DIRECTORATE OF FAMILY

ANNUAL REPORT (2022-23)

For Submission to:

STATE HEALTH INTELLIGENCE BUREAU (DHS)

Directorate of Family Welfare

Directorate of Family Welfare (DFW) is responsible for planning, co-coordinating, supervising the implementation, monitoring and evaluating following programs / initiatives related to Maternal, adolescent, newborn and child health along with implementation of certain statutory Acts like MTP Act and PNDT Act.

- 1. Provision of Antenatal, Natal and Post Natal services to pregnantwomen with an aim to reduce maternal morbidity and mortality.
- 2. Implementation of maternal health programs i.e. JananiSurakshaYojana, Janani Sishu Suraksha Karyakram, PMSMA, LaQshya.
- 3. Provision of Essential new born care (at every 'delivery' point at time of birth).
- 4. Operationalization of Facility based sick newborn care (at FRUs & District Hospitals) through Special Newborn Care Units.
- Provision of Home Based Newborn Care (HBNC) & Home Based Young Child Care (HBYC) Programmes.
- 6. Promotion of Infant and Young Child Feeding Practices (IYCF) under Mother's Absolute Affection (MAA) Programme.
- 7. Management of Childhood Diarrhoeal Diseases.
- 8. Prevention and management of Acute Respiratory Infections & Social Awareness and Action to Neutralize Pneumonia Successfully (SAANS) Programme.
- 9. Provision of Kangaroo Mother Care (KMC) at Delivery Points.
- Setting up of District Early Interventions Centre (DEIC): To counter 4Ds (Defects, Deficiencies, Diseases, Developmental Delays &Disabilities).
- 11. Nutritional Rehabilitation Centre (NRC): Establishment & Strengthening of NRC to take care of severely malnourished children (SAM).
- Establishing Early Intervention Centre (EIC)/Centre of Excellence (CoE)at Medical College Hospital of Delhi.
- 13. Provision of family planning services (Basket of Contraceptives, female/male sterilization, Counseling, follow-up, support & referral etc.).
- 14. Support ASHA in providing support to eligible couples through scheme likes Home Delivery of Contraceptive (HDC).
- 15. Implementation of UIP (Universal Immunization Program).
- 16. COVID VACCINATION of the entire eligible population of 18 plus age group.
- 17. Surveillance of VPD (Vaccine Preventable Diseases) Services.

- 18. Bi-annual rounds of National De-Worming Day (NDD) are held in the state as part of Anemia prevention and control strategy among children and Adolescents.
- 19. Operationalization of "UDAAN" scheme with an aim to improve accessibility of Sanitary napkins for adolescent girls (non-school going) and alsotoincrease their awareness of Menstrual Hygiene Management.
- 20. Weekly Iron & Folic Acid Supplement (WIFS) program to ensure provision of a weekly prophylactic dose of IFA tablet to adolescents to prevent Anemia.
- 21. IFA Supplementation program for under-5 children.
- 22. Operationalization of IFA supplementation initiative for children in 6-10 years' age group.
- 23. Health & Wellness programs in schools by training of teachers who then work as Health & Wellness Ambassadors with focus on adolescent centric issues with school children.
- 24. Prevention and control of the growing menace of Anemia, as public health problem especially among Adolescents, Organization ofTest-Treat-Talk(T3) Anemia camps across schools & colleges of Delhi, under Anemia Mukt Bharat Scheme, and also as a part of POSHAN Maah.
- 25. Implementation of PC & PNDT & MTP (Medical Termination of Pregnancy) Act.
- 26. Co-ordination and execution of IEC activities, campaigns through Mass EducationMedia.
- 27. Procurement of vaccines (through CPA), stocking, maintaining cold chain, disbursing vaccines and family welfare logistics to all health providing agencies in thestate.
- 28. Capacity Building to update knowledge & skills of various categories of health functionaries by providing RMNCHA+N trainings by the H&FW TrainingCentre.

1. Essential Immunization Program:

Directorate of Family Welfare under its RCH Program Unit is engaged in delivery of immunization services through more than 600 health delivery points. The immunization program aims to protect the children against more than 12 diseases namely Tuberculosis, Poliomyelitis, Hepatitis-B, Diphtheria, Pertussis, Tetanus, Hib related diseases (Meningitis, Pneumonia and Septicemia), Measles, Mumps, Rubella and Typhoid as reported on HMIS portal by all public health facilities & some private facilities.

During 2019-20, Rota Virus Vaccine was introduced in the State in the month of July. **About. 877250 (all three) doses of Rota Virus Vaccine were administered during the year 2022-23**. During 2021-22, PCV Vaccine was introduced in the State in the month of August 2021, wherein, three doses of PCV need to be administered at the age of 1.5 months, 3.5 months and 9 months (1st dose, 2nd dose and booster dose respectively). State Level VPD Surveillance Workshop was conducted for Surveillance of Vaccine Preventable Diseases followed by roll out of VPD surveillance in the State. IMI 4.0 was implemented for three months i.e. March, April & May 2022 in all the districts of Delhi.

During the Same year, Electronic Vaccine Intelligence Network (eVIN) was implemented successfully in the State. eVIN offers innovative use of technology for temperature monitoring, system strengthening, improving program Governance and real time visibility of vaccine data.

Cold Chain Augmentation: The cold chain space has been enhanced through addition of cold chain equipment received from GOI. Further new dedicated State vaccine store has been created at Rajeev Gandhi Super Specialty Hospital (RGSSH).

Strengthening of AEFI Surveillance-The State & District AEFI Committees have been expanded with addition of medical specialists including Cardiologist, Neurologist, Respiratory Specialist & Gynecologist. AEFI Surveillance network has been expanded through addition of AEFI Management centers and designated AEFI Nodal Officers.

New Initiatives- In order to get real time information about temperatures in various equipments of cold chain, temperature loggers are being installed in all electrical cold chain equipments which will help to manage the cold chain with better efficiency.

Routine Immunization is being incorporated on the successful model of COVID Vaccination by using a uniform pan India portal (currently named as u-VIN). Pilot projects in two districts of Delhi i.e., North-West and South District is being conducted which will later include all 11 districts of Delhi.

Immunization Indicators:

Code	Parameters	Grand Total 2022-23
4.1.1.a	Live Birth - Male	136091
4.1.1.b	Live Birth - Female	124594
4.1.3	Still Birth	4378
4.4.2	Number of newborns having weight less than 2.5 kg	63208
4.4.3	Number of Newborns breast fed within 1 hour of birth	194503
9.1.1	Child immunization - Vitamin K1 (Birth Dose)	233917
9.1.2	Child immunization - BCG	268738
9.1.3	Child immunization - DPT1	8398
9.1.4	Child immunization - DPT2	7432
9.1.5	Child immunization - DPT3	1752
0.1.6		4395
9.1.6	Child immunization - Pentavalent 1	292999
9.1.7	Child immunization - Pentavalent 2	293833
9.1.8	Child immunization - Pentavalent 3	282892
9.1.9	Child immunization - OPV 0 (Birth Dose)	240272
9.1.10	Child immunization - OPV1	295840
9.1.11	Child immunization - OPV2	295084
9.1.12	Child immunization - OPV3	283820
9.1.13	Child immunization - Hepatitis-B0 (Birth Dose)	235400
9.1.17	Child immunization - Inactivated Polio Vaccine	
9.1.18	1(IPV 1) Child immunization - Inactivated Polio Vaccine	292240
9.2.4.a	2(IPV 2) Children aged between 9 and 11 months fully	286353
).2. 1.u	immunized- Male	145818
9.2.4.b	Children aged between 9 and 11 months fully	143010
	immunized - Female	129254
9.4.4	Child immunization - OPV Booster	247134
9.5.1	Child immunization - Typhoid	
9.5.2	Children more than 5 years received DPT5 (2nd	265440
	Booster)	208676
9.5.3	Children more than 10 years received TT10	114637
9.5.4	Children more than 16 years received TT16	28354
9.7.2	Immunization sessions held	127404

Source: HMIS Portal

Annual Report 2022-23

2. COVID-19 Vaccination

COVID-19 Vaccination is being conducted in NCT of Delhi since 16th January, 2021 and till date, more than 3.65 crore doses have been administered till now. More than 1000 sessions were being conducted daily in government and private sector with a daily vaccination capacity of more than 1 lakh. Currently the vaccine is not available in govt. setup but Corbevax, Covovax and iNCOVACC (Nasal Vaccine) are still being administered in few pvt.Setups in Delhi. Appointment for the same can be taken via Co-Win self-registration module.

Age group wise vaccination status and coverage are detailed below:

Beneficiaries Vaccinated NCT of Delhi 18 years + 12-14 Years 15-17 Years (Target - 1,48,33,713) (Target - 6,15,000) (Target – 10,14,000) 2nd Dose 2nd Dose 2nd Dose 1st Dose 1st Dose 1st Dose 10,08,907 8,70,755 4,90,321 Doses 1,66,04,309 1,43,55,694 6,83,569 97% 99% 86% 80% 112% 111% Coverage National Status 98% 92% 84% 73% 88% 69%

COVID VACCINATION CUMULATIVE ACHIEVEMENT (till 31.03.2023)

Precaution Dose administered till 14th April 2023 is 33,92,817

Total Doses administered till 14th April 2023 is 3,74,06,372

3. Child Health

Child Health is one of the important components of RCH Programme. The State is making concerted efforts to reduce Mortality and Morbidity among children. Infant Mortality Rate (IMR) of Delhi has shown decline from 24 (SRS 2013) to 12 (SRS 2020).

Parameters	SRS 2020	SRS 2013
Neonatal Mortality Rate	9	16
Infant Mortality Rate	12	24
U5 Mortality	14	26

The aim of the State is to reduce Neonatal Mortality Rate (NMR), Infant Mortality Rate (IMR) and Under 5 Mortality Rate (U5-MR) to single digit. To reduce Neonatal Mortality Rate, State has improved Newborn Care Facilities by establishing Special Newborn Care Units (SNCUs) and Kangaroo Mother Care also New Born Care Corners (NBCCs). The Key Strategies to decrease the LBW prevalence through Optimum Antenatal care and maternal nutrition and to ensure Essential Newborn Care, State has mapped NBCCs with trained care providers for all 58 delivery points. To ensure prompt identification, stabilization and management of sick Newborns, strengthening of well-equipped and staffed NBSUs, SNCUs and NICUs is being carried out. Furthermore, for prompt and seamless referrals of sick neonates requiring higher level of neonatal care, well defined Referral Linkages are also being created.

Comprehensive Screening of the Newborns for Developmental Anomalies is being done in the hospitals. Screening for early intervention through Field Workers under Home Based Newborn Care (HBNC) &Home Based Care for Young Children (HBYC) is also being carried out. Early recognition of 4Ds (Defects, Deficiencies, Diseases, Developmental Delays & Disabilities) to facilitate InterventionatDEICs and referral hospitals is being undertaken. An effective system of Child Death Review is also being operationalized as a key strategy to reduce the delay in delivery of Health Care to sick children.

Delhi has 33 public hospitals providing intensive & resuscitative care to the new born babies who are sick. 30 hospitals are Special Newborn Care Units(SNCU) providing level-II and above care. 3 public health facilities are Stabilizing units for Newborn. **New Born Care Corners (NBCCs)** are functional at all 58 delivery points within the labour room and OTs in the State ensuring essential New born care at all the delivery points.

Nutritional Rehabilitation Center (NRC)

Strengthening of existing Nutritional Rehabilitation Centre (NRC) in 04 hospitals at KSCH, BMH, LNH & HRH and establishment of 2 new NRCs to take care of severely malnourished children (SAM). NRCs are facility based units providing medical and nutritional care to SAM Children under 5 years who have medical complications. Also skills of mother on child care and feeding practices are improved so that child receives care at home.SOPs for management of children with SAM have been prepared for Admission &Non-admission facilities and has been disseminated to the districts for implementation.

Intensified Diarrhoea Control Fortnight (IDCF)

Intensified Diarrhoea Control Fortnight (IDCF) was implemented in 2014, with an aim of achieving improved coverage of essential life- saving commodity of ORS, ZINC dispersible tablets and practice of appropriate child feeding practices during diarrhoea. Delhi observed IDCF from **05th June, 2023 to 17th June, 2023** across the State to sensitize and bring awareness among the masses. Delhi also carried out the following activities like ORS preparation Demonstration in UHNDs and focused group discussions in all districts. Munadi and other IEC activities were done to create awareness on IDCF. ASHAs & AWW meetings were done. Health Talks were given in the facilities and communities during this fortnight.

Mother Absolute Affection Programme (MAA)

MAA focuses on awareness campaign to improve the breastfeeding indicators, at all 58 delivery points and to impart trainings & to improve skills of Health Care worker involved in Child care at their institutes and also sensitization of ASHAs & AWW for motivating mothers and pregnant women for Early initiation of breastfeeding& Exclusive Breast Feeding.

Kangaroo Mother Care (KMC): -Kangaroo mother care has been started in 33 Newborn care units for improving survival of premature and LBW babies.

SAANS programme aimed to reduce child morbidity and mortality due to pneumonia has been rolled out.Sensitization on SAANS has also been done for all district officers. SAANS was implemented successfully for treatment and timely referral of Pneumonia cases to health care facilities along with IEC done at District / facility / community level.Guidelines of treatment algorithm disseminated to all health facilities for Display and implementation and Basic equipment are available with all facilities. SAANS campaign was implemented from 12th Nov 2022 to 28th Feb 2023.

No. of ASHAs that did house-to-house visits of under-five-children under SAANS	6040
No. of under-five-children assessed by ASHAs for symptoms and signs	245506
No. of under-five-children having symptoms and signs of acute respiratory illness	27081
No. of under-five-children administered pre-referral dose of Amoxicillin in the facility (As a policy ASHA is not provided with Amoxicillin and does not administer Antibiotics in the community)	5968
No. of under-five-children referred to health facilities	7385
No. of homes where counseling was done using MCP card	289424
No. of under-five-children treated with cough and cold in OPD	241228
No. of under-five-children treated with Pneumonia in OPD	17995
No. of under-five-children treated with Severe Pneumonia by admission	6124
No. of under-five-children administered medical oxygen	6143

Child Death Review (CDR)

CDR has been launched in Delhi in all Districts to find out the gaps in child health delivery mechanisms and taking corrective actions. Delhi has a relatively low Child mortality which has been decreasing steadily. The aim is to decrease it further to minimum possible. District level Task Force for Child Death Review has been notified and meetings are being held. State level task force has also been notified.

New Activities

Newborn Screening- Mission NEEV Project: Comprehensive Newborn Screening Programme (Mission NEEV) is aimed at holistic evaluation of all newborns at various institutions in the Delhi State. The aim is to cover at least 1.5 lakhs births. Currently, 32 Public Health Birthing Facilities are reporting and carrying out activities under Mission NEEV.

Center of Excellence- Early Intervention Center- LokNayak Hospital (COE-EIC-

LNH): - COE-EIC at LN Hospital is operational since October 2021, taking care of children identified to be suffering from 4Ds (Defects, Deficiencies, Diseases, Developmental Delays & Disabilities) to facilitate intervention at DEIC. DEIC is also functional at Swami Dayanand Hospital (SDN).

Strengthening of Public Sector Nurseries: In order to strengthen reporting on the FBNC portal by existing SNCUs/NICUs, State is providing Human Resource and capacity building activities to the existing SNCUs/NICUs.

Establishment of 5 LMUs: 5 District Hospitals have been identified to start Lactation Management Units in the current Financial Year. 3 districts hospitals identified for LMU i.e. SDN, BSA & CNBC are in the process of Operationalization.

MusQan: To ensure child-friendly services in public Health Facilities, MoHFW has launched MusQan for pediatric age group within the existing framework of NQAS to ensure timely, effective, efficient, safe, personcentered, equitable integrated quality services in public health facilities. 5 hospitals (LBS, BSA, ABSH, GGSH Sanjay Gandhi Hospital) of Delhi have qualified for State certification of MusQan.

4. Family Planning:

FP services are provided through primary, secondary and tertiary care facilities.

A. Permanent or limiting methods of contraception:

Delhi Provides high quality sterilization services through hospitals of different agencies (Delhi Govt., MCD, NDMC, CGHS, ESI, NGOs and accredited private facilities). The Revised compensation scheme is followed for incentivizing the beneficiaries through PFMS portal. Adverse events following sterilization services are covered through Family Planning Indemnity Scheme (FPIS). In the year 2021-22, 25 sterilization failures and 1 sterilization Death were compensated.

B. Temporary methods:

Condoms, Oral pills (3 types), IUCD (2 types) and Injectable contraception services are provided at all health facilities and are available to the masses at nearest dispensaries. Besides, pills for emergency use in contraceptive accidents (ECP) are also available. Special emphasis is laid to fulfill contraceptive needs of Postpartum and Post abortion women.

The performance figures (2022-23) are submitted in Table below.

Α	Permanent Method	
1.	Male Sterilization	381
2.	Female Sterilization	14089
B	Temporary Method	
1.	IUCD	103362
2.	MPA	41650
3.	Centchroman	118197
4.	OCP	192849
5.	ECP	63894
6.	Condom	6110183

Family Planning Coverage for F.Y 2022-23(Source: HMIS)

5. Health & Family Welfare Training Centre (HFWTC):

Details of No of participants trained under RMNCHA+N training conducted by HFWTC during 2022-23 for health care workers (Medical officers and other health care workers) are as follows :

Trainings Conducted					
Training Head	MO Trained	PHNO/Nursing Officer Trained	Other	Total Trained	
Maternal Health Trainings	70	102	0	425	
Child Health Trainings	111	87	54	252	
Family planning Trainings	10	44	0	54	
Adolescent Health Trainings	0	0	299	299	
Nutrition	50	97	18	165	
Immunization	75	187	38	300	
Total	316	517	409	1495	

6. Accounts Section:

		B & C	WING, 7 th FLOO	FARE, GOVT. OF NO R, VIKAS BHAWAN /IL LINES, DELHI-1	-II	
S.No.	NAME OF THE SCHEME	BUDGET HEAD MAJOR HEAD "2211" PLAN	BUDGET ESTIMATE 2022-23	EXP. UPTO THE MONTH OF FEBRUARY, 2022	EXP. FOR THE MONTH OF MARCH, 2023	PROGRESSIV E TOTAL MARCH, 2022-23 (IN RS.)
1.	Directorate of Family Welfare	2211-00-001-91- 00-21 Supplies & Materials	0	0	0	0
	inclusive of TQM & System Reforms	2211-00-001-91- 00-26 Advertisement & Publicity	2000000	830183	0	830183
		2211-00-001-91- 00-50 Other charges	1000000	0	860000	860000
		2211-00-001-91- 99-13 Information & Technology Office Expenses	500000	0	0	0
2.	Directorate of Family Welfare	2211-00-001-90- 00-01 Salaries	46500000	46000000	0	46000000
	(CSS)	2211-00-001-90- 00-03 OTA	0	0	0	0
		2211-00-001-90- 00-06 Medical Treatment	0	0	0	0
		2211-00-001-90- 00-11 Domestic Travel Expenses	0	0	0	0
3.	Sub Centre (CSS)	2211-00-101-78- 00-31 Grants-in-aid- General	10000000	6380000	0	6380000
4.	Rural Family Welfare Services	2211-00-101-76- 00-31 Grants-in-aid General	7000000	0	0	0
5.	Urban Family Welfare	2211-00-102-80- 00-01	15000000	15000000	0	15000000

Annual Report 2022-23

	Centres (CSS)	Salaries				
		2211-00-102-80- 00-03 OTA	0	0	0	0
		2211-00-102-80- 00-06 Medical Treatment	0	0	0	0
		2211-00-102-80- 00-11 Domestic Travel Expenses	0	0	0	0
		2211-00-102-80- 00-13 Office Expenses	0	0	0	0
		2211-00-102-80- 00-31 Grants-in-aid general	5000000	0	0	0
6.	Revamping of Urban Family Welfare Centres (CSS)	2211-00-102-78- 00-31 Grants-in-aid general	8600000	5265000	0	5265000
7.	Expenditure on Post- Partum Units	2211-00-102-76- 00-01 Salaries	40200000	39019131	935657	39954788
	in Hospitals	2211-00-102-76- 00-03 OTA	0	0	0	0
		2211-00-102-76- 00-06 Medical Treatment	5000000	4251022	593727	4844749
		2211-00-102-76- 00-11 Domestic Travel Expenses	100000	90312	8863	99175
		2211-00-102-76- 00-13 Office Expenses	4200000	3859122	332809	4191931
		2211-00-102-76- 00-28 Professional Services	500000	0	65110	65110
8.	Grants for expenditure on Post Partum Units in Hospitals	2211-00-102-75- 00-31 Grants-in-aid General	3000000	5018000	0	5018000
9.	Spl. Immunizatio n Prog. Incl MMR	2211-00-103-80- 00-21 Supplies & Materials	0	0	0	0

10.	Pulse Polio	2211-00-103-75-	0	0	0	0
	Immunizatio	00-21				
	n	Supplies &				
		Materials				
11.	Health &	2211-00-003-78-	2200000	2024000	0	2024000
	Family	00-01				
	Welfare	H Health & Family				
	Training	Welfare Training				
	Centre(CSS)	Centre(CSS)				
		Salaries.				
12.	Grant-in-aid	2211-00-800-95-	120000000	794677000	10000000	894677000
	to State	00-36				
	Health	Grant-in-aid				
	Society	Salaries				
			TOTAL	92,24,13,770	102796166	1025209936

	Expenditure Upto the month of FEBRUARY- 2023	Expenditure for the month of MARCH- 2023	Progressive (In Rs.)
Income Tax	13346923	2731836	16078759
Edn.Cess	533877	109273	643150
TDS	66134	11820	77954
NPS (10%+14%)	5183367	195695	5379062
GST	61896	4060	65956

7. Adolescent Health:

Delhi has an adolescent Population of nearly 35.0 Lac which is nearly 21% of its entire population. This represents a huge opportunity that can transform the social and economic fortunes of the State if substantial investments in their education, health and development are made.

As a part of strategy to address the Health & Development needs of adolescents a strategy in the form of RashtriyaKishorSwasthyaKaryakram (RKSK) has been adopted in Delhi. RKSK is a strategy based on a continuum of care for adolescent health & development needs, including the provision of information, commodities and services through various Adolescent Friendly Health Clinics (AFHCs) and also at the community level. It aims to provide an amalgamation of Preventive, Promotive, Curative, Counseling & Referral services to the adolescents.

Weekly Iron & Folic Acid Supplementation (WIFS) Program

WIFS Program is being implemented through Govt./Govt. aided Schools under the Directorate of Education as well as through AnganwadiCentres under the Department of Women & Child Development in Delhi wherein IFA supplement in the form of "BLUE" tablet is administered to adolescent girls & boys on each Wednesday throughout the year with alternative day of administration as Thursday. 3,73,779 was the average monthly coverage of IFA Blue tablets in Govt. and Govt. aided schools among class 6th to 12th girls, 3,31,471 among class 6th to 12th boys for F.Y. 2022-23. For out of school adolescent girls (10-19yrs) IFA Blue tablet is administered through AnganwadiCentres. For F.Y. 2022-23 22,734 girls were covered.

National De-worming Day Campaign

Improving the health of children and adolescents is priority areas of NHM. National Deworming Days aims to improve the health and well being of pre-school and school age children by reducing soil transmitted Helminths (STH) infections through Mass Deworming Campaign. Deworming is a scientifically proven method of mitigation of intestinal worms and is a key intervention to curb anemia along with other proven interventions like sanitation, safe drinking water and hand washing.

A total of 38.37 lakh children were covered during the last round held in April, 2022 (Against a target of 48.85 lakh i.e. coverage of 78.55%).

Celebration of Adolescent Health Day:

Activities to increase awareness about adolescent health & development issues and to dispel various myths and misconceptions regarding various issues particularly related to Nutrition, Mental Health, Sexual & Reproductive Health and Menstruation etc. apart from various important adolescent issues plaguing the State in particular Menstrual Hygiene, Substance, Misuse, Teenage PregnancybesidestheincreasinglyrelevantissueofAnemiaandmalnutritionwereundertaken.

The activity was conducted at 45 venues across Delhi.

Menstrual Hygiene Scheme:

"UDAAN" scheme has been rolled out with an aim to improve accessibility of adolescent girls (non-school going) to sanitary napkins and also make them more aware of Menstrual Hygiene Management. A revised scheme that provisions for a pack of 10 sanitary napkins (against a pack of six earlier) every month completely "Free of Cost" (against at a subsidized cost of Rs.6/- per pack earlier) has been approved and is expected to be rolled out shortly.

A study to understand the menstrual hygiene practices among adolescent girls in rural and urban resettlement areas of Delhi was conducted by Maulana Azad Medical College (supported under National Health Mission). The report has been disseminated and the recommendations have been adopted by the State.

Anemia Mukt Bharat:

As a part of prevention and control of the growing menace of Anemia as public health problem especially among Adolescents as per the guidelines issued by MoHFW, GoI under Anemia Mukt Bharat, IFA Supplementation initiative for Under-5 children has been rolled out across the State wherein a bi-weekly dose of IFA Syrup is administered by parents/caregivers at home to the eligible children. Parents/Caregivers have been provided with a bottle (with auto dispenser) containing 50 ml of IFA syrup and have been trained by ASHAs to administer the syrup and keep the record in "compliance card" (provided by ASHA). Each such household has been provided with a handout with information regarding anemia, its detrimental effect, ways to prevent and treat anemia, about do's and don'ts of IFA Supplements, expected events that may follow IFA consumption and how to respond to these and seek help.Average monthly coverage of IFA Pink tablets among class 1st to 5th girls is 39,336 and among boys of class 1st to 5th 34,847 for F.Y. 2022-23 in Govt. and Govt. aided schools.

School Health Wellness Programme (SHWP)

The program aims to equip our children and adolescents acquire healthy behaviours early in life and make informed choices. Schools offer a unique platform for reaching out to this critical group. The program has already been rolled out in 143 schools with 286 Health and wellness Ambassadors. Till date the program has reached out to more than 400000 Adolescents

8. Maternal Health:

Maternal health is an important program under RMNCHA and is aimed to reduce Maternal morbidity and mortality through facilitating provision of quality antenatal and delivery services and ensuring postnatal services to pregnant women and implementation of maternal health programs/ schemes i.e. JSY, JSSK, PMSMA, LaQshya, etc.

JananiSurakshaYojana: It is a centrally sponsored scheme. The scheme aims to promote institutional delivery amongst Pregnant women (PW) belonging to Scheduled Caste, Scheduled Tribe & BPL families. PW are incentivized for undergoing institutional delivery in urban and rural area @Rs. 600/- and Rs.700/- respectively and BPL women is also incentivized with Rs. 500/- in case of home delivery.

The Accredited Social Health Activist (ASHA) is an effective link between the Govt. health facility and the pregnant women to facilitate in implementation of this program and she is also incentivized for facilitating the scheme in her allocated area.

The scheme is being implemented in all 11 districts of Delhi w.e.f. 2006.

All the health facilities enroll the eligible JSY beneficiaries i.e. PW belonging to SC/ ST/ BPL families during Antenatal clinics and then register them on RCH Portal and fetch the Aadhar linked Bank Account details of the client and necessary documents and she is given the JSY payment after delivery.

The mode of payment is Direct Benefit Transfer (DBT) into the account of beneficiary via PFMS Portal.

Year	Physical	Approved Budget	Financial Achievement (in
	Achievement	(in lakhs)	lakhs)
2022-23	2446	138.50	41.50

JananiShishuSurakshaKaryakram (JSSK): This scheme was launched in Delhi State w.e.f. September 2011. This is a centrally sponsored scheme. It aims to provide free and cashless service to all pregnant women reporting in all Government health institutions irrespective of any caste or economic status for normal deliveries / caesarean operations, for antenatal / postnatal complications and sick infants (from birth to 1 year of age).

The scheme aims to mitigate the burden of out of pocket expenses incurred by families of pregnant women and sick infants. Under the scheme no cash benefit is directly provided to beneficiary. Only the health facilities/ delivery points are provided fund under JSSK to enable them to provide free services to pregnant women and sick infants to fill the gap in demand under various subheads i.e. Diet, Drugs and Consumables,

Diagnostics, Blood Transfusion, Transport & no User Charges levied by the facility, if any.

S. No.	JSSK service delivery	Free Drugs & Consumables	Free Diet	Free Diagnostics	Free blood
1.	Total No. of Pregnant Women who availed the free entitlements.	275272	176435	253949	24416
	Total No. of sick infant who availed the free entitlements.	26551	\searrow	19285	884

Service Utilization: Referral Transport(RT) under JSSK

S No.		Referral transport services	State vehicles (CATS) + others
1.	No. of Pr	egnant Women who used RT services for:	
	i	Home to health institution	40457
	ii.	Transfer to higher level facility for complications	9784
	iii	Drop back home	8093
2.	No. of sid	ck infant who used RT services for:	
	i.	Home to health institution	*
	ii	Transfer to higher level facility for complications	986
	iii.	Drop back home	*

Comprehensive Abortion Care Services (CAC) Annual Report:

Unsafe abortion with its associated complications remains a public health challenge in spite of legalization of induced abortion through MTP Act 1971. Comprehensive Abortion Care(CAC) is an attempt to provide guidance on safe, quality and comprehensive care for abortion within the frame work of MTP Act. It is an integral component of Maternal Health Intervention as a part of National Health Mission (NHM).

Annual performance under CAC is as under:

Facility Type	Number of Facilities providing CAC services	Number of MTP conducted	Post- Abortal Contraceptive Services		
Public Health Facilities	41	4324	3608		
Private Health Facilities	733	22727	1207		
Total	774	27051	15815		

DAKSH Trainings are being conducted on strategies of Care around birth at National skill labs for enhancing knowledge and skills of service providers.

PradhanMantriSurakshitMatritvaAbhiyan (PMSMA)

PMSMA was implemented in Delhi State as per MOHFW, GOI guidelines w.e.f. July2016. It aims to provide quality antenatal care, identifying High risk PW beneficiaries and initiating appropriate treatment without delay so that IMR and Maternal mortality ratio can be reduced.

It is held on 9th of every month at all the Govt. health facilities. A due list of all missed out/dropped out pregnant women in 2^{nd} 3^{rd} trimester & High risk pregnant women from the community is prepared by ASHAs and mobilized to the Govt. health facilities for ANC check-up.

Year	Total no. of Pregnant women antenatal care on PMSMA day	High risk Pregnant Women clients identified		
2022-23	51836	7996		

Services provided on PMSMA day is given below:

Kilkari messages:

This is a mobile service that delivers time-sensitive 72 audio messages (Voice Call) about pregnancy and child health care directly to the mobile phones of pregnant women/ mother/ parents. Essentialities-Entry in RCH portal, Correct mobile no of the beneficiary, LMP, Date of delivery etc.

LaQshya :Labour Room Quality Improvement initiative---

Ministry of Health and Family Welfare, India has launched an ambitious program "LaQshya- Labour room quality improvement initiative on 11th Dec. 2017. The program is targeted as an approach to strengthen key processes related to Labourroom and Maternity OTs to reduce maternal mortality and morbidity. In Delhi four public health facilities Pt. Madan Mohan Malviya, Sanjay Gandhi Memorial, Guru Gobind Singh Govt. Hospital and Acharya Shree Bhikshu Hospitals are now LaQshya certified.

Maternal Death Surveillance and Response: Maternal deaths occurring in state are reviewed at facility, district and State level so that gaps are identified and corrective actions are taken to prevent future deaths. Most maternal deaths are reported from Medical Colleges Hospitals and high case load delivery points. In 2022-23,.....% maternal deaths reported belonged to neighboring/other states.

During 2022-23, total 609 Maternal Deaths were reported (Source-HMIS Portal). Out of these 559(91%) were reviewed.

9. PC & PNDT:

Directorate of Family Welfare is the nodal department for the implementation of PC & PNDT Act in Delhi. The PC PNDT Act is being implemented through statutory bodies i.e., State Supervisory Board, State Advisory Committee, State Appropriate Authority, District Appropriate Authority & District Advisory Committee as per the provisions of PC & PNDT Act.

Sex Ratio at Birth as per Civil Registration System data for 2021 is 932

The various IEC/ BCC Activities were carried out for the awareness of society in regard to the important girl child

- Massive Effective outdoor campaign on Punishment & deterrent provision, empowerment of Girl Child and Women, Importance of Girl child and Informer Reward Scheme under PC& PNDT Act through hoardings, Newspaper advertisement& other communication mode on the occasion of International Women's Day on 08.03.2022 and on the occasion of National Girl Child Day on 24.01.2022 and celebration of National Girl Child Day every year.
- Sensitization cum State Level Training on effective implementation of the Act for Stake Holders with District Appropriate Authority, SDM, District Nodal Officers, District Advisory committee, State Advisory Committee members on virtual platform in 2020&State level Workshop on effective implementation of PNDT Act in 2022.
- Community Awareness programs are being conducted by organizing Health Talks, Focal Group Discussion, NukkadNatak, Beti Shakti Abhiyan and the BetiUtsav was celebrated 18th Jan – 31st Jan 2022 and is celebrated every year.

	Year April 22 - March 23										
Sl. No.	Total No. of Centers	Inspection	Ultrasoun d machine sealed	Cancella tion/ Suspens ion	DAC meeting	Show Cause notice issued	Ongoing Court cases	New court Case during this period	Conviction s		
Q.1	1673	241	3	30	14	40	71	2	0		
Q.2	1692	247	5	17	15	49	73	4	1		
Q.3	1700	166	11	20	8	29	74	1	0		
Q.4	1719	151	0	3	14	27	73	1	0		
Tot al	1719	805	19	70	51	145	73	8	1		

The annual report in term of physical achievements is as:

End of the Report