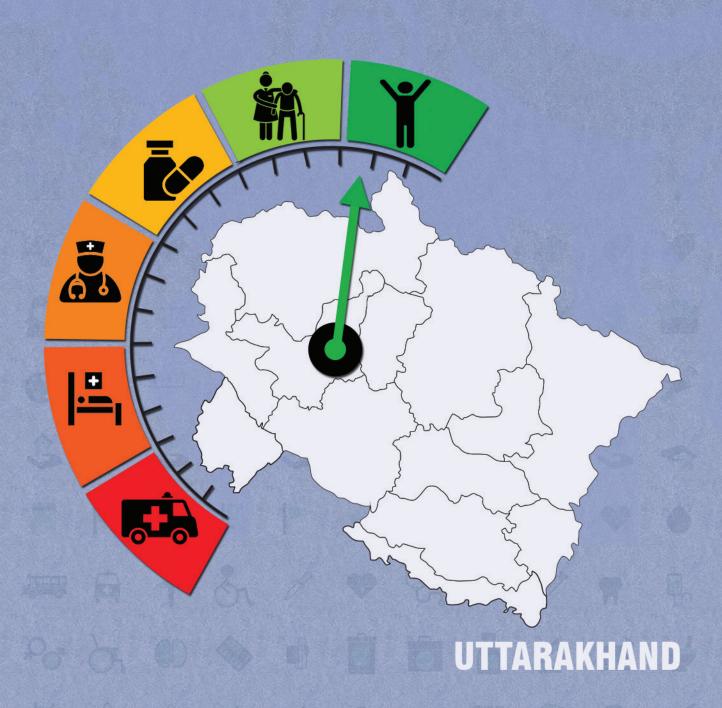




HEALTH DOSSIER 2021 Reflections on Key Health Indicators



DISTRICTS VISITED IN

COMMON REVIEW MISSIONS

| CRM | Districts Visited | | | | |
|------------------|--------------------------|-------------------|--|--|--|
| 3 rd | Tehri Garhwal | Almora | | | |
| 4 th | Chamoli | Uttarkashi | | | |
| 5 th | Pauri Garhwal | Rudraprayag | | | |
| 6 th | Bageshwar | Pithoragarh | | | |
| 8 th | Tehri | Almora | | | |
| 9 th | Dehradun | Nainital | | | |
| 11 th | Champawat | Udham Singh Nagar | | | |
| 12 th | Haridwar | Uttarkashi | | | |
| 13 th | Udham Singh Nagar | Haridwar | | | |

UTTARAKHAND

1. BACKGROUND

1.1 State Profile

Uttarakhand is positioned^a 18th in India for a geographical spread of 53,483.00 km². It is divided into 13 districts and is estimated to have a population of over 1crores^b. It is projected that the population would reach around 1.13 crores by 2021 (Census Population Projection 2019). As per Census 2011,

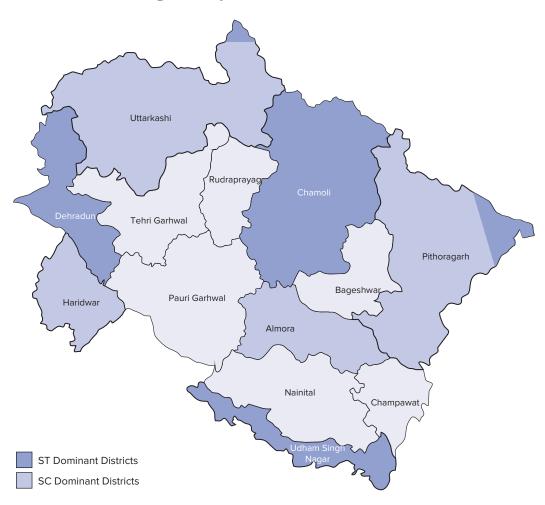


Figure 1: Top 5 ST & SC Dominant Districts

Including all States & UTs

Census 2011

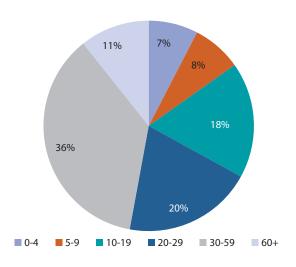
the Scheduled Caste (SC) and Scheduled Tribe (ST) population is 0.18 crores (18.76%) and 0.03 crores (2.89%), respectively. Out of the 13 districts, top five ST & SC dominant districts account for 92.50% of ST & 44.14% of SC population in the State (Figure 1 & Annexure 1, State Profile). Around 69.77% of the population reside in rural areas, while the rest constitute the urban population. The total length of roads^c in the State is 69,777 km (1.39%^d), in which, length of the national highways is 2,713 km (2.4%^e) and state highways is 4,329 km (2.5%f).

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

1.2 Demography

Out of the 13 districts, 3 districts have a population of 10 lakhs and above, 4 districts have a population between 5-10 lakhs, and 6 districts have a population between 1-5 lakhs (Annexure 1.1 State profile). The State's Sex ratio at birth of 840 females for every 1000 males is less than the national average of 899 (Annexure 1.2). It is estimated that 18% of the total population are in the age group of 10-19 years, 56% within 20 to 59 years; while 11% is 60 years and above (Figure 2). The crude birth rate and the crude death rate have declined from 20.9 & 7.4 in 2005 to 17.1 & 6.0 in 2019, respectively (Annexure 2; figure 2). The literacy rate increased from 71.6% in 2001 to 78.8% in 2011, with male & female literacy rates being 87.4% and 70.0%, respectively (Annexure 1.1). As per ESAG 2018 report, the Gross Enrollment Rate (GER)⁹ is 33.3% for higher education, 75.83% for senior secondary education, 85.72% for secondary education, 94.58% for elementary education, and 99.29% for primary education.

Figure 2: Uttarakhand - 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 11% of the State's total population. The life expectancy at 60 years of age is 17.3 and 21.4 for males and females, respectively (2014-2018). In Uttarakhand, 64% of elderly females and 24% elderly males living in urban areas; 69% of elderly females and 15% elderly males in rural areas are economically fully dependent on others. The old age dependency ratio is 14.9 in 2011; which is 14.6 for males and 15.3 for females, 16.6 in rural & 11.4 in urban areas. The illness (any deviation from the state of physical and mental well-being) perception among the elderly is reported as 20% for men and 14% for women as opposed to the national average of 31% for both (Elderly in India 2016 report).

Basic Road Statistics 2019, MoRTH

Percentage of total length of roads in Uttarakhand

e Percentage of total length of National Highways in the country

Percentage of total length of State Highways in the country

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

The State has been able to provide RMNCHA+Nh services with major focus on primary and secondary care services under the NHM. Indicators for Antenatal care (ANC)i, institutional deliveries, C sections, distribution of IFAⁱ 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 359 (SRS MMR Bulletin 2007-09) to 99 (SRS MMR Bulletin 2016-18) per 1,00,000 live births. In Uttarakhand, 72.6% of women received 4 ANC check-ups (Annexure 1.4). As per NFHS 5 data, Dehradun, Rudraprayag and Udham Singh Nagar districts reported a relatively good ANC coverage ranging from 75.3% to 76.5%; and Almora, Hardwar and Pauri Garhwal districts reported poor ANC coverage ranging from 39.6% to 48.5%. As reported in HMIS 2019-20, around 88.8% of the deliveries took place in institutions, out of which 66.7% took place in public health facilities. Total percentage of C-sections (14.9%) is on par with the WHO's standard (10-15%); and out of the total reported C-sections, about 17.7% are conducted at private facilities in Uttarakhand. Around 44.9% of women are tracked for 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 45.2% (NFHS 4) to 42.6% (NFHS 5). Anaemia in females of reproductive age group is almost thrice than 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, Uttarakhand has shown a significant decline in IMR from 42 (2005) to 27 (2019), which is lower than the national average of 30 (Annexure 2, Figure 1). Similarly, NNMR^k and Still Birth (per 1,000 live births) rates have also significantly decreased from 28 and 17 (2015) to 22 and 8 (2018) 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 62.7 (2006-10) to 70.9 (2014-18) (Annexure 2, Figure 3). As per NFHS 5, Dehradun, Tehri Garhwal and Uttarkashi districts reported low SRB¹ ranging from 823 to 869, and Almora, Nainital and Pauri Garhwal districts reported high SRBs ranging from 1065 to 1444.

Full vaccination^m coverage for children between 12 – 23 months of age has improved from 71% (NFHS 4) to 88.6% (NFHS 5). The proportion of under 6-months children exclusively breastfed has also increased from 51.2% (NFHS 4) to 52.5% (NFHS 5). A decrease in childhood anaemia from 59.8% (NFHS 4) to 58.8% in children aged 6-59 months is reported in NFHS 5 (Annexure 2, Figure 5). As per NFHS 5 report, Bageshwar, Dehradun and Nainital districts reported relatively low burden of stunting, ranging from 20.9% to 23.6%, while Chamoli, Hardwar and Uttarkashi districts reported considerably higher burden of stunting, ranging from 31.1% to 34.1%. For under-5 wasting – Bageshwar, Dehradun and Rudraprayag

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

Antenatal Check up

Iron Folic Acid Tablets

^k Neonatal Mortality Rate

Sex Ratio at Birth

NFHS 5 State/UT Factsheet, based on information from vaccination card only

districts reported relatively low burden, ranging from 7% to 10.1%; while Almora, Chamoli and Hardwar districts reported high burden, ranging from 16.2% to 17%.

2.3 Family Planning

The TFRⁿ has reduced from 2 in 2015 to 1.8 in 2018 (Annexure 2, Figure 4). As per NFHS 5 report, the total unmet need in Uttarakhand is reported as 8.8%, while the unmet need for spacing is 3.2% (NFHS 5). Tehri Garhwal district reported the highest total unmet need of 13.8% while Almora reported the lowest (6.4%). Approximately 57.8% of married women reported to avail any modern method of family planning in the State (NFHS 5); with the sterilization acceptance being 26.0% among females, and 0.7% among males.

2.4 Communicable Diseases

Uttarakhand has 13 districts having functional IDSP units°. The proportion of communicable, maternal, neonatal, and nutritional diseases [CMNND] contribute to 25.27% of total disease burden (Annexure 1.4). Lower respiratory infection, drug Susceptible TB, and diarrheal diseases are the leading causes of deaths due to CMNND in Uttarakhand (Annexure 2, Figure 6°). As per QPR report, for TB, the annualized total case notification rate is 207% and NSPq success rate is 83%, as opposed to the national averages of 163% and 79%, respectively. For NLEPr, the reported prevalence rate of 0.22 per 10,000 population is less than the national average of 0.61. In FY 2019-20, 26 deaths due to Dengue, and none due to Malaria and Kala Azar are reported in the State.

2.5 Non-Communicable Diseases (NCDs) and Injuries

It is reported that premature deaths account for 68.0% of the total disease burden in the State, while disability or morbidity account for 32.0%. Ischaemic heart diseases, COPD & Diabetes Mellitus Type 2 are the major causes of DALYs in the State (Annexure 2, Figure 6). NCDs contribute to 61.74% of DALYs, whereas injuries contribute to 12.99% of DALYs in the State. The State is positioned 22nd in the country for the total number of fatal road accidents with respect to other States (Annexure 1.4). It is found in the recent NFHS 5 report that 4.6% of women and 33.7% of men used any kind of tobacco, while 0.3% of women and 25.5% of men consumed alcohol. Overall, smoking, high systolic blood pressure, ambient particulate matter pollution, high fasting plasma glucose and low birth weight are the top five major risk factors for all DALYs (Annexure 2, figure 7).

2.6 Health Care Financing

The State's Net State Domestic Product (NSDP) for FY 2018-19 is ₹ 2,21,871 crores. The State is positioned 10^{th} out of 32 states in terms of per capitas of ₹ 1,98,738. According to NHA 2017-18, the per capita Government Health Expenditure in the Uttarakhand is ₹ 1,625 which is less than the national average of ₹ 1,753. On the other hand, the OOPE^t as a share of Total Health Expenditure was 41.7%, which is less

- ⁿ Total Fertility Rate
- ° QPR NHM MIS Report
- P https://vizhub.healthdata.org/gbd-compare/india
- ^q New Smear Positive
- ^r National Leprosy Eradication Programme
- ⁵ Directorate of Economics & Statistics
- t Out of Pocket Expenditure

than the national average of 48.8%. As per NSSO 2017-18, the OOPE for IPD care per hospitalized case in rural areas is to be around ₹ 4,440 in public facilities, ₹ 28,980 in private facilities; whereas for urban areas, it is around ₹ 6,195 in public facilities and ₹ 30,922 in private facilities. For childbirth in rural areas, OOPE is estimated to be around ₹ 2,675 in public facilities & ₹ 25,673 in private facilities; whereas in urban areas - OOPE is estimated to be around ₹ 3,289 in public facilities and ₹ 18,293 in private facilities. In public health facilities, the share of expenditure on medicines as a proportion of inpatient medical expenditure is estimated as 58% in rural and 66% in urban areas; whereas for diagnostics, it is 24% 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 are additional 21.39% SCs and 2.39% PHCs in the State and a shortfall of 9.68% CHCs (Annexure 2, Figure 9). Currently, there are 1,839 SCs, 257 PHCs, and 56 CHCs in place, against the required 1,515 SCs, 251 PHCs and 62 CHCs in rural areas. In urban settings, there are 38 PHCs in place against the required 78, amounting to a shortfall of 51.28%. The State has 13 DHs, 19 SDHs and 4 government medical colleges. In tribal catchments, there are 146 SCs, 7 PHCs and 5 CHCs in place, against the required 92 SCs, 13 PHCs and 3 CHCs. This accounts to a shortfall of 46.15% of the required PHCs in tribal areas.

Under the recently introduced Ayushman Bharat – Health and Wellness Centres (AB-HWCs), a total of 1147 HWCs (715 SHCs, 394 PHCs & 38 UPHCs) are operationalized in the State as of 22nd December 2021".

In Uttarakhand, 17 districts are equipped with MMUs under the NRHM while none under the NUHM. Uttarakhand has 99% of required ASHAs in position under the NRHM and 100% under the NUHM. The doctor to staff nurse ratio in place is 1:1, with 4 public health providers (MO, specialists, staff nurse & ANM) per 10,0000 population (Annexure 1, Table 1.5).

Recent data (Annexure 1.3) reveals that out of 1000 population who availed services from public health facilities, 765.94 availed (events) OPD services and 31.79 availed (events) IPD services. As per the NSSO data (2017-18), 52% of all OPD cases in rural areas and 22% in urban areas; and 42% of all IPD cases in rural areas & 24% in urban areas utilized public health facilities. The public health facility utilization in Uttarakhand is more than the national average for OPD & less for IPD (Annexure 1.6).

AB-HWC Portal

ANNEXURE 1: KEY INDICATORS

| 1.1 State Profile ^v | | | | | |
|---|---|--|--|--|--|
| Indicator | Uttarakhand 2011 ¹ | India | | | |
| Total Population (In Crore) | 1 | 121.08 | | | |
| Rural (%) | 69.77 | 68.85 | | | |
| Urban (%) | 30.23 | 31.14 | | | |
| Scheduled Caste population (SC) (in crore) | 0.18 (18.76%) | 20.14 (16.63%) | | | |
| Scheduled Tribe population (ST) (in crore) | 0.03 (2.89%) | 10.45 (8.63%) | | | |
| Total Literacy Rate (%) | 78.8 | 72.99 | | | |
| Male Literacy Rate (%) | 87.4 | 80.89 | | | |
| Female Literacy Rate (%) | 70 | 64.64 | | | |
| Number of Districts in the Assam ² | 13 | | | | |
| | Population ¹ | Districts ¹ (Numbers) | | | |
| | <1 Lakhs | 0 | | | |
| Number of districts per lakh population in Uttarakhand (Census 2011) | ≥ 1 Lakhs - <5 Lakhs | 6 | | | |
| Census 2011, | ≥5 Lakhs - <10 lakhs | 4 | | | |
| | ≥10 Lakhs | 3 | | | |
| ST SC Dominant (To | op 5) Districts of Uttarakhand ¹ | | | | |
| ST Dominant Districts (%) | SC Dominant | Districts (%) | | | |
| Udham Singh Nagar - 7.46% | Bageshwar | - 27.72% | | | |
| Dehradun - 6.58% | Pithorgarh | - 24.90% | | | |
| Pithorgarh - 4.04% | Uttarkashi | - 24.40% | | | |
| Chamoli - 3.13% | Almora - | 24.25% | | | |
| Uttarkashi - 1.06% | Haridwar - | 21.75% | | | |
| Top 5 ST dominant district accounts for - 92.50% | Top 5 SC dominant distric | Top 5 SC dominant district accounts for - 44.14% | | | |

| 1.2 Key Health Status & Impact Indicators | | | | | |
|---|-------------|-------|--|--|--|
| Indicators | Uttarakhand | India | | | |
| Infant Mortality Rate (IMR) ³ | 27 | 30 | | | |
| Crude Death Rate (CDR) ³ | 6 | 6 | | | |

^v Sources are mentioned at the end of Annexure 1

| Crude Birth Rate (CBR) ³ | 17.1 | 19.7 |
|---|------|------|
| Maternal Mortality Ratio (MMR) ³ | 99 | 113 |
| Neo Natal Mortality Rate (NNMR)⁴ | 22 | 23 |
| Under Five Mortality Rate (U5MR) ⁴ | 33 | 36 |
| Still Birth Rate⁴ | 8 | 4 |
| Total Fertility Rate (TFR) ⁴ | 1.8 | 2.2 |
| Life expectancy at birth⁵ | 70.9 | 69.4 |
| Sex Ratio at Birth⁴ | 840 | 899 |

| 1.3 Key Health Infrastructure Indi | | | | | |
|---|-------------------------|---------------------|-------------|------------------------|------------------------|
| Indicators | | | | | Numbers (Total) |
| Number of District Hospitals ² | | | | | 13 |
| Number of Sub District Hospital ² | | | | | 19 |
| Number of Government (Central + State) Medic | al College ⁶ | | | | 4 |
| Number of Private (Society + Trust) Medical Col | leges ⁶ | | | | 2 |
| Number of AB-HWCs functional as of 22 nd December 2021 ¹⁶ | Status (Total) | Target FY (2020- | | Target FY (2021-22) | Target FY (2022-23) |
| SHC-HWC | 715 | 590 | | 1100 | 1439 |
| PHC-HWC | 394 | 257 | | 257 | 257 |
| UPHC-HWC | 38 | 38 39 39 | | 39 | |
| Total-HWC 1147 886 1396 | | | 1735 | | |
| Rural ² | Require | ed (R) | | n place (P) | Shortfall (S) (%) |
| Number of Community Health Centres (CHC) | 62 | | | 56 | 9.68 |
| Number of Primary Health Centres (PHC) | 251 | | 257 | | -2.39 |
| Number of Sub Centres (SC) | 1,51 | 5 | | 1,839 | -21.39 |
| Number of functional First Referral Units (FRUs) | DH | | SDH | СНС | |
| number of functional First Referral Units (FRUS) | 8 | | | 9 | 10 |
| Urban² | Require | Required (R) | | n place (P) | Shortfall (S) (%) |
| Number of PHC | 78 | 78 | | 38 | 51.28 |
| Tribal ² | Required (R) | | n place (P) | Shortfall (S)% | |
| Number of CHC | 3 | | 5 | | -66.67 |
| Number of PHC | 13 | | 7 | | 46.15 |
| lumber of PHC 13 7 | | | | | |

w Sources are mentioned at the end of Annexure 1

| Patient Service ⁹ | Uttarakhand | India |
|---|-------------|--------|
| IPD per 1000 population | 31.79 | 62.6 |
| OPD per 1000 population | 765.97 | 1337.1 |
| Operation (surgeries) major (General and Spinal Anaesthesia) per 10000 population | 19.55 | 36.4 |

| 1.4 Major Health Indicator ^x | | |
|--|-------------|----------|
| % Share of DALYs to Total Disease Burden (GBD 2019) ⁷ | Uttarakhand | India |
| % DALY ^y accountable for CMNNDs ^z | 25.27 | 27.46 |
| % DALY accountable for NCDs | 61.74 | 61.43 |
| % DALY accountable for Injuries | 12.99 | 11.11 |
| Birth, Death Registration & Medical Certification of Cause of Death (MCCD) Indicator ⁸ | Uttarakhand | India |
| Level of Birth Registration (%) | 100 | 92.7 |
| Level of Death Registration (%) | 95.6 | 92 |
| Percentage of medically certified deaths to total registered deaths (%) | 8.9 | 20.7 |
| RMNCHA+N | | |
| Maternal Health ⁹ | Uttarakhand | India |
| % 1st Trimester registration to Total ANC Registrations | 70.6 | 71.9 |
| % Pregnant Woman received 4 ANC check-ups to Total ANC Registrations | 72.6 | 79.4 |
| Total Reported Deliveries | 152648 | 21410780 |
| % Institutional deliveries to Total Reported Deliveries | 88.8 | 94.5 |
| % Deliveries conducted at Public Institutions to Total Institutional Deliveries | 66.7 | 67.9 |
| % Deliveries conducted at Private Institutions to Total Institutional Deliveries | 33.3 | 32.1 |
| % C-section deliveries (Public + Pvt.) to reported institutional (Public + Pvt.) deliveries | 14.9 | 20.5 |
| % C-sections conducted at public facilities to Deliveries conducted at public facilities | 13.5 | 14.1 |
| % C-sections conducted at Private facilities to Deliveries conducted at private facilities | 17.7 | 34.2 |
| % Women getting 1st Post-Partum Checkup between 48 hours and 14 days to Total Reported Deliveries | 44.9 | 53.4 |
| Neonatal ⁹ | Uttarakhand | India |
| % live birth to Reported Birth | 98.8 | 98.8 |
| % Newborns having weight less than 2.5 kg to Newborns weighed at birth | 7.5 | 12.4 |
| % Newborns breast fed within 1 hour of birth to Total live birth | 88.7 | 89.9 |

Sources are mentioned at the end of Annexure 1

Disability Adjusted Life Years Communicable, Maternal, Neonatal, and Nutritional Diseases

| New Born Care Units Established ¹¹ | Uttarakhand | India |
|--|-------------------------|-------------------|
| Sick New Born Care Unit (SNCU) | 5 | 895 |
| New Born Stabilization Unit (NBSU) | 29 | 2418 |
| New Born Care Corner (NBCC) | 129 | 20337 |
| Child Health & Nutrition ¹⁰ | Uttarakhand (NFHS 5) | India (NFHS 5) |
| Prevalence of diarrhoea (reported) in the last 2 weeks preceding the survey (%) | 4.4 | 7.3 |
| Children with diarrhoea in the last 2 weeks who received oral rehydration salts (ORS) (%) | 55.9 | 60.6 |
| Children under 5 years who are underweight (weight-for-age) (%) | 21 | 32.1 |
| Child Immunization ¹⁰ | Uttarakhand (NFHS 5) | India (NFHS 5) |
| Children age 12-23 months fully vaccinated based on information from vaccination card only (%) | 88.6 | 83.8 |
| Children age 12-23 months who have received BCG (%) | 95.2 | 95.2 |
| Children age 12-23 months who have received first dose of measles containing vaccine (%) | 90.6 | 87.9 |
| Family Planning ¹⁰ | Uttarakhand (NFHS 5) | India (NFHS 5) |
| Unmet need for spacing (%) | 3.2 | 4 |
| Communicable Diseases | | |
| Integrated Disease Surveillance Programme (IDSP) ¹¹ | Uttarakhand | India |
| Number of districts with functional IDSP unit | 13 | 720 |
| Revised National Tuberculosis Control Programme (RNTCP) ¹¹ | Uttarakhand | India |
| Annualized total case notification rate (%) | 207 | 163 |
| New Smear Positive (NSP) Success rate (in %) | 83 | 79 |
| National Leprosy Eradication Programme (NLEP) ¹¹ | Uttarakhand | India |
| Prevalence Rate/10,000 population | 0.22 | 0.61 |
| Number of new cases detected | 320 | 1,14,359 |
| Malaria, Kala Azar, Dengue ¹¹ | Uttarakhand | India |
| Deaths due to Malaria ¹¹ | 0 | 79 |
| Deaths due to Kala azar reported ¹¹ | 0 | 0 |
| Deaths due to Dengue reported ¹¹ | 26 | 168 |
| Number of Kala Azar Cases reported ¹¹ | 100 | 3,706 |
| HIV ¹⁰ | Uttarakhand (NFHS 5) | India (NFHS 5) |
| Women (age 15-49 years) who have comprehensive knowledge of Human Immunodeficiency Virus (HIV)/Acquired immunodeficiency syndrome (AIDS) (%) ¹⁰ | 24.5 | 21.6 |
| Men (age 15-49 years) who have comprehensive knowledge of HIV/AIDS (%)10 | 36.1 | 30.7 |

| Non-Communicable Disease | | |
|--|-------------------------|-------------------|
| Diabeties and Hypertension ¹⁰ | Uttarakhand (NFHS 5) | India (NFHS 5) |
| Women - Mildly elevated Blood Pressure (Systolic 140-159 mm of Hg and/or Diastolic 90-99 mm of Hg) (%) | 13.7 | 12.4 |
| Men - Mildly elevated Blood Pressure (Systolic 140-159 mm of Hg and/or Diastolic 90-99 mm of Hg) (%) | 20.1 | 15.7 |
| Women - Blood sugar level - high (141-160 mg/dl) (%) | 4.2 | 6.1 |
| Men - Blood sugar level - high (141-160 mg/dl) (%) | 5.6 | 7.3 |
| Tobacco Use and Alcohol Consumption among Adults (age 15 years & above) ¹⁰ | Uttarakhand (NFHS 5) | India (NFHS 5) |
| Women who use any kind of tobacco (%) | 4.6 | 8.9 |
| Men who use any kind of tobacco (%) | 33.7 | 38 |
| Women who consume alcohol (%) | 0.3 | 1.3 |
| Men who consume alcohol (%) | 25.5 | 18.8 |
| Injuries | | |
| Road Traffic Accident ¹² | Uttarakhand | India |
| Rank (Total number of fatal Road Accidents in State/UT wrt other States/UTs) | 22 | NA |
| Total number of fatal Road Accidents | 750 | 1,37,689 |
| Severity (Road accident deaths per 100 accidents) of Road Accidents | 64.1 | 33.7 |
| Number of persons killed in Road Accidents | 867 | 115113 |

| 1.5 Access to Care ^{aa} | | | | | |
|--|-------------|-------|--|--|--|
| Health Systems Strengthening | | | | | |
| Ambulances & Mobile Medical Units (MMU) ¹¹ Uttarakhand India | | | | | |
| Number of Districts equipped with MMU under NRHM | 17 | 506 | | | |
| Number of Districts equipped with MMU/Health Units under NUHM | 0 | 31 | | | |
| Number of ERS vehicles operational in the States/UTs Under NHM | Uttarakhand | India | | | |
| 102 Type | 94 | 9955 | | | |
| 104 Type | 0 | 605 | | | |
| 108 Type | 140 | 10993 | | | |
| Others | 0 | 5129 | | | |
| Number of Ambulances functioning in the State/UTs other than NHM (At PHC/CHC/SDH/DH) | 160 | 11070 | | | |

^{aa} Sources are mentioned at the end of Annexure 1

| Key Domain Indicators | | | | | |
|---|---|------------------|--------------|--|--|
| ASHA ¹³ | | Uttarakhand | India | | |
| Total number of ASHA to | argeted under NRHM | 10470 | 946563 | | |
| Total number of ASHA ir | n position under NRHM | 10392 | 904211 | | |
| % of ASHA in position u | nder NRHM | 99.26 96 | | | |
| Total number of ASHA to | argeted under NUHM | 1181 | 75597 | | |
| Total number of ASHA ir | n position under NUHM | 1181 6427 | | | |
| % of ASHA in position u | nder NUHM | 100 | 85 | | |
| Community Process ¹¹ | | Uttarakhand | India | | |
| Number of Village Healt (VHSNCs) constituted | h Sanitation and Nutrition Committees | 15296 | 554847 | | |
| Number of Mahila Arogy | ya Samitis (MAS) formed | 1036 | 81134 | | |
| Number of Rogi Kalya | n Samitis (RKS) registered (Total) ¹¹ | Uttarakhand | India | | |
| DH | | 19 | 796 | | |
| CHC | | 63 | 6036 | | |
| PHC | | 229 | 20273 | | |
| UCHC | | 0 126 | | | |
| UPHC | | 0 | 3229 | | |
| | Human Resource for Heal | th ¹⁴ | | | |
| HRH Governance | | Uttara | khand | | |
| Specialist Cadre Availab | le in the state (Y/N) | No | | | |
| HR Policy available (Y/N) |) | N | 0 | | |
| Implementation of HRIS | (Y/N) | N | 0 | | |
| HR Integration initiated | (Y/N) | Ye | es | | |
| Public Health Cadre avai | ilable (Y/N) | N | 0 | | |
| | Specialists (%) | 6 | 66 | | |
| | Dentists (%) | 4 | 5 | | |
| Overall Vacancies | MO MBBS (%) | 6 | 5 | | |
| (Regular + contractual) | Nurse (%) | 3 | 2 | | |
| | LT (%) | 50 | | | |
| | 2 | 26 | | | |
| HRH Distribution | | Sanctioned | In Place | | |
| Doctors (MO & specialist | ts) to staff nurse ¹⁴ | 1:1 | 1:1 | | |
| Availability of public hea | althcare providers (MO, specialists, staff healthcare system ¹⁴ | 7 per 10,000 | 4 per 10,000 | | |
| | | | | | |

| Ranking: Human Resource Index of Uttarakhand ¹⁵ | | | | | | | |
|--|-----------------|-------------------|-----------------|----------------|-------------------------|-----------------------------|--|
| | | | Total (Regu | lar + NHM) | | | |
| Category | Required (R) | Sanctioned (S) | In-Place (P) | Vacancy (V) | Actual Gap# (R-P) | Ranking: HR Gap Index | |
| MPW ^{bb} | 4554 | 3548 | 1962 | 1586 | 2592 | | |
| Staff Nurse | 5700 | 3262 | 1596 | 1666 | 4104 | | |
| Lab Technician | 1290 | 728 | 286 | 442 | 1004 | F0.01 | |
| Pharmacists | 962 | 1548 | 1408 | 140 | 0 | 58.01 | |
| MO MBBS ^{cc} | 1367 | 1612 | 1447 | 165 | 0 | | |
| Specialist ^{dd} | 1162 | 1237 | 524 | 713 | 638 | | |

| 1.6 Healthcare Financing | | | | | |
|--|--------|--------|--------|--------|--|
| National Health Accounts (NHA) (2017-18) | Uttara | khand | India | | |
| Per Capita Government Health Expenditure (in ₹) | 1,6 | 525 | 1,753 | | |
| Government Health expenditure as % of Gross Domestic Product (GSDP) | 0 | .8 | 1.35 | | |
| Government Health Expenditure as % of General Government Expenditure (GGE) | 5 | .1 | 5.12 | | |
| OOPE as a Share of Total Health Expenditure (THE) % | 41 | 1.7 | 48.8 | | |
| National Sample Survey Office (NSSO) (2017-2018) | | khand | India | | |
| | | Urban | Rural | Urban | |
| OPD - % of non-hospitalized cases using public facility | 52 | 22 | 33 | 26 | |
| IPD - % of hospitalized cases using public facility | 42 | 24 | 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 | 370 | 426 | 472 | 486 | |
| OPD - Per non-hospitalized ailing person (in INR) in last 15 days - Private | 720 | 936 | 845 | 915 | |
| IPD - Per hospitalized case (in INR) - Public | 4,440 | 6,195 | 5,729 | 5,939 | |
| IPD - Per hospitalized case (in INR) - Private | 28,980 | 30,922 | 28,816 | 34,122 | |
| IPD - % of diagnostics expenditure as a proportion of inpatient medical expenditure in Public (NSSO) | 24 | 13 | 18 | 17 | |
| IPD - % of drugs expenditure as a proportion of inpatient medical expenditure – Public (NSSO) | 58 | 66 | 53 | 43 | |

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

cc MO MBBS (Full Time)

dd Specialist (All Specialist)

^{*} 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 $(\ref{fig:prop})$ (NSSO) | 2,675 | 3,289 | 2,402 | 3,091 | |
|---|--------|-------------|-----------------|---------|--|
| Childbirth - Average out of pocket expenditure per delivery in private health facility (₹) | 25,673 | 18,293 | 20,692 | 26,701 | |
| State Health Expenditure | Uttara | Uttarakhand | | Average | |
| State Health Department expenditure as a share of total expenditure (%) (2017-18)** | 4.4 | | 5 ^{ee} | | |

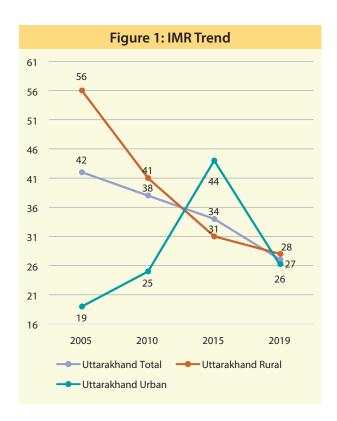
Sources used for Annexure 1

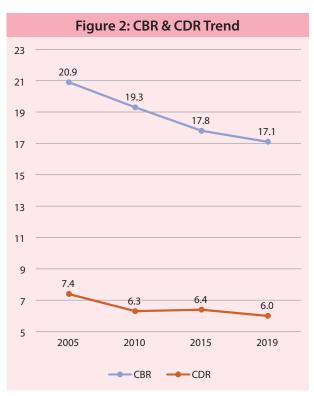
- Census 2011
- Rural Health Statistic (RHS) 2019-20
- Sample Registration Survey (SRS) Bulletin 2018 & 2019
- Registrar General of India (RGI) Statistical Report (SRS) 2018
- SRS Based Abridged Life Tables 2014-18
- ⁶ National Health Profile 2020
- ⁷ Global Burden of Disease Data 2019, https://vizhub.healthdata.org/gbd-compare/
- 8 Annual Report on Vital Statistics of India based on CRS 2019 & Medical Certification of Cause of Death 2019
- ⁹ 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)
- ¹² Ministry of Road Transport & Highways (MoRTH) Road Accidents in India 2019
- ¹³ 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
- ¹⁶ As per HWC Portal

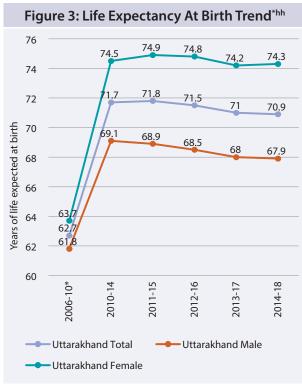
ee Represents data for all states and 2 UTs with legislative assembly (Puducherry + Delhi)

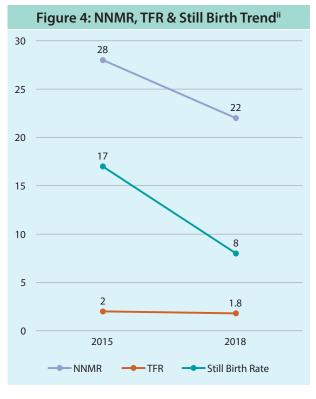
RBI, State Finances: Study of Budgets 2019-20

ANNEXURE 2



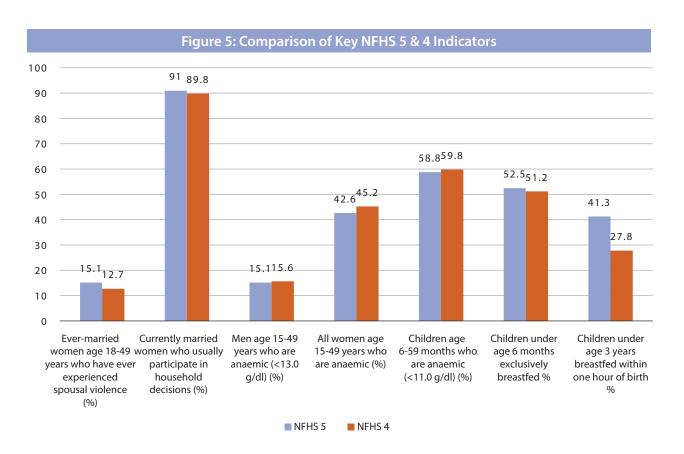






hh Uttarakhand was formed on the 9th November 2000 as the 27th State of India, when it was carved out of northern Uttar Pradesh; https://uk.gov.in/pages/display/115-state-profile

Information related to NNMR, TFR & Still Birth rate for year 2005 & 2010 is not available





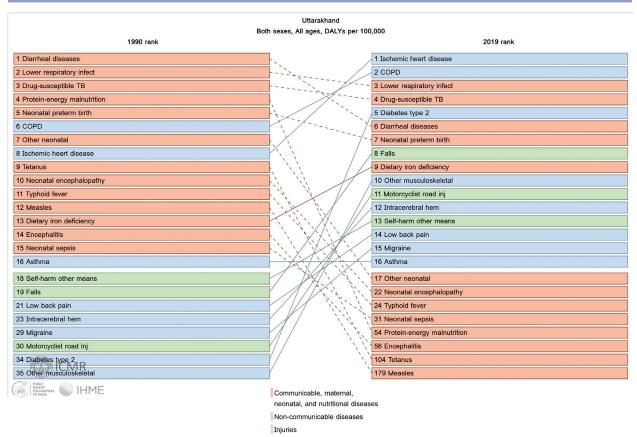


Figure 7: Top 15 risk of DALYs, 1990-2019

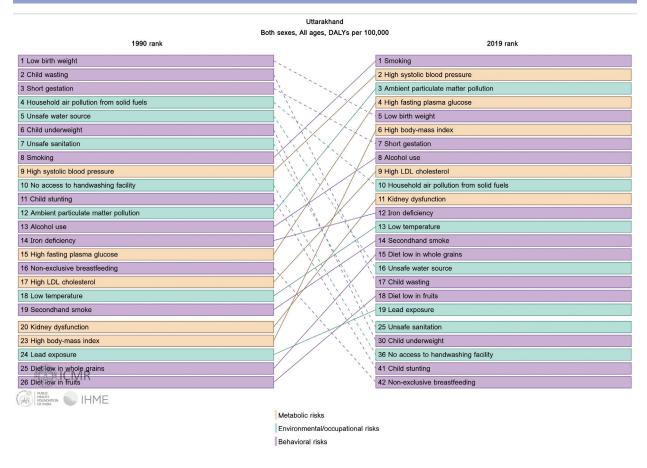
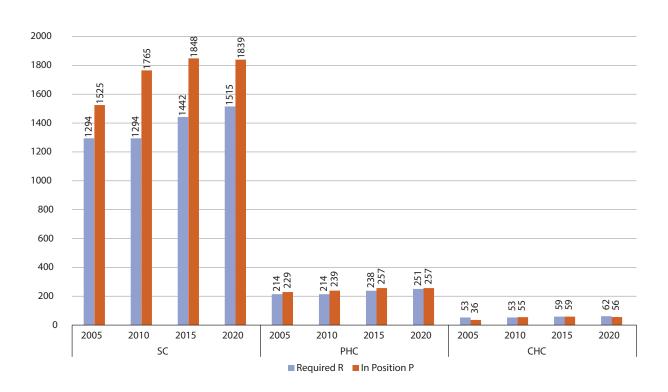
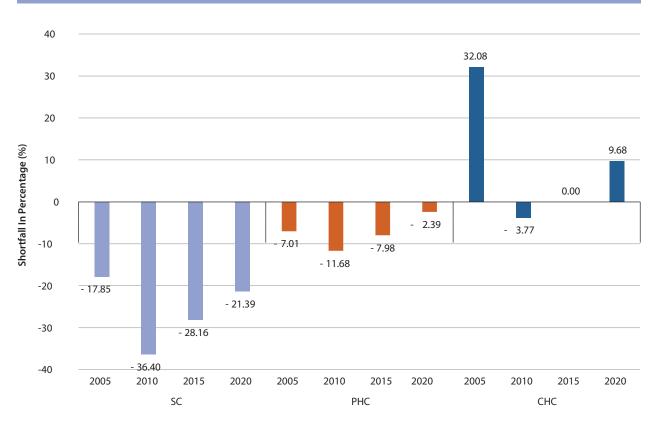


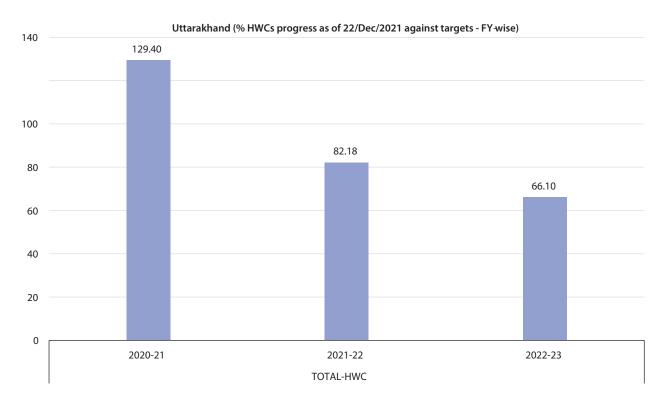
Figure 8: Year Wise Required/In Position Health Infrastructure Status in Rural Area (In numbers)











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

| | Children Under 5 Years - Wasted^ (Weight For Height) (%) | 19.5 | 17.4 | 11.3 | 13.2 | 17 | 7.7 | 16.2 | 12.4 | 10.1 | 16.4 | 14 | 12 | 12.4 | œ |
|---|---|--------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|---------------|--------------|--------------|
| | Children Under 5 Years - Stunted^ (Height For Age) (%) | 33.5 | 24.3 | 28.2 | 27 | 26 | 23.6 | 34.1 | 24.9 | 20.9 | 31.1 | 23.2 | 30 | 25.6 | 25.2 |
| | Total Children Age 6-23 Months Receiving Adequate Diet**, # (%) | 8.5 | 13.3 | 12.2 | 12.5 | 18.1 | 7.2 | 10.3 | 6 | 13.3 | 15.5 | 19.2 | 12.1 | 16.9 | 10.8 |
| | Children Age 12-23 Months Fully Vaccination Card Only* (%) | 7.1 | 98 | 89.9 | 88.6 | 96.3 | 16 | 91.1 | 91.6 | 83 | 93.7 | 73.5 | 80.4 | 97 | 94 |
| | (%) sıfırıla lisincifutitzil | 9:89 | 89.4 | 80.4 | 83.2 | 80.1 | 82 | 73.9 | 79.8 | 91.7 | 79.8 | 81.2 | 76 | 84.9 | 86.6 |
| | Mother Who Had At Least 4 Antenatal Care Visits (%) | 30.9 | 71 | 57.3 | 61.8 | 44.3 | 6.79 | 52.2 | 62 | 75.3 | 48.5 | 59.7 | 39.6 | 58.7 | 76.5 |
| mance) ole) | Total Unmet Need (%) | 15.5 | 6.5 | 6.6 | 8.8 | 6.4 | 8.4 | 9.3 | 10.4 | 6.5 | 11.8 | 6.5 | 6.6 | 11.3 | 12.2 |
| or Perforr ot Availab | (%) əs nuopuo) | 16.1 | 35.4 | 21 | 25.6 | 22.1 | 23.1 | 10.8 | 16.6 | 32.8 | 30.6 | 29.7 | 22.1 | 16.9 | 10.8 |
| , Red – Po in Stats No | (%) | 1.6 | 2 | 1.3 | 1.5 | 1.6 | 1.5 | 0.4 | 9.0 | 1.9 | 1.7 | 1.8 | 1.5 | 2.3 | 1.2 |
| (Green – Good Performance, Red – Poor Performance) (District Wise Rural Urban Stats Not Available) | Any Method Used For Family Planning By Currently Married Women Age 15-49 years (%) | 53.4 | 73.5 | 69.5 | 70.8 | 78.6 | 78.8 | 73.7 | 66.7 | 75 | 63.6 | 74.7 | 78 | 71.2 | 72.1 |
| een – Good (District V | Women Age 20-24 Years Married Before 18 (%) | 13.8 | 10 | 9.8 | 9.8 | 1.5 | 12.9 | 3.4 | 11.7 | 6.6 | 6.6 | 11.3 | 8.6 | 16.2 | 8.6 |
| (Gr | Women Literate 15-49 Age (%) | NA | 83.4 | 78 | 79.8 | 86.3 | 87.2 | 89.2 | 83.8 | 85.8 | 73.7 | 83.9 | 84 | 87.6 | 86.1 |
| | Households with any usual member covered under a health insurance/ financing scheme (%) | 19.5 | 61.6 | 62.9 | 62.5 | 99 | 71.9 | 71.1 | 65.7 | 67.3 | 46.6 | 60.8 | 62.7 | 72.8 | 76.6 |
| | (remales/1000 Males) (remales/1000 Males) | 888 | 1094 | 937 | 984 | 1444 | 940 | 1026 | 926 | 823 | 985 | 1136 | 1065 | 911 | 958 |
| | Data Source | NFHS 4 Total | NFHS 5 Urban | NFHS 5 Rural | NFHS 5 Total | NFHS 5 Total | NFHS 5 Total |
| | states/Districts | Uttarakhand | Uttarakhand | Uttarakhand | Uttarakhand | Almora | Bageshwar | Chamoli | Champawat | Dehradun | Hardwar | Nainital | Pauri Garhwal | Pithoragarh | Rudraprayag |
| | Serial No. | - | 2 | ю | 4 | 5 | 9 | 7 | 80 | 6 | 10 | 11 | 12 | 13 | 41 |

| (Green – Good Performance, Red – Poor Performance) (District Wise Rural Urban Stats Not Available) | Children Under 5 Years - Wasted^ (Weight For Height) (%) | 12.8 | 12.4 | 10.6 |
|---|---|---------------|----------------------|--------------|
| | Children Under 5 Years - Stunted^ (Height For Age) (%) | 29.3 | 26.8 | 34.1 |
| | Total Children Age 6-23 Months Receiving Adequate Diet**, # (%) | 1.5 | 2.6 | 7.6 |
| en – Good Perl (District W | Children Age 12-23 Months Fully Vaccinated Based On Information From Vaccination Card Only* (%) | 77.6 | 92.2 | 91.5 |
| (Gree | (%) sıfırtla Births (%) | 82.2 | 85.1 | 85.9 |
| | Mother Who Had At Least 4 Antenatal (%) | 48.9 | 75.9 | 66.8 |
| | Total Unmet Need (%) | 13.8 | 7.2 | 7.7 |
| | (%) əsŊ wopuoɔ | 12.5 | 28.4 | 11.7 |
| | (%) AUIPPIUD (%) | 17 | 1.1 | 1.3 |
| | Any Method Used For Family Planning By Currently Married Women Age 15-49 years (%) | 67.3 | 67.2 | 73.8 |
| | 910198 BeirreM Stears Married Before (%) | 6.3 | 14.6 | 5.7 |
| | (%) əgA 94-21 əiterəte | 74.9 | 70.4 | 80.1 |
| | radmam lusus with any usual member covered under a health insurance/ (%) | 71.2 | 59 | 80.3 |
| | (zəlsM 0001\zəlsmə1) rthi Birth (Females/ | 866 | 1022 | 869 |
| | Data Source | NFHS 5 Total | NFHS 5 Total | NFHS 5 Total |
| | States/Districts | Tehri Garhwal | Udham Singh Nagar | Uttarkashi |
| | | <u> </u> | | |

* 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

16

1

15

Serial No.

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 foods from 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 three performing districts within the districts for a particular indicator

Red – Worst three 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 meal man Young Child Feeding Practices (fed with other milk or milk products at least twice a day, a minimum meal frequency, and solid or semi-solid food at least twice a day for breastfed infants 6-8 months and at least three times aday 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 aday for breastfed children 9-23 months, and solid or semi-solid food at least two at least twice a day for breastfed infants 6-8 months and at least three times aday for breastfed children 9-23 months, and solid or semi-solid food at least two at least two at least three times aday for breastfed children 9-23 months, and solid or semi-solid food at least two at least two at least three times aday for breastfed children 9-23 months, and solid or semi-solid food at least two at least two at least three times aday for breastfed children 9-23 months, and solid or semi-solid food at least two at least two at least three times aday for breastfed children 9-23 months, and solid or semi-solid food at least two at least two at least three times aday for breastfed children 9-23 months, and at least two at lea

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

NOTES

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