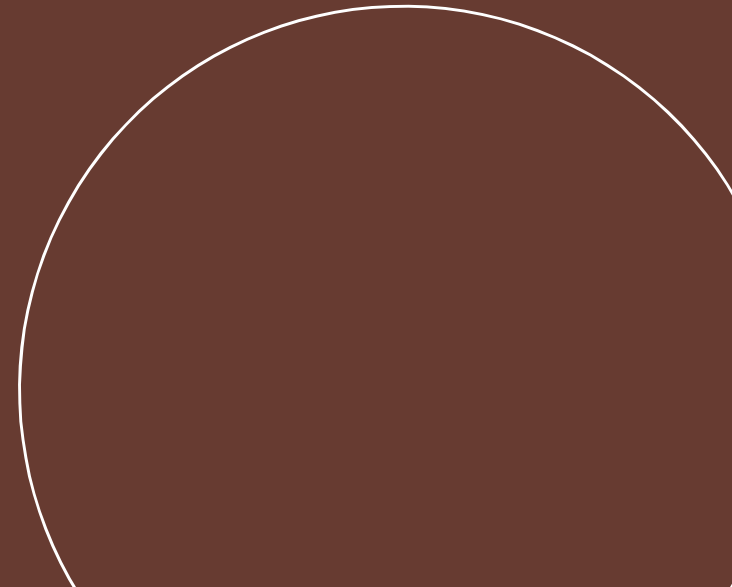
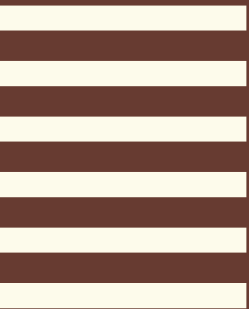


# Local SDGs focusing on Public issues on health



# 3 GOOD HEALTH AND WELL-BEING



## SDG Target



70

FIRST Indicator

Maternal Mortality Ratio (per 1 lakh live births)

25

SECOND Indicator

Under 5 Mortality Rate (per 1,000 live births)

100

THIRD Indicator

Percentage of children in the age group 9-11 months fully immunized

242

FOURTH Indicator

Total case notification rate of Tuberculosis per 1,00,000 population

0

FIFTH Indicator

HIV incidence per 1,000 uninfected population

100

SIXTH Indicator

Percentage of institutional deliveries out of the total deliveries reported

7.83

SEVENTH Indicator

Monthly per capita out-of-pocket expenditure on health as a share of Monthly Per capita Consumption Expenditure (MPCE)

45

EIGHTH Indicator

Total physicians, nurses and midwives per 10,000 population



# SDG India Index

To measure India's performance towards the SDG Goal-3, **ten** national level indicators have been identified, which capture eight out of the thirteen SDG targets for 2030 outlined under this Goal. India has attained:



113

MATERNAL MORTALITY  
RATIO per 1,00,000  
live births



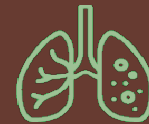
36

CHILDREN aged  
under five years DIE  
for every 1,000 live births



37

PHYSICIANS, NURSES  
AND MIDWIVES per  
10,000 population



177

TUBERCULOSIS  
CASES notified per  
1, 00,000 population



0.05

HIV INCIDENCE per 1,000  
uninfected population in  
2019 from 0.07 in 2017



13%

of monthly per capita  
household consumption  
EXPENDITURE IS ON  
HEALTH



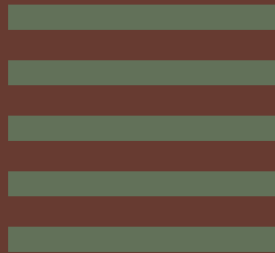
94.4%

of TOTAL DELIVERIES  
reported happen in  
health institutions



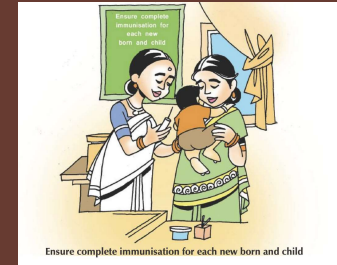
91%

CHILDREN  
aged 9-11 months  
IMMUNISED



# Role of PRIs in SDG-3

Gram Panchayat can work for different initiatives launched by the Ministry of Health and Family Welfare through



FACILITATE

PROMOTE

USE IEC  
STRATEGIES

ENSURE

MAINTAIN  
AND  
MONITOR

# Role of PRIs in SDG-3

Gram Panchayat can work for different initiatives launched by the Ministry of Health and Family Welfare through



Activity	MoHFW initiative	Sub-Activity
<b>FACILITATE</b>	<ul style="list-style-type: none"> <li>• Social Audits</li> <li>• PM-JAY/state specific health insurance scheme</li> <li>• Non-communicable disease control programme</li> <li>• National Programme for Palliative Care</li> <li>• National Programme for Healthcare of Elderly</li> <li>• XVth Finance Commission and PMABHIM</li> </ul>	<ul style="list-style-type: none"> <li>• Social audits of maternal deaths</li> <li>• Enrolment of vulnerable in health insurance schemes</li> <li>• Awareness of non-communicable diseases</li> <li>• Home-based palliative and elderly care with health workers</li> <li>• Prevention of vector-borne diseases</li> <li>• Rational utilisation of funds</li> </ul>

# Role of PRIs in SDG-3

Gram Panchayat can work for different initiatives launched by the Ministry of Health and Family Welfare through



Activity	MoHFW initiative	Sub-Activity
PROMOTE	<ul style="list-style-type: none"><li>• Ayushman Bharat-Health and Wellness Centres</li><li>• VISHWAS Campaign</li></ul>	<ul style="list-style-type: none"><li>• Early diagnosis and timely treatment of diseases</li><li>• Hygiene and sanitation through seasonal campaigns</li><li>• Awareness on healthy life</li></ul>

# Role of PRIs in SDG-3

Gram Panchayat can work for different initiatives launched by the Ministry of Health and Family Welfare through




<b>Activity</b>	<b>MoHFW initiative</b>	<b>Sub-Activity</b>
<b>USE IEC STRATEGIES</b>	<ul style="list-style-type: none"><li>• IEC material promoted by ASHAs, School Health Ambassadors, Aanganwadi Workers</li></ul>	<ul style="list-style-type: none"><li>• Help families with newborns, pregnant women care</li><li>• Promote immunization and breastfeeding</li><li>• Address substance abuse, including narcotic drug abuse and harmful use of alcohol</li></ul>



# Role of PRIs in SDG-3

Gram Panchayat can work for different initiatives launched by the Ministry of Health and Family Welfare through

<b>Activity</b>	<b>MoHFW initiative</b>	<b>Sub-Activity</b>
<b>ENSURE</b>	<ul style="list-style-type: none"><li>• Jan Arogya Samiti at Health and Wellness Centre</li><li>• RMNCHA initiatives under NHM like MAA, ANC/PNC Visits, Mission Vikas, COT</li><li>• National Mental Health Programme</li></ul>	<ul style="list-style-type: none"><li>• Effective functioning of village health sanitation and nutrition committees and Rogi Kalyan Samiti</li><li>• Linkage with referral centre and 24x7 availability of emergency services delivery infrastructure</li><li>• Access to RMNCHA services</li><li>• Collaboration with health functionaries for mental health care</li></ul>








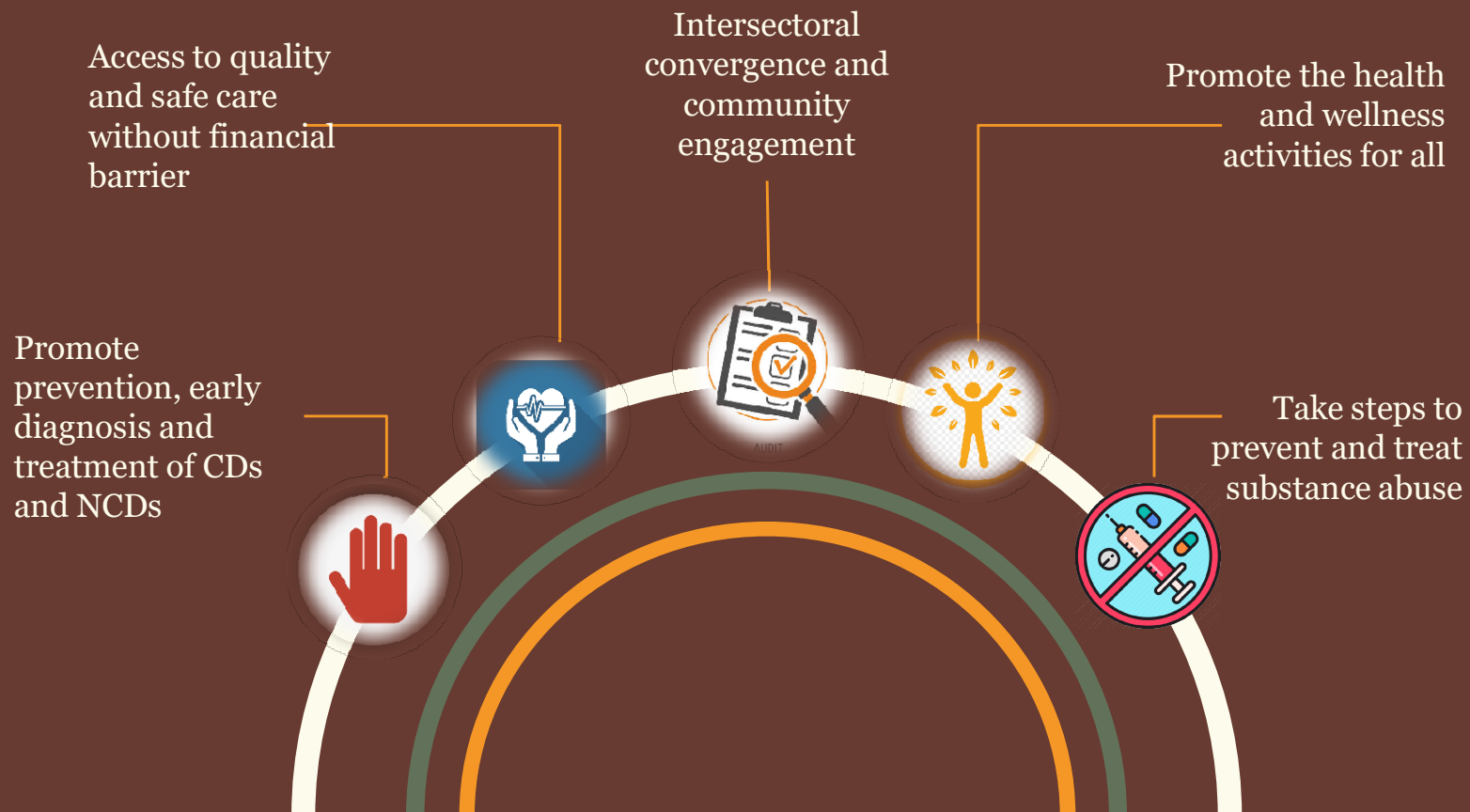
## Role of **PRIs** in SDG-3

Gram Panchayat can work for different initiatives launched by the Ministry of Health and Family Welfare through

<b>Activity</b>	<b>MoHFW initiative</b>	<b>Sub-Activity</b>
<b>MAINTAIN AND MONITOR</b>	<ul style="list-style-type: none"><li>• National Quality Assurance Standards/Kayakalp</li><li>• National Vector Borne Disease Control Programme</li></ul>	<ul style="list-style-type: none"><li>• Monitor Quality of Grievance services through patient feedback</li><li>• Grievance redressal</li><li>• Ensure cleanliness to combat malaria, waterborne diseases and other communicable diseases</li></ul>



# Focused activities for **HEALTHY VILLAGE** through PRIs



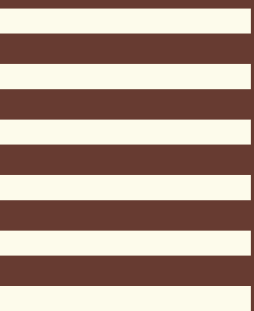


# Fifteenth Finance Commission (FC-XV)- Health Grants Through Local Government

and

## Pradhan Mantri Ayushman Bharat Health Infrastructure Mission (PM-ABHIM)

**Empowering PRIs with central sch**



## Rural Component

Rs 43,928 crores

## 15<sup>th</sup> FC

Rs 70,051 crores

## Urban Component

Rs 26,123 crores



**Building Strengthening SHCs, PHCs and CHCs**

(Rs 7167 crores)



**Conversion of Rural PHCs and SHCs to HWCs**

(Rs 15105 crores)



**Support for Diagnostic Infrastructure at primary healthcare facilities**

(Rs 16377 crores)



**Block Public Health Units**

(Rs 5279 crores)



**Urban Health and Wellness Centres**

(Rs 24028 crores)



**Support for Diagnostic Infrastructure at primary healthcare facilities**

(Rs 2095 crores)

# EVIDENCE FROM THE FIELD

- There are four kinds of interventions in the health sector – prevention, promotion, cure and rehabilitation. Except curative role i.e. providing treatment, Gram Panchayats have primary responsibility in all three remaining other aspects - preventive, promotive and rehabilitative health care
- COVID Vaccination
- GP providing support to ASHA and AF in their routine public health functions
- Through community based platforms – active engagement for promotive and preventive care
- Social accountability mechanism
- Support being provided to CHOs – help building infrastructure for accommodation
- Supporting the health functionaries

# Existing mechanism under NHM-VILLAGE LEVEL

## ASHA :

Selected through Gram Sabha.

She is the bridge between the community and the health facility in the panchayat



## VHSNC :

- A multi-stakeholder committee in every village, Chaired by the Panchayat member of the village and has 50% of women members. - also a Sub-committee of the GP Standing Committee on Health
- ASHA is the member secretary. Untied grant – Rs 10,000 pa, authorised to mobilise additional resources locally.
- Largely focused on health influencing issues in the village like water, sanitation, disease profile, enabling and monitoring nutritional supplementation program.
- Develops Village Health Plan



# Existing mechanism under NHM-FACILITY LEVEL

## **JAN AROGYA SAMITIS (JAS) :**

- A multi-stakeholder committee at HWC (both SHC and PHC level)
- Chaired by the Gram Panchayat Chairman; Members : panchayat members, youth, women SHG members, patient representatives & AB-HWC functionaries.
- CHO/MO : the member secretary.
- Has the oversight responsibility on the overall performance of the AB-HWC.



## **Rogi Kalyan Samiti (RKS):**

- Headed by the Panchayat Sarpanch at facility level
- Oversees the functioning of the respective health care facility and has untied grant depending the category/status of the facility.



# Existing mechanisms

## **DISTRICT LEVEL :**

- The District Health Mission chaired by the Chairman of Zilla Parishad is the overarching body to plan and monitor the Health activities in the district.

District Medical/Health Officer is the Member Secretary

The Zilla Parishad/ The Health Standing Committee in the Zilla Parishad is directly responsible for budget of health sector and planning for people's needs.



## **At GP level:**

- The Health Sub-Committee at the Gram Panchayat consolidates and approved the Gram Panchayat Health Plan as part of the Gram Panchayat Development Plan



# Role of Gram Panchayat in localizing SDGs

- ✓ Active participation in community-based platforms under NHM
- ✓ Support to Front line workers in performing their public health functions; and effective service delivery
- ✓ Support for infrastructural facilities – VHND, VHSNC meeting, JAS – from its own sources of revenue
- ✓ Mobilization support for VHND and outreach services
- ✓ Sharing of information; mobilization, awareness

