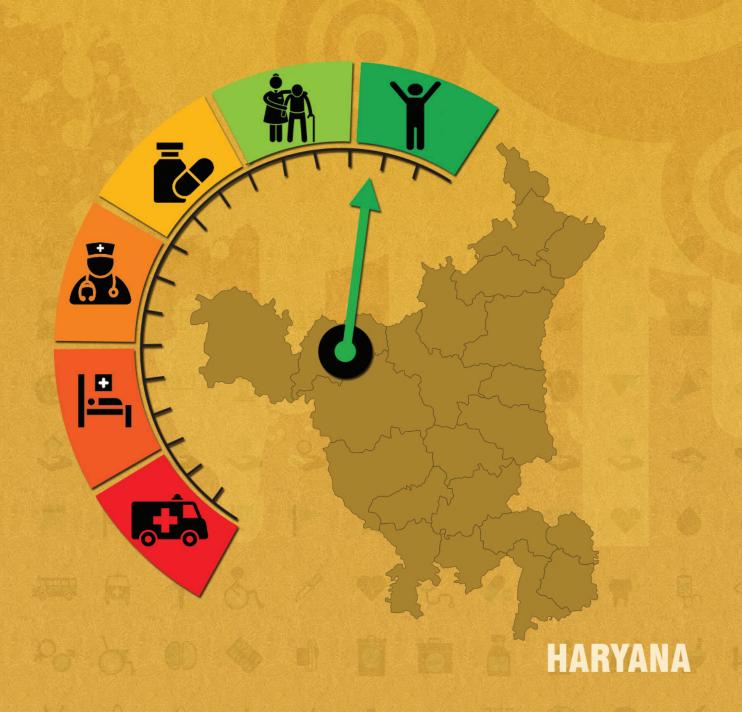




# **HEALTH DOSSIER 2021**

**Reflections on Key Health Indicators** 



# DISTRICTS VISITED IN COMMON REVIEW MISSIONS

CRM	Districts Visited				
3 <sup>rd</sup>	Rewari	Panchkula			
5 <sup>th</sup>	Hissar	Mewat			
7 <sup>th</sup>	Palwal	Ambala			
9 <sup>th</sup>	Sonipat	Yamunanagar			
11 <sup>th</sup>	Bhiwani	Gurugram			
14 <sup>th</sup>	Mewat	Fatehabad			

# **HARYANA**

### 1. BACKGROUND

### 1.1 Haryana Profile

Haryana is positioned<sup>a</sup> 21<sup>st</sup> in India for a geographical spread of 44,212 km<sup>2</sup> (RHS 2019). It is divided into 22 districts and is estimated to have a population of over 2.53 crores, which accounts for approximately 2.09 percent of India's total population<sup>b</sup>. It is projected that the population would reach around 2.94 crores by 2021 (Census Population Report 2019). As per Census 2011, the Scheduled Caste (SC) population is 0.51 crores (20.17%). Out of the 22 districts, top five SC dominant districts account for 32.92% of SC population in Haryana (Figure 1 & Annexure 1, Profile). Haryana Around 65.12% of the population reside in rural areas, while the rest constitute the urban population.

At present, 28 cities<sup>c</sup> are covered under National Urban Health Mission, with a

**Figure 1: Top 5 ST & SC Dominant Districts** Panchkula Yamunanag Kurukshetra Kaithal Karnal Fatehabad Panipat Hisar Sonipat Rohtak Bhiwani Jhajjar Charki Dadri Gurgaon Faridabad Palwal SC Dominant Districts

Including all States & UTs

Census 2011

QPR NHM MIS Report as on 31 Dec 2020

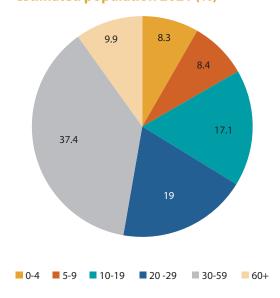
catchment of 88.21 lakh urban population. There are no metropolitan cities, but has 2 Million-plus cities in the state. The total length of roads<sup>d</sup> in Haryana is 81,386 km (1.63%<sup>e</sup>), in which, the length of the national highways is 2623 km (2.3%f) and state highways is 1801 km (1.02%g). About 46.8% of the main worker population are self -employed in the State, followed by wage earners and casual workers (43.2%)h.

A detail report on the key indicators has been attached as Annexure 1

### 1.2 Demography

Out of the 22 districts, 15 districts have a population between 10-20 lakhs, and 6 districts have a population less than 10 lakhs (Annexure 1.1 Haryana profile). The Haryana's Sex ratio at birth (843 females for every 1000 males) is less than the national average of 899 (Annexure 1.2). It is estimated that 17.1% of the total population are in the age group of 10-19 years, 46.4% within 20 to 59 years; while 9.9% are 60 years and above (Figure 2). The crude birth rate and the crude death rate have declined from 24.3 & 6.7 in 2005 to 20.1 & 5.9 in 2019, respectively (Annexure 2; figure 2). The literacy rate increased from 67.9% in 2001 to 75.6% in 2011, with male & female literacy rates being 84.1% and 65.9%, respectively (Annexure 1.1). As per the ESAG 2018 report, the Gross Enrollment Rate (GER)<sup>i</sup> is 26.1% for higher education, 59.59% for senior secondary education, 84.22% for secondary education, 91.77% for elementary education, and 91.41% for primary education.

Figure 2: Haryana - distribution of estimated population 2021 (%)



### 1.3 Elderly

Population ageing has profound social, economic, and political implications. Elderly people aged 60 years and above constitute 9.9% of the Haryana's total population. The life expectancy at 60 years of age is 17.8 and 20.2 for males and females, respectively (2014-2018). In Haryana, 42% of the elderly females and 22% elderly males living in rural areas are economically fully dependent on others. Whereas in urban areas, 41% of the elderly females and 23% elderly males are economically fully dependent on others. The old age dependency ratio is 14.1 in 2011; which is 13.2 for males and 15.1 for females; 15.3 in rural & 11.9 in urban areas. The illness (any deviation from the state of physical and mental well-being) perception among the elderly is reported as 27% for men and 23% for women, both of which are below the national average of 31% (Elderly in India 2016 report).

Basic Road Statistics 2019, MoRTH

Percentage of total length of roads in Haryana

Percentage of total length of National Highways in the country

<sup>&</sup>lt;sup>9</sup> Percentage of total length of State Highways in the country

h Annual Report PLFS 2018-19, http://mospi.nic.in/sites/default/files/publication\_reports/Annual\_Report\_PLFS\_2018\_19\_HL.pdf

Gross Enrolment Rate (GER): Total enrolment in a specific level of education, regardless of age, expressed as a percentage of the eligible official school-age population corresponding to the same level of education in a given school-year. School-age Population: Population of the age group which officially corresponds to the relevant level of education; senior secondary education is XI-XII, secondary is IX-X, primary is I-V and elementary is I-VIII

### 2. HEALTH STATUS AT A GLANCE

### 2.1 Maternal Health

Haryana has been able to provide RMNCHA+N<sup>j</sup> services with major focus on primary and secondary care services under the NHM. Indicators for Antenatal care (ANC)k, institutional deliveries, C sections, distribution of IFA<sup>1</sup> tablets, follow up of high-risk pregnancies, provision of postnatal and newborn care have shown substantial improvement since 2005 (NFHS 4 & 5). The maternal mortality ratio has significantly declined from 153 (SRS MMR Bulletin 2007-09) to 91 (SRS MMR Bulletin 2016-18) per 1,00,000 live births. In Haryana, 77% of women received 4 ANC check-ups (Annexure 1.4). As per NFHS 5 (Annexure 3), Hisar, Kaithal, Karnal, Panchkula and Rohtak districts reported relatively better ANC coverage ranging from 68.8% to 84.7%; and Faridabad, Gurgaon, Jind, Mewat and Panipat districts reported poor ANC coverage ranging from 45.9% to 51.2%. As reported in HMIS 2019-20, around 95.9% of the deliveries took place in institutions, out of which 58.5% took place in public health facilities. Total percentage of C-sections is (18.9%) is higher than the WHO's standard (10-15%); and out of the total reported C-sections, about 26.8% are conducted at private facilities in Haryana. Around 60.9% of women received their first postpartum check-up between 48 hours and 14 days (Annexure 1.4). Prevalence of anaemia in women aged 15-49 years decreased from 62.7% (NFHS-4) to 60.4% (NFHS 5). Anaemia in females of reproductive age group is more than thrice than that in men of similar age group (Annexure 2, figure 5).

Refer Annexure 3 for a detailed district wise comparison.

### 2.2 Newborn, Infant & Child Health

Ever since the inception of NHM in 2005, Haryana has shown a significant decline in IMR from 60 (2005) to 27 (2019), which is lower than the national average of 30 (Annexure 2, Figure 1). Similarly, NNMR<sup>m</sup> and Still Birth (per 1,000 live births) rates have also significantly decreased from 34.9 and 6.7 (2005) to 22 and 6 (2019) respectively (Annexure 2, figure 4). Improvement in the indicators can be attributed to several interventions at the State level, including infrastructure strengthening under NHM, such as establishment of SNCUs, NBSUs and NBCCs (Annexure 1.4). The life expectancy at birth has also improved from 67 (2006-10) to 69.8 (2014-18), which is above the national average of 69.4 years (Annexure 2, Figure 3). As per NFHS 5 report, the low SRBs<sup>n</sup> ranging between 764 – 821 are reported in Ambala, Kaithal, Karnal, Rewari and Sirsa districts, while the comparatively high SRBs ranging between 955 – 1282 are reported in Charkhi Dadri, Faridabad, Jhajjar, and Mahendragarh districts.

Full vaccination ocverage for children between 12 – 23 months of age has increased from 79.4% (NFHS 4) to 81.1% (NFHS 5). The percentage of under 6-months children exclusively breastfed has increased from 50.3% (NFHS 4) to 69.5% (NFHS 5). The prevalence of childhood anaemia decreased from 71.7% (NFHS 4) to 70.4% (NFHS 5) in children aged 6-59 (Annexure 2, Figure 5). As per NFHS 5 report, Charkhi Dadri, Gurgaon, Jhajjar, Panchkula and Sonipat districts reported relatively low burden of stunting ranging from 15.6% to 23.9%; and Bhiwani, Kaithal, Karnal, Mewat and Palwal districts reported considerably

Reproductive, Maternal, Newborn, Child, Adolescent Health & Nutrition

k Antenatal Check up

Iron Folic Acid Tablets

<sup>&</sup>lt;sup>m</sup> Neonatal Mortality Rate

Sex Ratio at Birth

NFHS 5 Haryana Factsheet, based on information from vaccination card only

high burden, ranging from 29% to 44.4%. For under-5 wasting- Bhiwani, Faridabad, Jhajjar, Jind and Mahendragarh districts reported a low burden ranging from 6% to 8.8%; and Fatehabad, Gurgaon, Hisar, Kaithal and Mewat districts reported relatively high burden ranging from 14.2% to 20.7%.

### 2.3 Family Planning

The TFR<sup>p</sup> has reduced from 2.8 in 2005 to 2.2 in 2018 (Annexure 2, Figure 4). As per NFHS 5 report, the total unmet need in Haryana is reported as 7.6% and unmet need for spacing as 3.3%. Mewat district reported the highest total unmet need of 19.6%; Fatehabad and Jhajjar reported the lowest (4.6%). Approximately 60.5% of married women reported to avail any modern method of family planning in the State (NFHS 5); with the sterilization acceptance among females being 32.3%, and 0.9% among males.

### 2.4 Communicable Diseases

Haryana has 22 districts having functional IDSP units<sup>q</sup>. The proportion of communicable, maternal, neonatal, and nutritional diseases [CMNND] contribute to 26.88% of total disease burden (Annexure 1.4). Lower respiratory tract infection, neonatal preterm birth, diarrheal diseases, dietary iron deficiency and drug susceptible TB are the leading causes of deaths due to CMNND in Haryana (Annexure 2, Figure 6'). As per QPR report, for TB, the annualized total case notification rate is 245% and NSPs success rate is 79% as opposed to the national averages of 163% and 79%, respectively. For NLEP<sup>t</sup>, the reported prevalence rate of 0.13 per 10,000 population is less than the national average of 0.61. In FY 2019-20, no deaths due to Malaria, Kala Azar and Dengue are reported in Haryana.

### 2.5 Non-Communicable Diseases (NCDs) & Injuries

It is reported that as high as 67.3% deaths are premature in the State, while disability or morbidity accounts for 32.7%. Ischaemic heart diseases, COPD & Diabetes Mellitus Type 2 are the major causes of DALYs in the State (Annexure 2, Figure 6). NCDs contribute to 60.99% of DALYs, whereas, injuries contribute to 12.13% of DALYs in the State. Haryana is positioned 13th in the country for the total number of fatal road accidents with respect to other States (Annexure 1.4). As per NFHS 5 report, it is reported that 2.5% of women and 29.1% of men used any kind of tobacco, while 0.3% of women and 16.1% of men consumed alcohol. Overall, ambient particulate matter pollution, high systolic blood pressure, smoking, high fasting plasma glucose and high body mass index are the top five major risk factors for all DALYs (Annexure 2, figure 7).

### 2.6 Health Care Financing

Haryana's Net State Domestic Product (NSDP) for FY 2018-19 is ₹ 6,66,075 crores. The State is positioned 5<sup>th</sup> out of 32 states in terms of per capita<sup>u</sup> of ₹ 2,36,147. According to NHA 2017-18, the per capita Government Health Expenditure in the Haryana is ₹ 1,428 which is below the national average of ₹ 1,753. On the other hand, the  $OOPE^v$  as a share of Total Health Expenditure is 50.4%, which is more than

P Total Fertility Rate

q QPR NHM MIS Report (status as on 01.03.2020)

https://vizhub.healthdata.org/gbd-compare/india

<sup>&</sup>lt;sup>s</sup> New Smear Positive

<sup>&</sup>lt;sup>t</sup> National Leprosy Eradication Programme

<sup>&</sup>lt;sup>u</sup> Directorate of Economics & Statistics

Out of Pocket Expenditure

the national average of 48.8%. As per NSSO 2017-18, the OOPE for IPD care per hospitalized case in rural areas is estimated to be around ₹ 9,170 in public facilities, ₹ 26,652 in private facilities; whereas for urban areas, it is around ₹ 8,671 in public facilities and ₹ 27,287 in private facilities. For childbirth in rural areas, OOPE is estimated to be around ₹ 1,767 in public facilities & ₹ 15,618 in private facilities; whereas in urban areas - OOPE was estimated to be around ₹ 2,713 in public facilities and ₹ 51,287 in private facilities. In public health facilities, the share of expenditure on medicines as a proportion of inpatient medical expenditure is estimated as 49% in rural and 36% in urban areas; whereas for diagnostics, it is 14% in rural and 13% in urban areas (Annexure 1.6).

### 2.7 Health Infrastructure

As per the recent RHS data, the number of SCs, PHCs and CHCs have been increasing since 2005 (Annexure 2, Figure 8). There is shortfall in the required SCs, PHCs & CHCs (Annexure 2, Figure 9). Currently, there are 2617 SCs, 385 PHCs, and 118 CHCs in place against the required 3474 SCs, 579 PHCs and 144 CHCs in rural areas, thereby amounting to a shortfall of 25%, 34% and 18% respectively. In urban settings, there are 100 PHCs in place against the required 237, thereby amounting to a shortfall of 58%. The State has 22 DHs, 21 SDHs and 5 government medical colleges.

Under Government of India flagship program of Ayushman Bharat, a total of 1122 (659 SHCs, 362 PHCs & 101 UPHCs) primary care facilities have been upgraded and are currently operational as Health & Wellness Centres (HWCs) to deliver Comprehensive Primary Health Care (as on 22<sup>nd</sup> Dec 2021, Annexure 1.3).

In Haryana, 7 districts are equipped with MMUs under the NRHM while none under NUHM districts. Haryana has 97.81% of required ASHAs in position under the NRHM and 94.47% under the NUHM. The doctor to staff nurse ratio in place is 1:1, with 5 public health providers (MO, specialists, staff nurse & ANM) per 10,0000 populations (Annexure 1, Table 1.5).

Recent data (Annexure 1.3) reveals that out of 1000 population who availed services from public health facilities, 1230.0 availed (events) OPD services and 40.3 availed (events) IPD services. As per the NSSO data (2017-18), 25% of all OPD cases in rural areas and 10% in urban areas; and 37% of all IPD cases in rural areas & 20% in urban areas utilized public health facilities. The public health facility utilization in Haryana is below the national averages for both rural and urban areas (Annexure 1.6).

# **ANNEXURE 1: KEY INDICATORS**

Indicator	Haryana 2011 <sup>1</sup>	India	
Total Population (In Crore)	2.54	121.08	
Rural (%)	65.12	68.85	
Urban (%)	34.88	31.14	
Scheduled Caste population (SC) (in crore)	0.51 (20.17%)	20.14 (16.63%)	
Scheduled Tribe population (ST) (in crore)	0	10.45 (8.63%)	
Total Literacy Rate (%)	75.6	72.99	
Male Literacy Rate (%)	84.1	80.89 64.64	
Female Literacy Rate (%)	65.9		
Number of Districts in the Haryana <sup>2</sup>	22		
	Population <sup>1</sup>	Districts <sup>1</sup> (Numbers)	
	<10 Lakhs	6	
Number of districts per lakh population in <b>Haryana</b> (Census 2011)	≥ 10 Lakhs - <20 Lakhs	15	
(	≥20 Lakhs - <30 lakhs	0	
	≥30 Lakhs	0	
ST SC Dominant (To	≥30 Lakhs  op 5) Districts of Haryana¹	0	
		0	
Fateha	op 5) Districts of Haryana <sup>1</sup>	0	
Fateha Sirs	op 5) Districts of Haryana <sup>1</sup> abad - 30.18%	0	
Fateha Sirs Amb	op 5) Districts of Haryana <sup>1</sup> abad - 30.18% a - 29.90%	0	
Fateha Sirs Amb Yamuna	op 5) Districts of Haryana <sup>1</sup> abad - 30.18% a - 29.90% ala - 26.25%	0	

1.2 Key Health Status & Impact Indicators				
Indicators	Haryana	India		
Infant Mortality Rate (IMR) <sup>3</sup>	27	30		
Crude Death Rate (CDR) <sup>3</sup>	5.9	6.0		

w Sources are mentioned at the end of Annexure 1

Crude Birth Rate (CBR) <sup>3</sup>	20.1	19.7
Maternal Mortality Ratio (MMR) <sup>3</sup>	91	113
Neo Natal Mortality Rate (NNMR)⁴	22	23
Under Five Mortality Rate (U5MR) <sup>4</sup>	36	36
Still Birth Rate⁴	6	4
Total Fertility Rate (TFR)⁴	2.2	2.2
Life expectancy at birth⁵	69.8	69.4
Sex Ratio at Birth⁴	843	899

1.3 Key Health Infrastructure Indicators <sup>x</sup>						
Indicators					Numbers (Total)	
Number of District Hospitals <sup>2</sup>					22	
Number of Sub District Hospital <sup>2</sup>					21	
Number of Government (Central + State) Medic	cal College <sup>6</sup>				5	
Number of Private (Society + Trust) Medical Col	leges <sup>6</sup>				7	
Number of AB-HWCs functional as of 22 <sup>nd</sup> December 2021 <sup>16</sup>	f 22 <sup>nd</sup> Status Target Target (Total) FY (2020-21) FY (2021-22)		Target FY (2022-23)			
SHC-HWC	659	796		1522	2006	
PHC-HWC	362	368		368	368	
UPHC-HWC	101	100		100	100	
Total-HWC	1122 1264 1990		1990	2474		
Rural <sup>2</sup>	Require	ed (R)	ı	n place (P)	Shortfall (S) (%)	
Number of Community Health Centres (CHC)	144		118		18.06	
Number of Primary Health Centres (PHC)	579	)	385		33.51	
Number of Sub Centres (SC)	3,47	4	2,617		24.67	
Number of functional First Referral Units	DH			SDH	СНС	
(FRUs)	22			15	12	
Urban <sup>2</sup>	Require	ed (R)	I	n place (P)	Shortfall (S) (%)	
Number of PHC	237	7 100		100	57.81	
Tribal <sup>2</sup>	Require	ed (R)	ı	n place (P)	Shortfall (S)%	
Number of CHC	N/A	١		N/A	N/A	
Number of PHC	N/A	\ <u> </u>		N/A	N/A	
Number of SC		N/A N/A		N/A		

<sup>&</sup>lt;sup>x</sup> Sources are mentioned at the end of Annexure 1

Patient Service <sup>9</sup>	Haryana	India
IPD per 1000 population	40.3	62.6
OPD per 1000 population	1230.3	1337.1
Operation (surgeries) major (General and Spinal Anaesthesia) per 10000 population	21.4	36.4

1.4 Major Health Indicator <sup>y</sup>		
% Share of DALYs to Total Disease Burden (GBD 2019) <sup>7</sup>	Haryana	India
% DALY <sup>z</sup> accountable for CMNNDs <sup>aa</sup>	26.88	27.46
% DALY accountable for NCDs	60.99	61.43
% DALY accountable for Injuries	12.13	11.11
Birth, Death Registration & Medical Certification of Cause of Death (MCCD) Indicator <sup>8</sup>	Haryana	India
Level of Birth Registration (%)	90.6	92.7
Level of Death Registration (%)	100	92
Percentage of medically certified deaths to total registered deaths (%)	19.4	20.7
RMNCHA+N		
Maternal Health <sup>9</sup>	Haryana	India
% 1st Trimester registration to Total ANC Registrations	75.6	71.9
% Pregnant Woman received 4 ANC check-ups to Total ANC Registrations	77	79.4
Total Reported Deliveries	5,14,301	21410780
% Institutional deliveries to Total Reported Deliveries	95.9	94.5
% Deliveries conducted at Public Institutions to Total Institutional Deliveries	58.5	67.9
% Deliveries conducted at Private Institutions to Total Institutional Deliveries	41.5	32.1
% C-section deliveries (Public + Pvt.) to reported institutional (Public + Pvt.) deliveries	18.9	20.5
% C-sections conducted at public facilities to Deliveries conducted at public facilities	13.3	14.1
% C-sections conducted at Private facilities to Deliveries conducted at private facilities	26.8	34.2
% Women getting 1st Post-Partum Checkup between 48 hours and 14 days to Total Reported Deliveries	60.9	53.4
Neonatal <sup>9</sup>	Haryana	India
% live birth to Reported Birth	98.7	98.8
% Newborns having weight less than 2.5 kg to Newborns weighed at birth	11.8	12.4
% Newborns breast fed within 1 hour of birth to Total live birth	92.2	89.9

Sources are mentioned at the end of Annexure 1

<sup>&</sup>lt;sup>z</sup> Disability Adjusted Life Years

<sup>&</sup>lt;sup>aa</sup> Communicable, Maternal, Neonatal, and Nutritional Diseases

New Born Care Units Established <sup>11</sup>	Haryana	India
Sick New Born Care Unit (SNCU)	30	895
New Born Stabilization Unit (NBSU)	66	2418
New Born Care Corner (NBCC)	318	20337
Child Health & Nutrition <sup>10</sup>	Haryana (NFHS 5)	India (NFHS 5)
Prevalence of diarrhoea (reported) in the last 2 weeks preceding the survey (%)	4.9	7.3
Children with diarrhoea in the last 2 weeks who received oral rehydration salts (ORS) (%)	46.6	60.6
Children under 5 years who are underweight (weight-for-age) (%)	21.5	32.1
Child Immunization <sup>10</sup>	Haryana (NFHS 5)	India (NFHS 5)
Children age 12-23 months fully vaccinated based on information from vaccination card only (%)	81.1	83.8
Children age 12-23 months who have received BCG (%)	95	95.2
Children age 12-23 months who have received first dose of measles containing vaccine (%)	89.4	87.9
Family Planning <sup>10</sup>	Haryana (NFHS 5)	India (NFHS 5)
Unmet need for spacing (%)	3.3	4
Communicable Diseases		
Integrated Disease Surveillance Programme (IDSP)11	Haryana	India
Number of districts with functional IDSP unit	22	720
Revised National Tuberculosis Control Programme (RNTCP) <sup>11</sup>	Haryana	India
Annualized total case notification rate (%)	245	163
New Smear Positive (NSP) Success rate (in %)	79	79
National Leprosy Eradication Programme (NLEP) <sup>11</sup>	Haryana	India
Prevalence Rate/10,000 population	0.13	0.61
Number of new cases detected	398	114,359
Malaria, Kala Azar, Dengue <sup>11</sup>	Haryana	India
Deaths due to Malaria <sup>11</sup>	0	79
Deaths due to Kala azar reported <sup>11</sup>	0	0
Deaths due to Dengue reported <sup>11</sup>	0	168
Number of Kala Azar Cases reported11	0	3,706
HIV¹º	Haryana (NFHS 5)	India (NFHS 5
Women (age 15-49 years) who have comprehensive knowledge of Human Immunodeficiency Virus (HIV)/Acquired immunodeficiency syndrome (AIDS) (%)10	19.7	21.6
Men (age 15-49 years) who have comprehensive knowledge of HIV/AIDS (%)10	36.4	30.7

Non-Communicable Disease				
Diabeties and Hypertension <sup>10</sup>	Haryana (NFHS 5)	India (NFHS 5)		
Women - Mildly elevated Blood Pressure (Systolic 140-159 mm of Hg and/or Diastolic 90-99 mm of Hg) (%)	12.3	12.4		
Men - Mildly elevated Blood Pressure (Systolic 140-159 mm of Hg and/or Diastolic 90-99 mm of Hg) (%)	16.6	15.7		
Women - Blood sugar level - high (141-160 mg/dl) (%)	5.4	6.1		
Men - Blood sugar level - high (141-160 mg/dl) (%)	6.4	7.3		
Tobacco Use and Alcohol Consumption among Adults (age 15 years & above) <sup>10</sup>	Haryana (NFHS 5)	India (NFHS 5)		
Women who use any kind of tobacco (%)	2.5	8.9		
Men who use any kind of tobacco (%)	29.1	38		
Women who consume alcohol (%)	0.3	1.3		
Men who consume alcohol (%)	16.1	18.8		
Injuries				
Road Traffic Accident <sup>12</sup>	Haryana	India		
Rank (Total number of fatal Road Accidents in State/UT wrt other States/UTs)	13	N/A		
Total number of fatal Road Accidents	4,684	1,37,689		
Severity (Road accident deaths per 100 accidents) of Road Accidents	46.2	33.7		
Number of persons killed in Road Accidents	5057	115113		

1.5 Access to Carebb					
Health Systems Strengthening					
Ambulances & Mobile Medical Units (MMU) <sup>11</sup>	Haryana	India			
Number of Districts equipped with MMU under NRHM	7	506			
Number of Districts equipped with MMU/Health Units under NUHM	0	31			
Number of ERS vehicles operational in the States/UTs Under NHM	Haryana	India			
102 Type	0	9955			
104 Type	0	605			
108 Type	428	10993			
Others	0	5129			
Number of Ambulances functioning in the State/UTs other than NHM (At PHC/CHC/SDH/DH)	0	11070			

bb Sources are mentioned at the end of Annexure 1

	Key Domain Indicators			
ASHA <sup>13</sup>		Haryana	India	
Total number of ASHA ta	rgeted under NRHM	18000	946563	
Total number of ASHA in	position under NRHM	17606	904211	
% of ASHA in position un	nder NRHM	97.81	96	
Total number of ASHA ta	rgeted under NUHM	2676 75597		
Total number of ASHA in	position under NUHM	2528 64272		
% of ASHA in position un	nder NUHM	94.47	85	
Community Process <sup>11</sup>		Haryana	India	
Number of Village Health (VHSNCs) constituted	n Sanitation and Nutrition Committees	6049	554847	
Number of Mahila Arogy	a Samitis (MAS) formed	48	81134	
Number of Rogi Kalyar	n Samitis (RKS) registered (Total) <sup>11</sup>	Haryana	India	
DH		22	796	
CHC		124	6036	
PHC		381	20273	
UCHC		2	126	
UPHC		100	3229	
	Human Resource for Heal	th <sup>14</sup>	1	
HRH Governance		Hary	yana	
Specialist Cadre Available	e in the state (Y/N)	No		
HR Policy available (Y/N)		Ye	es	
Implementation of HRIS	(Y/N)	Ye	es	
HR Integration initiated (	Y/N)	N	lo	
Public Health Cadre avail	able (Y/N)	N	lo	
	Specialists (%)	8		
	Dentists (%)	13		
Overall Vacancies	MO MBBS (%)	1	6	
(Regular + contractual)	Nurse (%)	3	4	
	LT (%)	49		
ANM (%)		14		
HRH Distribution	IRH Distribution		In Place	
Doctors (MO & specialist	s) to staff nurse <sup>14</sup>	1:1	1:1	
Availability of public hea nurse & ANM) in district l	Ithcare providers (MO, specialists, staff nealthcare system <sup>14</sup>	6 per 10,000	5 per 10,000	

Ranking: Human Resource Index of Haryana <sup>15</sup>							
			Total (Regu	ılar + NHM)			
Category	Required (R)	Sanctioned (S)	In-Place (P)	Vacancy (V)	Actual Gap# (R-P)	Ranking: HR Gap Index	
MPW <sup>cc</sup>	8623	8768	7663	1105	960		
Staff Nurse	7349	6951	4387	2564	2962		
Lab Technician	1486	1288	594	694	892	74.26	
Pharmacists	833	1190	813	377	20	74.36	
MO MBBS <sup>dd</sup>	1963	2811	2203	608	0		
Specialist <sup>ee</sup>	1652	1069	945	124	707		

1.6 Healthcare Financing <sup>#</sup>				
National Health Accounts (NHA) (2017-18)	Har	yana	In	dia
Per Capita Government Health Expenditure (in ₹)	1,4	128	1,7	753
Government Health expenditure as % of Gross Domestic Product (GSDP)	0	.6	1.	35
Government Health Expenditure as % of General Government Expenditure (GGE)	4	.6	5.	12
OOPE as a Share of Total Health Expenditure (THE) %	50	0.4	48	3.8
National Sample Survey Office (NSSO) (2017-2018)	Har	yana	In	dia
National Sample Survey Office (NSSO) (2017-2016)	Rural	Urban	Rural	Urban
OPD - % of non-hospitalized cases using public facility	25	10	33	26
IPD - % of hospitalized cases using public facility	37	20	46	35
Out of Pocket Expenditure (OOPE) (NSSO)*	Rural	Urban	Rural	Urban
OPD - Per non-hospitalized ailing person (in INR) in last 15 days - Public	569	829	472	486
OPD - Per non-hospitalized ailing person (in INR) in last 15 days - Private	818	980	845	915
IPD - Per hospitalized case (in INR) - Public	9,170	8,671	5,729	5,939
IPD - Per hospitalized case (in INR) - Private	26,652	27,287	28,816	34,122
IPD - % of diagnostics expenditure as a proportion of inpatient medical expenditure in Public (NSSO)	14	13	18	17
IPD - % of drugs expenditure as a proportion of inpatient medical expenditure – Public (NSSO)	49	36	53	43

bb MPW – Multi Purpose Health Worker (Female + Male)

cc MO MBBS (Full Time)

dd Specialist (All Specialist)

f Sources are mentioned at the end of Annexure 1

 $Estimated \ by \ NHSRC \ using \ unit \ level \ data \ of \ NSSO \ 2017-18, where \ OOPE = [Total \ Medical \ Expenditure + Transportation \ Cost] - Reimbursement$ 

Childbirth - Average out of pocket expenditure per delivery in public health facility (₹) (NSSO)	1,767	2,713	2,402	3,091
Childbirth - Average out of pocket expenditure per delivery in private health facility (₹)	15,618	51,287	20,692	26,701
State Health Expenditure	Hary	yana	All India	Average
State Health Department expenditure as a share of total expenditure (%) (2017-18)**	3	.7	5	gg

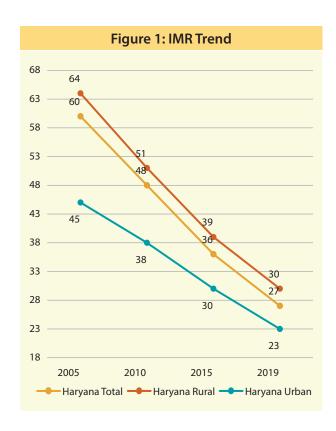
### **Sources used for Annexure 1**

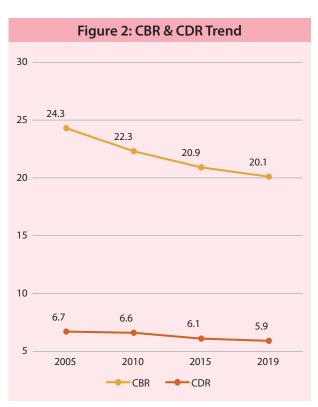
- Census 2011
- Rural Health Statistic (RHS) 2019-20
- Sample Registration Survey (SRS) Bulletin 2018 & 2019
- <sup>4</sup> Registrar General of India (RGI) Statistical Report (SRS) 2018
- <sup>5</sup> SRS Based Abridged Life Tables 2014-18
- <sup>6</sup> National Health Profile 2020
- <sup>7</sup> Global Burden of Disease Data 2019, https://vizhub.healthdata.org/gbd-compare/
- $^{8}$  Annual Report on Vital Statistics of India based on CRS 2019 & Medical Certification of Cause of Death 2019
- <sup>9</sup> HMIS (2019-20)
- 10 NFHS 4 & 5
- 11 QPR NHM MIS Report [Status as on 01.03.2020 & recent 31.12.2020 (some indicators removed from the recent report have been taken from report released on 01.03.2020)
- <sup>12</sup> Ministry of Road Transport & Highways (MoRTH) Road Accidents in India 2019
- <sup>13</sup> Update on ASHA Programme July 2019 (NHSRC Publication)
- $^{14}$  Human Resources for Health in District Public Health Systems of India: State Wise Report 2020
- 15 HRH Division NHSRC
- <sup>16</sup> As per HWC Portal

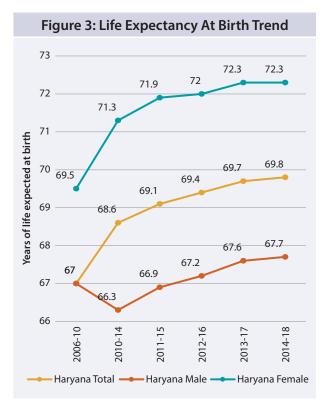
gg Represents data for all states and 2 UTs with legislative assembly (Puducherry + Delhi)

RBI, State Finances: Study of Budgets 2019-20

## **ANNEXURE 2**

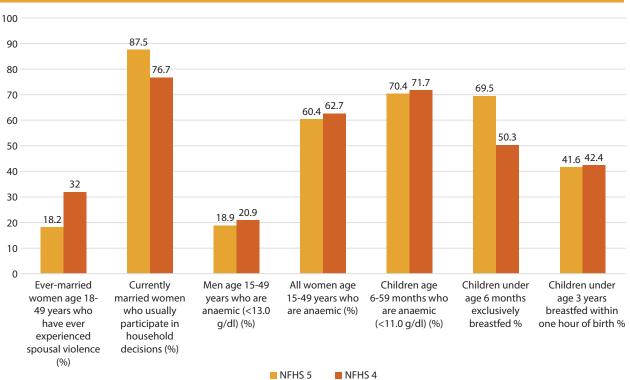












### Figure 6: Top 15 causes of DALYs, 1990-2019

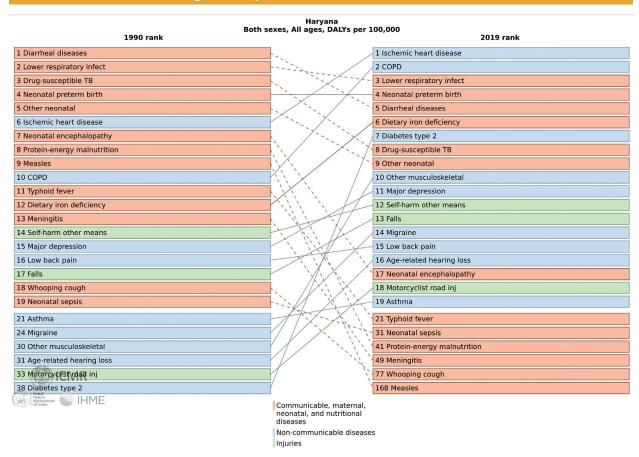


Figure 7: Top 15 risk of DALYs, 1990-2019

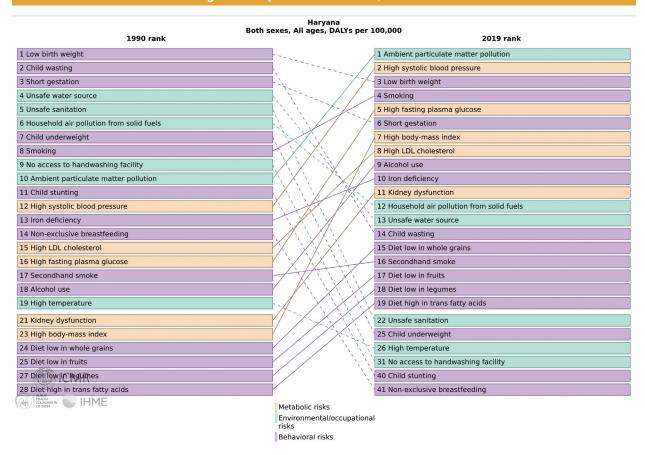
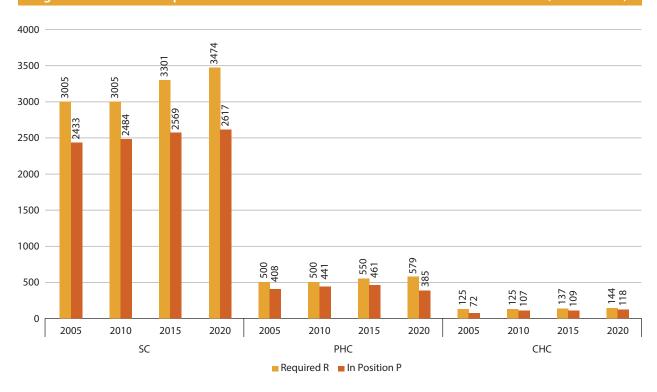


Figure 8: Year Wise Required/In Position Health Infrastructure Status in Rural Area (In numbers)





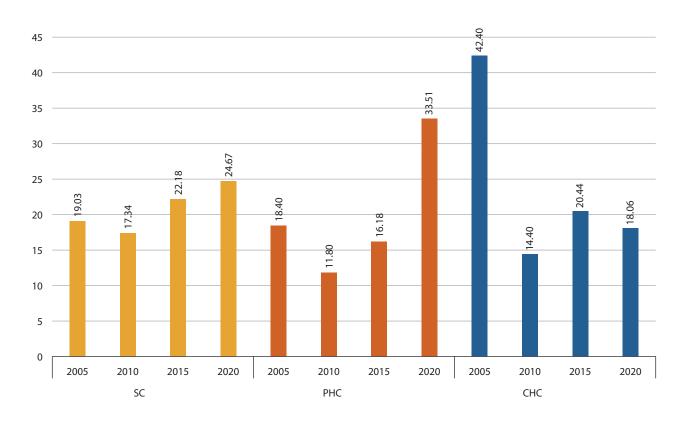
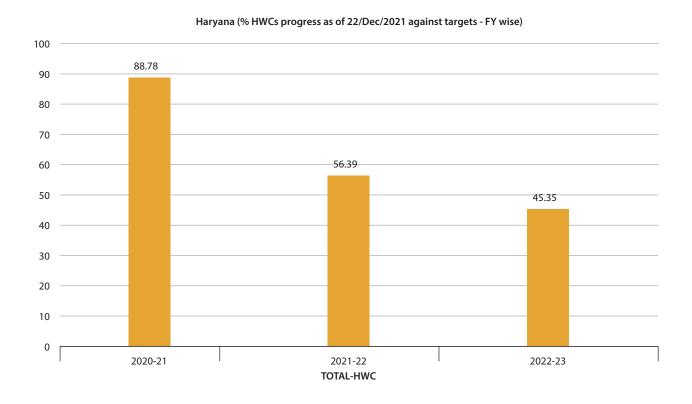


Figure 10: Percentage HWCs progress against target - FY wise (%)



# **ANNEXURE 3: DISTRICT WISE PERFORMANCE WITH RESPECT TO KEY NFHS 5 INDICATORS**

(Green – Good Performance, Red – Poor Performance) (District Wise Rural Urban Stats Not Available)

()	Children Under 5 Years - Wasted^ (Weight For Height) (%)	21.2	10.8	11.8	11.5	10.9	9	10.6	8	16	15.7	16.4	8	8.8	20.7	8.6	12.8
	Children Under 5 Years - Stunted^ (Height For Age) (%)	34	26.1	28.1	27.5	24.1	29	23.9	28.9	24.6	22.1	27.8	15.6	25.5	29.9	29.2	24.9
	Total Children Age 6-23 Months Receiving Adequate Diet**, # (%)	7.5	9.6	12.7	11.8	17.4	8.4	11.5	11.7	11.2	10.1	2.6	15.4	10.5	10	19.2	28.7
	Children Age 12-23 Months Fully Vaccinated Based On Information From Vaccination Card Only* (%)	79.4	82	80.8	81.1	86.9	80.4	89.3	73.2	2.96	80.1	90.6	84.1	83.3	86.3	84.6	72.1
	(%) srltrið lanoitutitanl	80.4	96.1	94.4	94.9	97.8	7.79	6:86	92.5	6.79	2.96	98.2	97.2	28.7	98.2	66	98.4
	4 Least Least 4 Least 4 A Least 4 Leas	45.1	63.1	59.2	60.4	57.4	60.4	53.4	51.2	60.1	48.1	6.69	60.1	49.6	68.8	84.7	59.8
	Total Unmet Meed (%)	9.3	7.7	7.5	7.6	7	9.3	11.11	7.4	4.6	7.8	8.9	4.6	5.4	4.8	5.4	9.5
	(%) əsŊ wopuoɔ	12	24.6	14.9	18.1	23.9	11.1	11.8	23.9	15.6	18.5	13.1	17.1	12.4	15.4	28.1	30.1
	(%) aui94/aui	5.7	5	4.9	5	3.2	3.6	4	5.7	2	9	4.9	7.2	8.6	4	3.1	4.7
	Any Method Used For Family Planning By Currently Married Women Age 15-49 years (%)	63.7	73.5	72.9	73.1	69.5	72	69.4	77.5	75.8	70.3	74.4	80.2	79.2	76.5	79.1	68.4
	beirseM zresY PG-20 apA nemoW (%) 81 eroleB	19.4	6.6	13.7	12.5	6.4	15	11.8	15.3	11.7	20.7	8.9	7.7	8.7	11	9.9	11.7
	Women Literate 15-49 Age (%)	¥ Z	85.7	76.7	79.7	85	78.8	83.6	82.3	71.1	85.4	7.77	88.2	81.3	70.9	84	83
	Households with any usual member covered under a health insurance/financing scheme (%)	12.2	28.3	24.2	25.7	19	28.2	29.7	32.8	29.4	34.6	27.9	27	23.7	29.1	24.6	19.2
	0001\səlsm94) rth (Females/1000 (səlsM	836	943	873	893	764	668	1007	955	901	858	856	1282	850	804	821	698
	Data Source	NFHS 4 Total	NFHS 5 Urban	NFHS 5 Rural	NFHS 5 Total	NFHS 5 Total	NFHS 5 Total	NFHS 5 Total	NFHS 5 Total	NFHS 5 Total	NFHS 5 Total	NFHS 5 Total	NFHS 5 Total	NFHS 5 Total	NFHS 5 Total	NFHS 5 Total	NFHS 5 Total
	statitsiQ\sətst2	Haryana	Haryana	Haryana	Haryana	Ambala	Bhiwani	Charkhi Dadri	Faridabad	Fatehabad	Gurgaon	Hisar	Jhajjar	Jind	Kaithal	Karnal	Kurukshetra
	S. No.	-	2	ю	4	2	9	7	80	6	10	11	12	13	14	15	16
_																	

	17 Mahendragarh	NFHS 5 Total	962	25.6	81.1	13.4	70.2	3.3	8.6	9.3	55.2	98.9	70.1	8.7	25.2	8.4
18	Mewat	NFHS 5 Total	891	11.5	41.9	28.7	37.8	2.3	6.1	19.6	45.9	74.6	63.5	13	44.4	14.2
19	Palwal	NFHS 5 Total	884	23.5	68.3	23.8	71.2	6.9	10.2	8	53.4	78.3	74.4	21.2	31	6.6
70	Panchkula	NFHS 5 Total	854	19.9	84.9	7.4	76.6	3.5	26.8	7	76.9	26	92.6	10.3	21.8	12
21	Panipat	NFHS 5 Total	938	26.5	83.8	11.9	70.1	5	21.9	7.3	49.2	97.1	79.4	10.3	25.1	6.6
22	Rewari	NFHS 5 Total	787	25.3	98	5.8	70.6	3.4	14.7	8.5	63.8	98.7	83.6	6.1	25.9	9.3
23	Rohtak	NFHS 5 Total	880	24.8	85.8	12.4	74.4	7.8	16	8.5	72.3	97.4	88.1	9	28.9	12.5
24	Sirsa	NFHS 5 Total	787	26.6	70.6	8.9	74	4	18	8.3	61.9	99.3	NA	9.1	25	12.6
25	25 Sonipat	NFHS 5 Total	906	22.4	87.3	15.5	78.7	6.7	18	4.8	64.1	99.7	77.4	5.1	23.6	9.2

\* NFHS5 replaced 'Immunized' (word) from NFHS4 to 'Vaccinated,' Out of two Indicators with 'either vaccination card on mother's recall' & vaccination card only'- vaccination card only indicator was used to reduce the recall bias, among children whose vaccination card was shown to the interviewer, percentage vaccinated with BCG, measles-containing vaccine (MCV)/MR/MMR/Measles, and 3 doses each of polio (excluding polio vaccine given at birth) and DPT or penta vaccine

\*\* Based on the youngest child living with the mother

# Breastfed children receiving 4 or more food groups and a minimum meal frequency, non-breastfed children fed with a minimum of 3 Infant and Young Child Feeding Practices (fed with other milk or milk products at least twice a day for breastfed infants 6-8 months and at least three times a day for breastfed children 9-23 months, and solid or semi-solid food at least twice a day for breastfed infants 6-8 months and at least three times a day for breastfed children 9-23 months, and solid or semi-solid food at least four food groups not including the milk or milk products food group)

^ Below -2 standard deviations, based on the WHO standard. 13 Below -3 standard deviations, based on the WHO standard

Green Color – Best five performing districts within the districts for a particular indicator

Red - Worst five performing districts within the districts for a particular indicator

\* Full antenatal care is at least four antenatal visits, at least one tetanus toxoid (TT) injection and iron folic acid tablets or syrup taken for 100 or more days

\*\* Based on the youngest child living with the mother

# Breastfed children receiving 4 or more food groups and a minimum meal frequency, non-breastfed children fed with a minimum of 3 Infant and Young Child Feeding Practices (fed with other milk or milk products at least twice a day for breastfed infants 6-8 months and at least three times a day for breastfed children 9-23 months, and solid or semi-solid food at least twice a day for breastfed infants 6-8 months and at least three times a day for breastfed infants 6-8 months and at least four food groups not including the milk products food group)

^ Below -2 standard deviations, based on the WHO standard. 13 Below -3 standard deviations, based on the WHO standard

# **NOTES**

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