

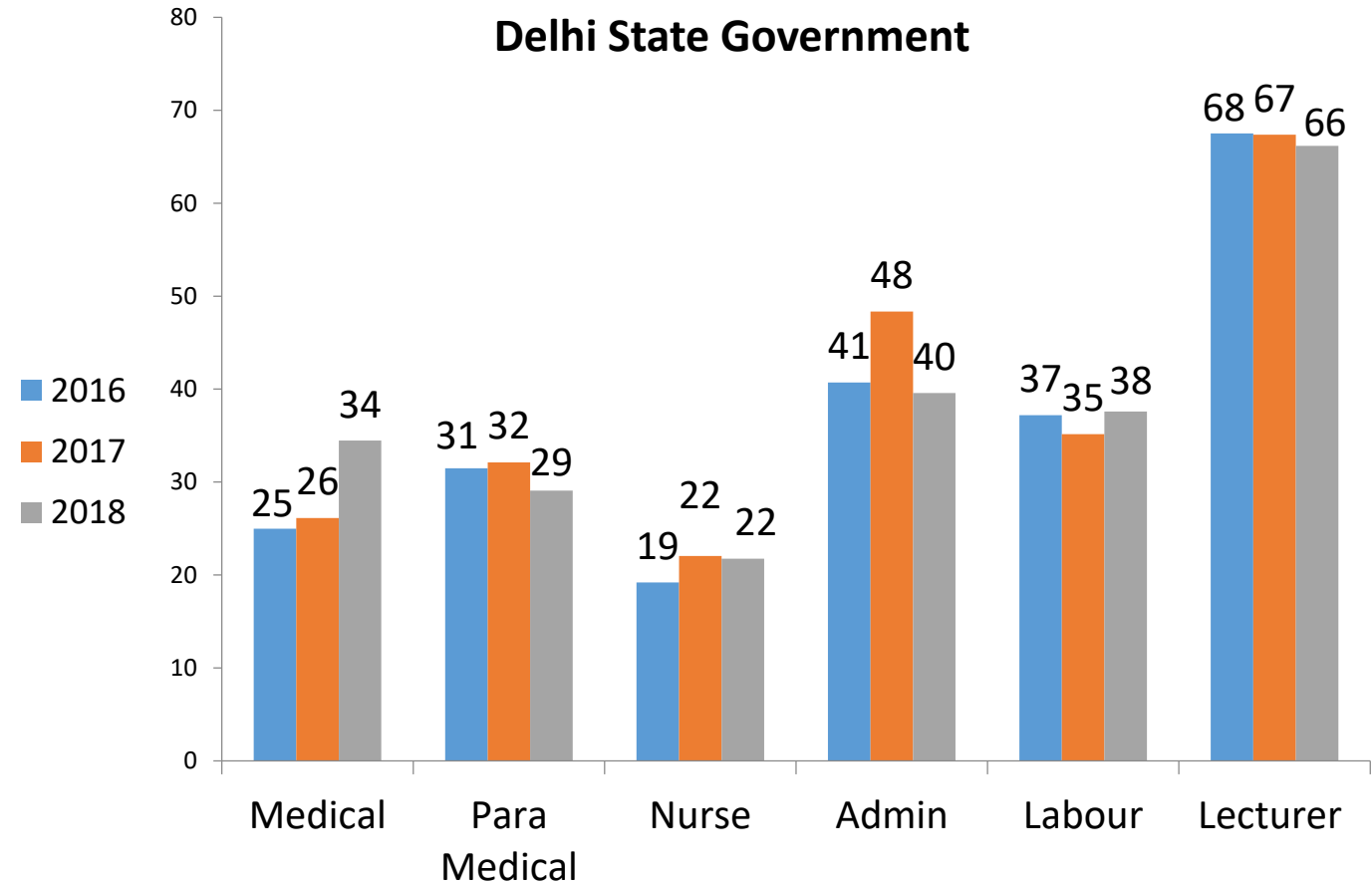
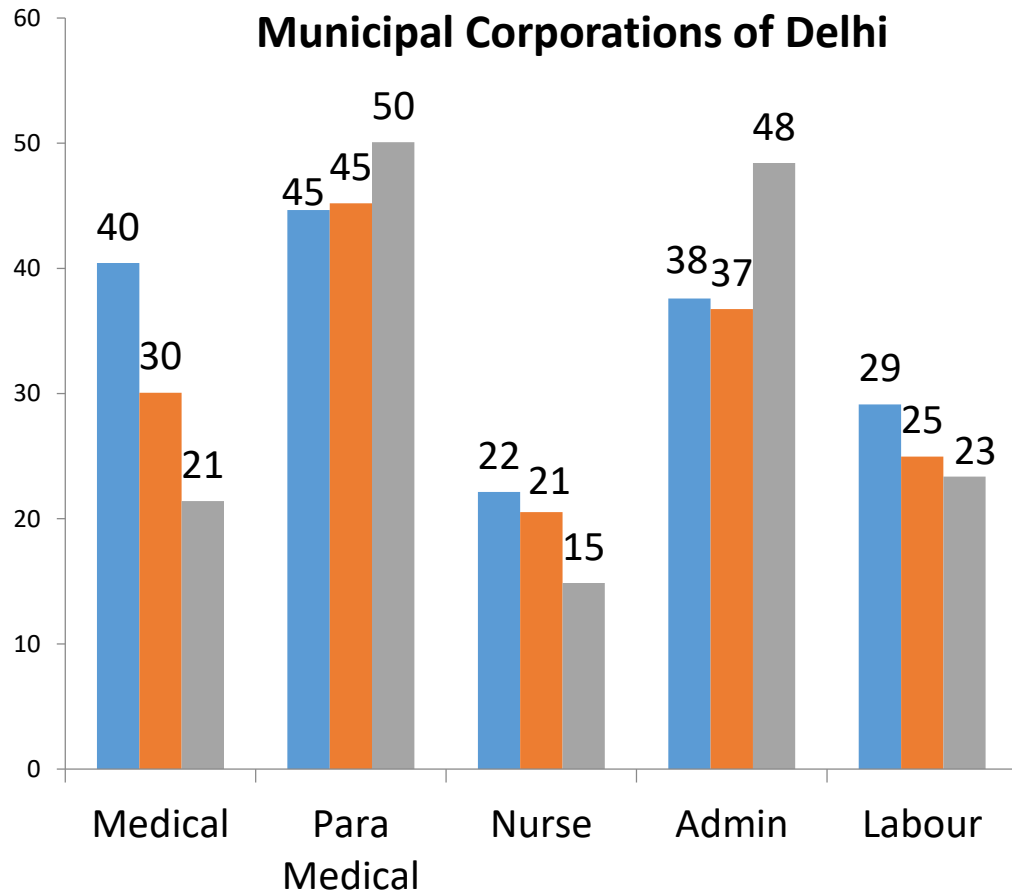


The State of Health in Delhi

October 2020

Is Delhi Equipped to Tackle its Health Crises?

34% medical posts were vacant in Delhi State Government Hospitals and Dispensaries in 2018, up from 25% in 2016.



The Table depicts the percentage of posts vacant to total posts.

RTI for 2019 data was filed at the respective health departments but it was not available in a compiled manner.

Is Delhi Equipped to Tackle its Health Crises?

EDMC spent only 56% of its Health Budget in 2018-19

| MCD | Type of Budget | 2016-17 | | | 2017-18 | | | 2018-19 | | |
|------|----------------|-----------------|--------------------|---------------|-----------------|--------------------|---------------|-----------------|--------------------|---------------|
| | | Budget Estimate | Actual Expenditure | Utilisation % | Budget Estimate | Actual Expenditure | Utilisation % | Budget Estimate | Actual Expenditure | Utilisation % |
| NDMC | Non-Plan | 720 | 514 | 71% | 821 | 558 | 68% | 868 | 662 | 76% |
| | Plan | 321 | 295 | 92% | 523 | 497 | 95% | 133 | 148* | 112% |
| | Total | 1,041 | 808 | 78% | 1,344 | 1,055 | 78% | 1,001 | 810 | 81% |
| EDMC | Non-Plan | 313 | 216 | 69% | 376 | 201 | 53% | 413 | 247 | 60% |
| | Plan | 59 | 47 | 79% | 56 | 45 | 81% | 175 | 85 | 48% |
| | Total | 372 | 263 | 71% | 432 | 246 | 57% | 588 | 331 | 56% |
| SDMC | Non-Plan | 222 | 166 | 75% | 296 | 225 | 76% | 269 | 251 | 93% |
| | Plan | 254 | 248 | 98% | 392 | 384 | 98% | 48 | 44 | 93% |
| | Total | 476 | 414 | 87% | 688 | 609 | 89% | 317 | 295 | 93% |

Figures are in crores

Note (*): 2018-19 actuals of Plan expenditure for NDMC were higher than the budget estimates because of fund allocated in revised estimates, which is not available in the published documents.

Is Delhi Equipped to Tackle its Health Crises?

69% Health Capital Expenditure of State Government not spent in 2018-19

| Government | Type of Budget | 2016-17 | | | 2017-18 | | | 2018-19 | | |
|------------|----------------|-----------------|--------------------|---------------|-----------------|--------------------|---------------|-----------------|--------------------|---------------|
| | | Budget Estimate | Actual Expenditure | Utilisation % | Budget Estimate | Actual Expenditure | Utilisation % | Budget Estimate | Actual Expenditure | Utilisation % |
| NCT Delhi | Revenue | 4,406 | 3,654 | 83% | 5,048 | 4,388 | 87% | 5,741 | 5,189 | 90% |
| | Capital | 854 | 377 | 44% | 688 | 346 | 50% | 988 | 306 | 31% |
| | Total | 5,259 | 4,031 | 77% | 5,736 | 4,733 | 83% | 6,729 | 5,495 | 82% |

Figures are in crores

What needs to be done to strengthen health infrastructure?

- **More Doctors And Staff To Be Allocated, Vacant Posts** need to be filled
- Proper **Utilisation of Budget** Allocated
- **Improve Dispensary Facilities** for Preventive and Primary Care
- Provide **Integrated Primary Care** with specialist services for diseases including mental health and nutrition counselling and diagnostic services.
- All three levels of government have hospitals and dispensaries in Delhi, there needs to be a **clear co-ordination** between them to avoid duplication of health services and to **share required resources**.

On an average **27** people died of COVID-19 per day* in Delhi.

BUT, over the years, more people have been dying in the city of other diseases. In 2018**:

23 deaths per day of respiratory diseases

18 deaths per day of cancer

11 deaths per day of tuberculosis

Which shows **that the Health System as a whole needs to be improved to tackle Health Crises.**

*Calculated from 15th March to 30th September 2020, Central Government COVID dashboard : <https://www.mohfw.gov.in/>

** Data is from Annual Report on Registration of Births and Deaths in Delhi

Status of Communicable Diseases in Delhi(1/2)

Tuberculosis (cases per one lakh population)

Current Status

(2019-20)

649

SDG Target

(2030)

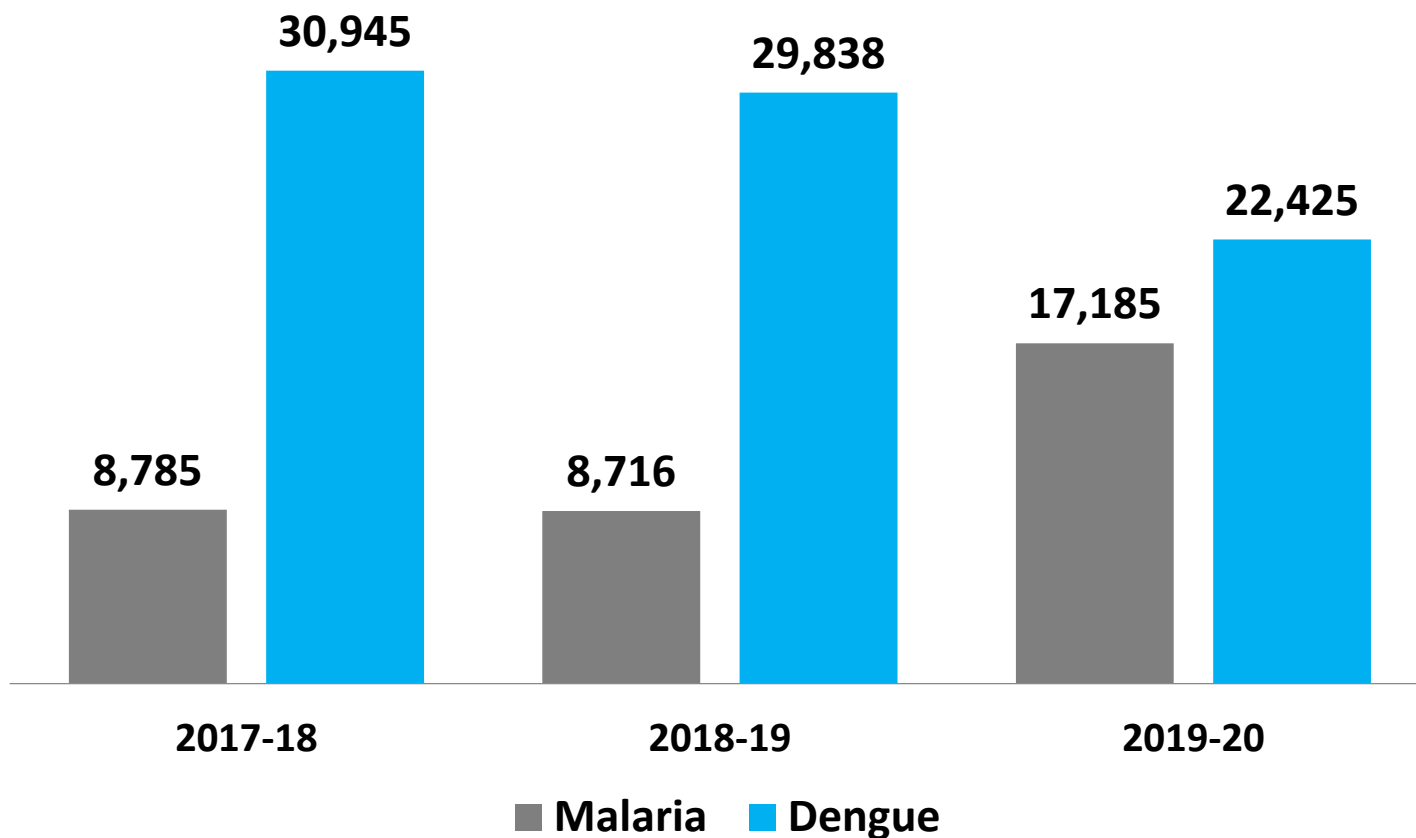
0

- **3,834 TB deaths were reported in 2018**, while it was 3,635 in 2015 - 64% deaths on an average were in age group 25-64 in the past 4 years.
- The percentage of patients diagnosed with **Drug Resistant TB (DR-TB*)** increased by **46%** from 1,338 in 2014 to 1,948 in 2018.
- **45% of the treatments** of DR-TB were **not successful** in 2018

*DR-TB is resistant to at least four of the core anti-TB drugs and to at least one of the three injectable second-line drugs and take longer to treat than ordinary TB, requires the use of second-line anti-TB drugs which are more expensive and have more side effects.

Status of Communicable Diseases in Delhi(2/2)

Malaria and Dengue Cases in Delhi from 2017-18 to 2018-19



- **Malaria cases have increased** by 96% from 2017-18 to 2019-20, while **dengue cases have fallen** by 28%, although the absolute number of dengue cases was more than malaria in 2019-20.
- **Delhi recorded more malaria deaths (115) than dengue (77) in 2018**, while the opposite was the case in 2015 (486 dengue deaths and 164 malaria deaths in 2015).

How to Better Tackle Communicable Diseases?

- **Social determinants of health** need to be focused on. For example, sanitation and fumigation need to be given greater focus in policy for combating malaria and dengue.
- Specific focus needs to be given on **drug resistant TB and ensuring proper treatment at the initial stages.**

Status of Non-Communicable Diseases in Delhi

| Major NCDs | Age Wise Deaths in 2018 | | | | | | | Proportion to Overall Deaths |
|--|-------------------------|-------------|-------------|-------------|-----------|---------------|--------|------------------------------|
| | 0-14 years | 15-24 years | 25-44 years | 45-64 years | >65 years | Not Specified | Total | |
| Cardiovascular Diseases (CVDs) (I00-I99) | 772 | 786 | 3,337 | 7,813 | 6,642 | 95 | 19,445 | 19.8% |
| Respiratory Diseases (J00- J98) | 1,112 | 416 | 1,252 | 2,722 | 2,854 | 97 | 8,453 | 8.6% |
| Cancer (C00- D48) | 368 | 323 | 1,262 | 2,800 | 1,622 | 21 | 6,396 | 6.5% |
| Diabetes (E10-E14) | 15 | 25 | 210 | 1,053 | 896 | 6 | 2,205 | 2.2% |

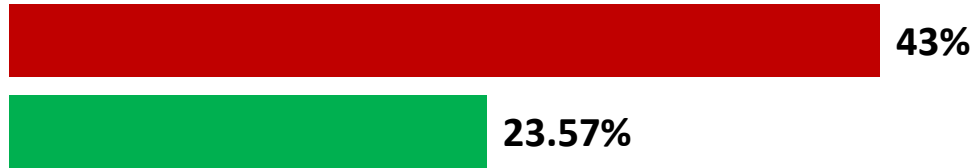
- Schemes like National Programme for Prevention and Control of Cancer, Diabetes, Cardiovascular Diseases, and Stroke that aim to **prevent and control Major NCDs is implemented in Delhi.**
- National Programme for Palliative Care and National Programme for Healthcare of Elderly is implemented in Delhi to **tackle NCDs in elderly** and provide better health services.
- However, there is no specific policy related to respiratory diseases inspite of the high burden in Delhi.

How to Better Tackle Non- Communicable Diseases?

- Focus on promoting **healthier lifestyle changes, nutrition counselling and awareness generation** need to be adopted in policy and implementation.
- A **targeted approach** towards tackling each NCD specifically with its underlying causes and determinants needs to be adopted.
- Specific scheme related to **respiratory diseases** caused due to pollution needs to be implemented.
- **Focus on early detection** through strengthening of primary health care systems needs to be done.

Maternal and Neonatal Health in Delhi

Percentage of pregnant women who are anemic (11g/dl)



■ Current Status (2019-20) ■ SDG Target (2030)

Maternal Mortality Rate (deaths per 1 lakh live births)



■ Current Status (2019-20) ■ SDG Target (2030)

| Parameters | 2017-18 | 2018-19 | 2019-20 |
|---|--------------|--------------|--------------|
| Total number of pregnant women (PW) registered for Antenatal Care (ANC) | 9,82,022 | 9,31,041 | 7,21,322 |
| % of PW received 4 or more ANC check ups | 37% | 44% | 57% |
| % of PW with anemia to total PW registered | 30% | 33% | 43% |
| % of institutional deliveries to total deliveries | 95.6% | 95.7% | 96.1% |
| Neonatal Deaths (upto 28 days) | 3,333 | 3,609 | 3,276 |
| Maternal Deaths | 517 | 572 | 484 |

Inspite of **various schemes** like Janani Suraksha Yojana, Janani Shishu Suraksha Karyakram, Pradhan Mantri Surakshit Matritva Abhiyan **targeting reduction in neonatal and maternal mortality** and better maternal healthcare; **lack of adequate antenatal care, non-institutional deliveries** or poor facilities available during deliveries, **poor nutrition poses higher risk to maternal health** as well as infections leading to high **neonatal mortality**.

Child Health and Nutrition in Delhi

| Parameters | Target | Current Status |
|-----------------------------------|---|---|
| Vaccination | Full Immunisation under Pulse Polio Programme and Universal Immunisation Programme (UIP) | Polio vaccination dosage increased from 2,86,896 in 2017-18 to 2,92,098 in 2019-20, however 14 polio deaths were reported in Delhi in 2015. Of the vaccines covered in UIP for children (0 to 14 years), high number of tuberculosis (239 in 2018) and diphtheria (176 in 2018) deaths. |
| Child Health | Reduce Under 5 Mortality Rate (deaths per 1000 live births) to 11 by 2030 under SDG | Under 5 Mortality Rate was 40 in 2018 in Delhi. |
| Micronutrient Deficiencies | Iron supplements to adolescents under Weekly Iron and Folic Acid Supplement (WIFS) Programme | In 2019-20, 5,98,992 girls and 5,01,446 boys were given IFA tablets. There were 610 deaths due to anemia in 2018 , 36% of which were in the age group 0-24 years. |
| Undernutrition | Reducing the number of undernourished children under Integrated Child Development Services | Number of children reported severe acute malnourished increased from 2,560 in 2017-18 to 3,675 in 2019-20. Majority deaths of malnutrition occurred in the age group of 0-4 years- in 2018, 89% of all deaths took place in this age group. |

Adolescent and Reproductive Health in Delhi

| Parameters | Target | Current Status |
|----------------------------|---|--|
| Adolescent Health | Increasing awareness and accessibility to healthcare and provision of quality counselling for adolescents under Rashtriya Kishor Swasthya Karyakram. | Adolescents who received counselling out of the total registered was 67% for girls and 40% for boys in 2019-20. |
| Reproductive Health | To facilitate provision of family planning services under the State's Family Welfare Services. | <p>99.52% of all family planning interventions from 2017-18 to 2019-20 were targeted towards females.</p> <p>Contraceptive distribution was also heavily skewed- there was an 819% increase in the number of 'Chhaya' weekly pill strips distributed for females from 2017-18 to 2019-20 while distribution of condoms fell by 6% in the same period.</p> <p>This was also reflected in Sexually Transmitted Infections 84% of total cases (average from 2017-18 to 2019-20) were reported in females.</p> |

How to Better Tackle Reproductive, Maternal, Newborn, Child, Adolescent Health (RMNCHA+)?

- There needs to be a **comprehensive and unified policy** that looks at **all aspects of maternal health and prevention of maternal and neonatal mortality**.
- Efforts must be made to **improve our immunisation rates and coverage every year to reduce preventable diseases in children**, there is also a need to specifically focus on certain diseases like septicaemia, tuberculosis and diphtheria among children.
- **Micro-nutrients in the diet** need to be focussed upon such as iron rich food for tackling anaemia which needs to be incorporated as components in the overall food security policies and mid-day meal scheme.
- **Counselling services** under the RKSK need to be strengthened for better adolescent care services.
- Promotion of **gender equality and greater male participation** in family planning and contraceptive use needs to be implemented, by promotion of male contraceptive methods that are much more safer and easier to use.