pratap Nagar Dispensary	M	12
Civil Lines Zone				8	VD Clinic & Dispensary	M	24
1	Balakram hospital	M	19	9	Chest Clinic SPM Marg	M	36
2	Atma Ram Gupta Polyclinic	M	36	10	DGD Sarai Rohilla	S	36
3	Nimri Polyclinic	M	36	11	DGD Gali Samosan	S	35
4	Burari Polyclinic	M	30	12	DGD Nabi Karim	S	36
5	Indra Nagar Dispensary	M	24	13	DGD Chamelian Road	S	34
6	Badli Dispensary	M	36	14	DGD Pahar Ganj	S	36
7	Roop Nagar Dispensary	M	33	15	DGD Motia Khan	S	35
8	Kashmere Gate Dispensary	M	24	Shahdara North Zone			
9	Siraspur Dispensary	M	20	1	Allopathic Dispensary, Yamuna Vihar	M	19
10	Azadpur Dispensary	M	36	2	Allopathic Dispensary, Karawal Nagar	M	31
11	UHC/ Dhaka	M	24	3	Chest Clinic Shahdara	M	36
12	Indra Gandhi PC	M	24	4	DGD Old Seemapuri	S	34
13	DGD Jahangirpuri B Block	S	36	5	DGD New Seemapuri	S	34
14	DGD Gurmandi	S	36	6	DGD Ashok Nagar	S	36
15	DGD Model Town	S	34	7	DGD Durgapuri	S	23
16	Seed PUHC Samta Vihar	S	31	8	DGD Babarpur	S	35
17	DGD Mukandpur	S	36	9	DGD Maujpur	S	36
18	Seed PUHC Nathupura	S	33	10	Seed PUHC Kabir Nagar	S	16
19	DGD Jharoda Majra	S	36	11	Seed PUHC Amar Colony	S	33
20	DGD Timarpur	S	34	12	DGD Saboli	S	34
21	Seed PUHC Jagatpur	S	33	13	DGD Jhilmil	S	16
22	DGD Wazirabad	S	36	14	DGD West Jyoti Nagar	S	27
23	DGD Majnu Ka Tila	S	36	15	Polyclinic Gautam puri	S	23
24	DGD Old Sectt	S	36	16	DGD Seelampur	S	34

Sr. no.	Dispensary Name	Code	Month received out of 36	Sr. no.	Dispensary Name	Code	Month received out of 36
25	DGD Pul Bangash	S	34	17	Seed PUHC Zafrabad-1	S	34
26	DGD Gulabi Bagh	S	36	18	Seed PUHC Brahmpuri	S	35
27	DGD Shakurpur	S	36	19	DGD Arvind Nagar	S	36
28	DGD Wazirpur J.J.Colony	S	36	20	DGD Yamuna Vihar	S	36
29	Polyclinic Wazirpur, PH-III	S	36	21	UHC Gokulpuri	S	33
30	Polyclinic Keshavpuram B-4 Block	S	36	22	DGD Johripur	S	33
31	DGD Keshavpuram C-7 Block	S	36	23	Seed PUHC Bhagirathi Vihar	S	33
32	DGD As hok Vihar, H-Block	S	36	24	DGD Bhagirathi Vihar	S	32
33	DGD Wazirpur Industrial Area	S	36	25	Seed PUHC Old Mustafabad	S	35
34	DGD Sangam Park	S	36	26	Seed PUHC New Mustafabad	S	36
35	DGD Mukhmailpur	S	36	27	Seed PUHC Shiv Vihar Phase -II	S	35
36	DGD Jahangirpuri H Block	S	30	28	Seed PUHC Shiv Vihar Phase -V:	S	36
37	Seed PUHC Swarup Nagar	S	36	29	DGD Dayalpur	S	28
38	DGD Bhalawa JJ Colony	S	36	30	Seed PUHC Nehru Vihar	S	33
39	DGD Bhalaswa Dairy	S	28	31	Seed PUHC Chandu Nagar	S	36
40	DGD Kamla Nagar	S	15	32	DGD Khajoori Khas	S	29
Karol Bagh Zone				33	Seed PUHC Sonia Vihar	S	36
1	Ramesh Nagar Polyclinic	M	36	34	Seed PUHC Sonia Vihar 4.5 Pushta	S	35
2	Dev Nagar Dispensary	M	36	35	Seed PUHC Chauhan Patti	S	32
3	Kirti Nagar Dispensary	M	36	36	Seed PUHC Shaheed Bhagat Singh	S	36
4	Old Rajinder Nagar Dispensary	M	24	37	Seed PUHC Rajiv Nagar	S	33
5	Naraina Dispensary	M	24	38	DGD Shiv Vihar Tiraha	S	34
6	Chest Clinic Moti Nagar	M	36	39	DGD Nand Nagri Extension	S	36
7	WEA	M	36	40	DGD Nand Nagri	S	12
8	DGD Baljit Nagar	S	36	Shahdara South Zone			
9	DGD Prem Nagar	S	36	1	Allopathic Dispensary, EDMC HQ	M	0
10	DGD New Ranjit Nagar	S	36	2	Allopathic Dispensary, Brahmpuri	M	0
11	DGD Ranjit Nagar	S	36	3	Allopathic Dispensary, Harsh Vihar	M	0
12	Seed PUHC Sudarshan Park	S	36	4	Allopathic Dispensary, Khureji Khas	M	0
13	DGD Inderlok	S	35	5	Allopathic Dispensary, Patparganj	M	12
14	DGD Anand Parbat	S	36	6	Allopathic Dispensary, Kasturba Nagar	M	12
15	DGD Shahzada Bagh	S	35	7	Polyclinic Shahdara	M	12
16	DGD Regharpura	S	34	8	Dr. SPM Chest Hospital	M	28
17	DGD Tank Road	S	34	9	DGD Bhola Nath Nagar	S	33

Sr. no.	Dispensary Name	Code	Month received out of 36	Sr. no.	Dispensary Name	Code	Month received out of 36
18	DGD Jai Dev Park	S	36	10	DGD Mukesh Nagar	S	33
19	DGD Budh Nagar	S	36	11	DGD Dilshad Garden	S	34
20	DGD Inderpuri, Near Mother Dairy	S	36	12	DGD Kanti Nagar	S	20
Najafgarh Zone				13	DGD Krishna Nagar	S	6
1	Bijwasan Dispensary	M	0	14	DGD Vivek Vihar	S	24
2	Bijwasan Chest Clinic	M	36	15	DGD Mayur Vihar	S	35
3	Gumenhera Allopathic Dispensary	M	24	16	DGD Trilok Puri	S	36
4	Issapur Allopathic Dispensary	M	24	17	DGD Himmat Puri	S	36
5	Daulatpur Allopathic dispensary	M	36	18	Seed PUHC New Ashok Nagar	S	36
6	DGD Malik Pur Village	S	32	19	DGD Kalyan Puri	S	35
7	DGD Mundela Khurd	S	23	20	DGD Vasundhara Enclave	S	36
8	DGD Issapur	S	21	21	DGD M ayur Vihar, PH-III (Kondli)	S	36
9	DGD Bamnoli	S	27	22	Seed PUHC Rajbir Colony	S	36
10	DGD Kapashera	S	9	23	DGD Shashi Garden	S	36
11	DGD Sagarpur	S	36	24	DGD Bank Enclave	S	35
12	DGD Shahbad Md. Pur	S	36	25	DGD Laxmi Nagar	S	36
13	Seed PUHC Smalkha	S	36	26	DGD Mandawali Fazal Pur	S	36
14	DGD Mahipal Pur	S	31	27	DGD I.P. Extension	S	36
15	DGD Pindwala Kalan	S	29	28	Seed PUHC Ghazipur	S	36
16	DGD Rawta	S	30	29	DGD Jagat Puri	S	36
17	DGD Chhawla	S	27	30	DGD Geeta Colony	S	36
18	DGD Kanganheri Village	S	17	31	DGD New Lahore Shastri Nagar	S	31
19	DGD Jhatikara	S	29	32	DGD Chander Nagar	S	36
20	DGD Nangli	S	5	33	DGD Pandav Nagar	S	36
21	Seed PUHC Ranaji Enclave	S	21	34	DGD Karkardooma	S	33
22	Seed PUHC Qutub Vihar	S	22	35	DGD Suraj Mal Vihar	S	32
23	DGD Dwarka Sector-17	S	29	36	DGD Karkardooma Court Complex	S	17
24	DGD Dwarka Sector-14	S	20	37	Seed PUHC, Jheel	S	28
25	Seed PUHC Kakrola	S	22	South Zone			
26	DGD Dwarka Sector – 12	S	16	1	Primary Health Centre	M	3
27	DGD Dwarka Sector – 19	S	31	2	Madangir Allopathic Dispensary	M	3
28	DGD Dwarka Sector – 10	S	30	3	Masjid Moth Polyclinic	M	3
29	DGD Dwarka Court	S	19	4	Primary Health Centre Mehrauli	M	3
30	DGD Dindarpur Village	S	27	5	Munirka Polyclinic	M	3
31	Seed PUHC Dharpura	S	20	6	DGD Begum pur	S	36
32	Seed PUHC Gopal Nagar	S	9	7	DGD Saket	S	31

Sr. no.	Dispensary Name	Code	Month received out of 36	Sr. no.	Dispensary Name	Code	Month received out of 36
33	DGD Jharoda Kalan	S	27	8	DGD Ber Sarai	S	36
34	DGD Dhansa	S	31	9	Seed PUHC Neb Sarai	S	36
35	DGD Raj Nagar Part-II	S	31	10	DGD Chatterpur	S	31
36	DGD Mangla Puri	S	32	11	DGD Jonapur	S	36
37	DGD Dwarka Sector – 2	S	30	12	Seed PUHC Aya Nagar	S	36
38	SPUHC Sitapuri	S	19	13	Seed PUHC Sangam Vihar	S	36
39	SPUHC Salhapur Khera	S	15	14	DGD Sangam Vihar	S	32
Narela Zone				15	DGD Khanpur	S	36
1	Karala Polyclinic	M	36	16	Seed PUHC Jawahar Park	S	36
2	Narela Polyclinic	M	12	17	DGD Dakshinpuri	S	36
3	Ram Roop Health Kanjhawala Polyclinic	M	36	18	DGD Madangir	S	36
4	Alipur Polyclinic	M	36	19	DGD Moti Bagh (Shastri Market)	S	36
5	Bawana Polyclinic	M	36	20	DGD Rajokri	S	36
6	Begum Vihar Dispensary	M	36	21	DGD Saket Court Complex	S	32
7	Hamidpur Dispensary	M	36	22	DGD Chirag Delhi	S	36
8	Singhu Dispensary	M	36	South Zone			
9	Mungeshpur Dispensary	M	36	1	Tilak Nagar Colony Hospital	M	36
10	Chest Clinic Narela	M	36	2	Uttam Nagar Dispensary	M	24
11	DGD Tikri Kalan	S	36	3	Rajouri Garden Allopathic Dispensary	M	36
12	DGD Mundka	S	36	4	Subhash Nagar Allopathic Dispensary	M	36
13	DGD Hiran Kudna	S	36	5	Maharaja Agarsen Polyclinic	M	24
14	DGD Nangloi	S	36	6	DGD Raghubir Nagar	S	36
15	Seed PUHC Kam ruddin Nagar	S	36	7	DGD Madipur	S	36
16	Seed PUHC Nilothi	S	36	8	DGD Chowk handi	S	36
17	DGD Punjabi Bagh, Narela	S	36	9	DGD Khyala	S	31
18	DGD Holambi Kalan Ph-2	S	30	10	DGD Nangli Jalib	S	36
19	DGD Khera Kalan	S	34	11	DGD Tilak Vihar	S	36
20	DGD Sannoath	S	36	12	DGD Janak puri (A-4A)	S	36
21	DGD Bhorgarh	S	36	13	DGD Janak puri(C4B)	S	36
22	DGD Bakhtawarpur	S	35	14	DGD Tihar Jail Complex	S	36
23	DGD Bawana	S	36	15	DGD Jeevan Park	S	36
24	DGD Harewali	S	35	16	DGD Ram Dutt Enclave	S	34
25	DGD Katewara	S	36	17	DGD Tilangpur Kotla	S	36
26	DGD Darya Pur Kalan	S	35	18	DGD Bakkarwala	S	36
27	DGD Nizam pur	S	36	19	DGD Baprolla	S	36
28	DGD Madan Pur Dabas	S	36	20	DGD Vikas puri	S	36
29	DGD Majra Dabas	S	36	21	DGD Shiv Vihar	S	36

Sr. no.	Dispensary Name	Code	Month received out of 36	Sr. no.	Dispensary Name	Code	Month received out of 36
30	Seed PUHC Begum pur	S	36	22	DGD Nawada	S	36
31	DGD Jaunti	S	36	23	Seed PUHC Mohan Garden	S	36
32	DGD Savda Ghevra	S	36	24	Seed PUHC Mansa Ram Park	S	32
33	DGD Rani Khera	S	36	25	DGD Nangal Raya	S	36
New Delhi Municipal Council Zone				26	DGD Mayapuri	S	36
1	DGD Trade and Taxes, ITO	S	11	27	DGD Basant Gaon	S	36
2	DGD High Court	S	24				
3	DGD Patiala House Court	S	28				
4	DGD Supreme Court	S	17				

Sr. no.	Dispensary Name	Code ²⁹	Month received out of 36	Sr. no.	Dispensary Name	Code	Month received out of 36
Central Zone				Rohini Zone			
1	Nehru Homeopathic medical college	S	24	1	Attar Sain Jain Hospital	S	36
City Zone				2	Baba Saheb Ambedkar	S	36
1	Kasturba Hospital	M	36	3	Bhagwan Mahaveer	S	33
2	Girdharil Maternity Hospital	M	36	4	Sanjay Gandhi memorial Hospital	S	15
3	Govind Ballabh pant Hospital (GBPH)	S	31	Shahdara North Zone			
4	Guru Nanak Eye Centre	S	24	1	Swami Dayanand Hospital	M	36
5	Lok Nayak Hospital	S	36	2	Delhi State Cancer Institution	S	36
6	Maulana Azad Inst of dental Sciences	S	20	3	Guru Teg Bahadur	S	0
Civil Lines Zone				4	I.H.B.A.S.	S	36
1	Rajan Babu TB Hospital	M	36	5	Jag parvesh Chander Hospital	S	36
2	MVID Hospital	M	29	6	rajiv gandhi Super Speciality Hospital	S	36
3	Hindu rao Hospital	M	31	7	Health Centre cum Maternity centre	S	27
4	Aruna Asaf Ali Govt. Hospital	S	31	Shahdara South Zone			
5	Babu Jagjivan Ram	S	33	1	Chacha nehru Bal Chikitsalaya	S	35
6	Deep Chand Bandhu	S	36	2	Dr. Hedgewar Arogya Sansthan	S	12

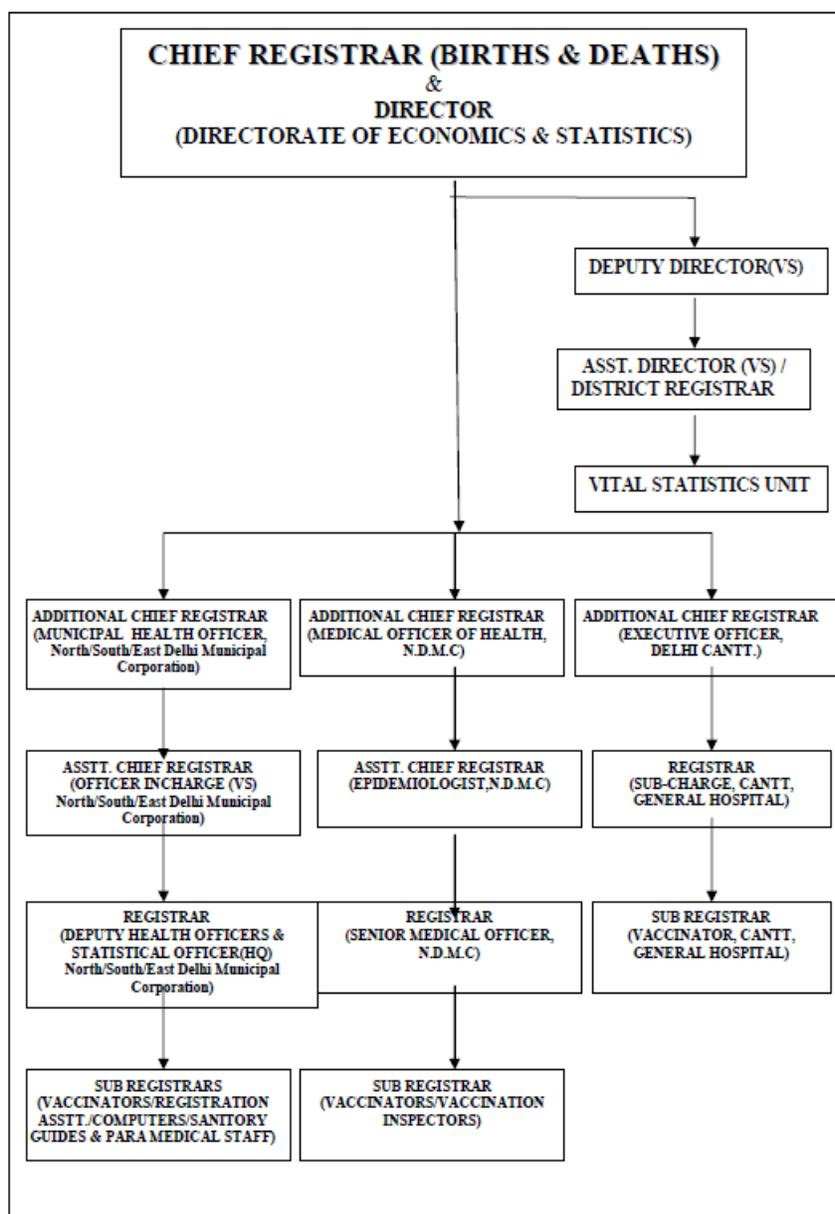
²⁹ While M stands for municipal hospital, S stands for state hospital.

Sr. no.	Dispensary Name	Code	Month received out of 36	Sr. no.	Dispensary Name	Code	Month received out of 36
7	Poor House Hospital	S	36	3	Lal Bahadur Shastri Hospital	S	36
8	Sushrut Trauma Centre	S	7	South Zone			
Karol Bagh Zone				1	B R Sur Homeopathic medical college	S	36
1	Aacharyashree Bhiksha Hospital	S	36	2	Institute of Liver & Biliary Sciences	S	36
2	Ayurvedic & Unani Tibbia College and hospital	S	36	3	Pt. Madan Mohan Malviya hospital	S	36
3	Dr. N. C. Joshi Hospital	S	36	West Zone			
4	Sardar Vallabh Bhai patel Hospital	S	36	1	central Jail	S	36
Najafgarh Zone				2	Dadadev Mother & Child Hospital	S	36
1	Chaudhary Brahm Prakash Ayurved	S	12	3	Deen Dayal Upadhyay	S	24
2	Rao Tula Ram memorial Hospital	S	36	4	Guru Govind Singh Hospital	S	36
Narela Zone				5	Janakpuri Super speciality Hospital	S	36
1	Maharishi Balmiki Hospital	S	36				
2	satyawadi Raja Harish Chandra hospital	S	36				

Annexure 2 – Ministers List

Ministers list from 16th Feb 2015 to 31st march 2016			
Name	Minister	16-2-15 to 31-3-16	New if any
Arvind Kejriwal	Chief Minister	16-2-15 to till date	
Asim Ahmed Khan	Food Minister	16-2-15 to 31-8-15	Imran Hussain from 20-10-15 to till date
Bandana Kumari	Minister	16-02-2015 to 6-6-2016	
Gopal Rai	Minister	16-2-15 to till date	
Jitender Singh Tomar	Minister	16-2-17 to 31-8-15	Kapil Mishra from 31-8-15 to May'17
Manish Sisodiya	Deputy Chief Minister	16-2-15 to till date	
Ram Niwas Goel	Speaker	16-2-15 to till date	
Sandeep Kumar	Minister	16-2-2015 to 6-9-2016	Rajender Pal Gautam from 19-5-2017 to till date
Satyendar Kumar Jain	Minister	16-2-15 to till date	
Surender Singh	Delhi Cantonment Board	16-2-15 to till date	

Annexure – 3 Organization Structure of Registrar of Birth and Death, Death



Annexure 4 – Socio Economic Classification (SEC) Note

SEC is used to measure the affluence level of the sample, and to differentiate people on this basis and study their behaviour / attitude on other variables.

While income (either monthly household or personal income) appears to be an obvious choice for such a purpose, it comes with some limitations:

- Respondents are not always comfortable revealing sensitive information such as income.
- The response to the income question can be either over-claimed (when posturing for an interview) or under-claimed (to avoid attention). Since there is no way to know which of these it is and the extent of over-claim or under-claim, income has a poor ability to discriminate people within a sample.
- Moreover, affluence may well be a function of the attitude a person has towards consumption rather than his (or his household's) absolute income level.

Attitude to consumption is empirically proven to be well defined by the education level of the Chief Wage Earner (CWE*) of the household as well as his occupation. The more educated the CWE, the higher is the likely affluence level of the household. Similarly, depending on the occupation that the CWE is engaged in, the affluence level of the household is likely to differ – so a skilled worker will be lower down on the affluence hierarchy as compared to a CWE who is businessman.

Socio Economic Classification or SEC is thus a way of classifying households into groups' basis the education and occupation of the CWE. The classification runs from A1 on the uppermost end thru E2 at the lower most end of the affluence hierarchy. The SEC grid used for classification in market research studies is given below:

EDUCATION \ OCCUPATION		Illiterate	literate but no formal schooling / School up to 4 th	School 5 th – 9 th	SSC/ HSC	Some College but not Grad	Grad/ Post-Grad Gen.	Grad/ Post-Grad Prof.
Unskilled Workers		E2	E2	E1	D	D	D	D
Skilled Workers		E2	E1	D	C	C	B2	B2
Petty Traders		E2	D	D	C	C	B2	B2
Shop Owners		D	D	C	B2	B1	A2	A2
Businessmen/ Industrialists with no. of employees	None	D	C	B2	B1	A2	A2	A1
	1 – 9	C	B2	B2	B1	A2	A1	A1
	10 +	B1	B1	A2	A2	A1	A1	A1
Self employed Professional		D	D	D	B2	B1	A2	A1
Clerical / Salesman		D	D	D	C	B2	B1	B1
Supervisory level		D	D	C	C	B2	B1	A2
Officers/ Executives Junior		C	C	C	B2	B1	A2	A2
Officers/Executives Middle/ Senior		B1	B1	B1	B1	A2	A1	A1

*CWE is defined as the person who takes the main responsibility of the household expenses.