

वार्षिक प्रतिवेदन Annual Report 2016-2017



आरोग्यम् सुखसम्पदा

राष्ट्रीय स्वास्थ्य एवं परिवार कल्याण संस्थान
The National Institute of Health and Family Welfare
Munirka, New Delhi - 110067

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Annual Report

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बाबा गंगनाथ मार्ग, मुनीरका, नई दिल्ली-110067

The National Institute of Health and Family Welfare
Baba Gangnath Marg, Munirka, New Delhi - 110067



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Hon'ble Cabinet Minister
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Hon'ble Minister of State
Health and Family Welfare, Government of India



Smt. Anupriya Patel
Hon'ble Minister of State
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FROM THE DIRECTOR'S DESK



The National Institute of Health and Family Welfare (NIHFW), an autonomous organization, under the Union Ministry of Health and Family Welfare, Government of India, acts as an 'apex technical institute' as well as 'think tank' for the promotion of Health and Family Welfare programmes in the Country. The Institute was established on 9th March, 1977 by the merger of two national level Institutions, viz. the National Institute of Health Administration and Education (NIHAE) and the National Institute of Family Planning (NIFP) which were established in the year 1962 and 1964 respectively. The Post-Graduate Education and

Training, Research and Evaluation, consultancy and advisory services, specialized project and services in the health and family welfare have been the major focus of the Institute.

The Institute is widely known for its Post-Graduate Education Programmes like three-year MD in Community Health Administration and two-year Diploma in Health Administration both affiliated to the University of Delhi and recognized by the Medical Council of India. The Institute also conducts a one-year course namely Post-Graduate Diploma in Public Health Management (PGDPHM) in collaboration with the Public Health Foundation of India and supported by the Union Ministry of Health and Family Welfare. Besides, the Institute offers six Diploma Courses of one-year duration each in 'Health and Family Welfare Management, Hospital Management, Health Promotion, Health Communication, Applied Epidemiology and Public Health Nutrition through distance learning mode. Currently, the Institute is working to introduce two new courses in e-learning mode, namely- "Professional Development in Public Health and Health Sector Reforms" for senior medical officers and "Programme Management for Public Health Care" for Programme Managers.

In-service training of health personnel of various categories, undertaking multi-disciplinary research studies/projects especially operational research and establishment of institutional mechanisms for coordination with health planners, health care providers and managerial experts, have been the major thrust areas of the Institute. In this effort, the Institute, through its departments like Communication, Community Health Administration, Education and Training, Epidemiology, Medical Care and Hospital Administration, Management Sciences, Planning and Evaluation, Reproductive Biomedicine, Statistics and Demography and Social Sciences addresses a wide range of public health, population and family welfare issues of concern.

New initiatives in various areas of health and family welfare have been in progress. Some significant initiatives of the Institute include Mother and Child Tracking Facilitation Centre, National Health Portal, Training Management Information System (TMIS), National Cold Chain and Vaccine Management Resource Centre, beside its contribution to NHM/RCH-II and Annual Sentinel Surveillance for HIV Infection. The NIHFW has been publishing an inter-disciplinary quarterly Journal-Health and Population: Perspectives and Issues (HPPI) since 1978 as well as a quarterly Newsletter since 1999 and a Hindi publication Dhaarna. Hitherto, the Institute has published number of technical reports, training modules for various categories of health personnel and scholars. Among other specialized services, Clinical-in the field of infertility, Mother and Child Health (MCH) services, Adolescent Clinic, Menopausal Clinic; and Computer, Documentation, Printing and Reprography, Art and Projection deserve mention.

It gives me an immense sense of pride when I put it in writing that I've noticed four Ds- Dedication, Determination, Devotion, and Disciplines; among all my staff that has helped me weaving so many success-stories during my stint as the Director. All my personnel have provided their mettle in their respective areas of expertise. Their incessant passion and indefatigable commitment to reach the pinnacle of success in their works have earned many laurel to the Institute. As the Director, I've only removed the stumbling stones from their paths; and provided them an environment to think critically, to innovate and to be creative in their endeavours. I am pretty sure, with this fire in us, we together, will turn The NIHFW into an 'Institute of Excellence' at the global level very soon.

Jayanta K. Das
Director

OVERVIEW

The National Institute of Health and Family Welfare (NIHFW), an autonomous organization of the Union Ministry of Health and Family Welfare, functions as a 'think tank' for promotion of health and family welfare programmes in the country. The core focus areas of the Institute are post-graduate education, in-service training of medical and para-medical personnel, research and evaluation, consultancy and advisory services, specialized projects and specialized services in the field of health and family welfare. In this effort, the Institute through its departments like Communication, Community Health Administration, Education and Training, Epidemiology, Medical Care and Hospital Administration, Management Sciences, Planning and Evaluation, Reproductive Bio-Medicine, Statistics and Demography and Social Sciences addresses a wide range of public health, population and family welfare issues and concerns.

Under post-graduate education, NIHFW conducts (i) a three-year post-graduate Degree (M.D.) in Community Health Administration; (ii) a two-year post-graduate Diploma in Health Administration; and (iii) a one-year post-graduate Diploma in Public Health Management. Also, the Institute has been conducting six Diploma courses of one-year duration each in 'Health and Family Welfare Management', 'Hospital Management', 'Health Promotion', 'Health Communication', 'Applied Epidemiology' and 'Public Health Nutrition' through distance learning. Currently, the Institute is working to introduce two new courses in e-learning mode, namely- Professional Development Course in Management, Public Health and Health Sector Reforms for Senior Medical Officers; and Programme Management and Support Unit for Programme Managers. In-service training courses ranging from one to ten-week duration for middle and senior level health personnel who are working at different levels in various parts of the country have been organized by the Institute. One notable in-service training course of the Institute is the Professional Development Course (PDC) in Management, Public Health and Health Sector Reforms for Senior Medical Officers which is run by the Institute in collaboration with 17 collaborating training institutes located across the country. 38 participants have been trained in PDC. In all, 63 training courses and workshops have been conducted in the Institute during 2016-2017.

The Institute is also known for its research endeavours and devotes a considerable time to research issues with special focus on operational research, applied research and evaluation of various health and family welfare programmes in the country. During the year under review, the Institute was engaged in 17 studies of which 10 have been completed; and the remaining studies are in various stages of execution.

As a Nodal Institute for training under NHM/RCH-II, NIHFW has delivered its responsibilities of organizing national-level training courses and coordination of the NHM/RCH-II training activities in various parts of the country with the help of 22 Collaborating Training Institutions (CTIs).

The Institute coordinated and monitored the Annual Sentinel Surveillance activities entrusted by the National AIDS Control Organization (NACO). During the year under report, NIHFW is coordinating the currently on-going 15th round of HSS (2016-2017) among ANC and HRG sites across the country proposed to be implemented at 877 ANC and 551 HRG sites.

Realizing the need for Policy for Health, Nutrition and Population Development, Policy

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Unit was set up in the Institute in 2011 with technical support and financial funding from USAID through Health Policy Project to undertake an evidence-based policy research and analysis, advocacy and multi-sectoral coordination on issues related to population, health and nutrition. The Unit works under the Department of Planning and Evaluation and is managed by a Steering Committee under the Chairmanship of the Director, NIHFW.

National Cold Chain Vaccine Management Resource Centre (NCCVMRC) set up in the Institute in 2015. During the year under report, center has completed all the activities as per the approved annual work plan for 2016-2017 and trained 240 cold-chain technicians in repair of cold-chain equipment. NCCVMRC also launched, the newly designed module for vaccine and cold chain handlers for the MoHFW and completed ToTs for 296 state-level master trainers in 8 batches. NCCVMRC has taken an active role in facilitating the Government of India's roll out of newer vaccines, specifically related to estimates of cold chain capacity planning, for Rotavirus vaccine and MR vaccine.

The Institute in collaboration with LSTM, UK and the Maternal Health Division of MoHFW, GoI; last year set up National Skills Lab- Daksh for upgrading the skills of health care providers for providing quality RMNCH+A services. During the year under report, the skills lab trained 195 participants from 7 States- Delhi, Gujarat, Haryana, J&K, Himachal Pradesh, Odisha and Rajasthan in 25 batches.

Public Health Systems Capacity Building in India project has been established at NIHFW in collaboration with CDC, Atlanta. The objective of this project is to strengthen capacity of health workforce in surveillance, outbreak investigation and early detection of impending outbreaks and public health management skills at state and district level. Under the project, three training programmes namely Rapid Response Team (RRT) Training, Public Health Management (PHM) training and Frontline Epidemiology Training (FET) are being conducted.

A Policy Unit has been set up in the Institute with the technical and financial support from USAID through Health Policy Project (HPP), Futures Group International, to undertake evidence-based policy research and analysis, advocacy and multi-sectoral coordination on issues related to population, health and nutrition. Initially, the major focus of the Unit has been on population and family planning.

The Mother and Child Tracking Facilitation Centre (MCTFC) has been functional at the NIHFW since 2014. This centre was envisaged to support MCTS in improving its data quality. MCTFC is expected to call beneficiaries (pregnant women and children) registered in MCTS and validate their records. Further, provision of medical consultants is also there to resolve the health related queries of beneficiaries or health workers.

MoHFW, Government of India, has established a Centre for Health Informatics (CHI) at NIHFW under the overall administrative control of the Director, NIHFW. The National Health Portal (NHP) has been set up by the Ministry of Health and Family Welfare (MoHFW) to provide health information to the citizens of India. The NHP serves as a single point access for authenticated health information for citizens, students, healthcare professionals and researchers. During the year under report CHI has taken few new initiatives by developing Mobile applications namely NHP Indradhanush, NHP Swasth Bharat, Pradhan Mantri Surakshit Matritva Abhiyan (PMSMA), No More Tension and India Fights Dengue to benefit the masses. NHP disseminates information in six languages- Hindi, Gujarati, Bangla, Tamil, Punjabi and English. It has also presence on social networking sites like Facebook and Twitter.

The Institute has been identified as the lead Institute for the 'Asia Region Network for South-South Cooperation'. The Network's mandate is to reflect regional needs and priorities to enhance communication among the partner institutions and to promote south-south cooperation to achieve the objectives of ICPD and MDGs.

The Demographic Data Centre has been functioning since 2003 that serves as data bank of information on socio-demographic, health and family welfare, etc. available from various sources at the national and state-levels. The Centre has procured NFHS-1, 2 and 3; DLHS-1, 2 and 3; various rounds of NSSO Data, Census-1991, 2001 and 2011 and Annual Health Survey of nine States. The Centre has prepared population profiles using census data which are available on the Institute website for the public.

NIHFW has been able to sustain the momentum in the process of collaborations with various international agencies such as WHO, UNICEF, USAID, Liverpool School of Tropical Medicine, Partners in Population and Development (PPD), INCLIN, Futures Group International, and European Union, etc.

Under the official language implementation policy in the Institute, Hindi- the national language of the country; is given its due importance in day-to-day official works. For example, to mark the significance of Hindi, the Institute publishes a Hindi publication called 'Dhaarna' with the articles contributed by the faculty and staff members of the Institute and others on issues like public health, population and family welfare.



EDUCATION AND TRAINING

NIHFW undertakes various types of education and training programmes targeting the public health practitioners and researchers of public health and family welfare. The Institute undertook the following courses and training programmes during the reported financial year 2016-2017

- (i) Three-year Post-Graduate Degree Course M.D. in Community Health Administration,
- (ii) Two-year Post-Graduate Diploma in Health Administration,
- (iii) One-year Post-Graduate Diploma in Public Health Management,
- (iv) Diploma in Health and Family Welfare Management through Distance Learning,
- (v) Diploma in Hospital Management through Distance Learning;
- (vi) Diploma in Health Promotion through Distance Learning; and
- (vii) Various short-term training courses, ranging from one to ten-week duration.

Three-year M.D. in Community Health Administration

As per the mandate of the Institute to provide appropriate trained manpower to meet the health needs of the country, the Institute has been offering a three-year post-graduate degree course, M.D. in Community Health Administration, since 1969. This course is affiliated to the University of Delhi. Over the years, this course has become very popular among health professionals in the country. So far, a total of 288 students have passed out this course.

During 2016-2017, 15 students attended the course including five in the third year, five in the second year and five in the first year.

Two-year Post-Graduate Diploma in Health Administration

Started in 1993, this two-year Post-Graduate Diploma in Health Administration offered by the Institute is also affiliated to the University of Delhi.

One-year Post-Graduate Diploma in Public Health Management

The one-year Post-Graduate Diploma in Public Health Management is offered by the institute in collaboration with Partners in Population and Development (PPD), Dhaka, Bangladesh from 2008. 25 national students and 7 students from foreign countries have enrolled in this course during 2016-2017. The international students are from, Gambia, Ghana, Mali, Nigeria, Uganda and Zimbabwe. So far, 131 students have passed this course.

Diploma in Health and Family Welfare Management through Distance Learning

This course has been specially designed to impart knowledge to the participants about the existing structure and functioning of the health care system, including its managerial problems. In addition, various management concepts, techniques, tools and resource management are discussed in this course and open to medical, nursing, dental and AYUSH graduates. 89 candidates have been enrolled for this course in the current year. 50 candidates appeared in the examination from the batch of 2015-2016 out of which 44 have successfully completed the course. Since the introduction of this course in 1991-1992, 1510 students have been awarded this Diploma so far.

Diploma in Hospital Management through Distance Learning

This course has been specially designed to impart knowledge to the participants about the existing structure and functioning of the health care system including managerial problems in hospitals. In addition, various management concepts, techniques, tools and resource management are discussed in this course and open to medical, nursing, dental and AYUSH graduates. With the enrolment of 100 students, this course was started in August 1995. As the response from the students from across the country has been positive; this course has been continuing.

253 candidates were enrolled for this course in the year 2016-2017. Out of 122 candidates appeared in the examination in 2015-2016, 100 students have successfully completed the course during this year. Hitherto, 2432 students have successfully completed this Diploma Course.

Diploma in Health Promotion through Distance Learning

Started in the academic year 2010-2011, this course has been designed to impart knowledge to the participants to focus on lifestyle related problems and is also meant for medical, paramedical and other stakeholders. 111 candidates were enrolled for this course in the reported year. 12 candidates appeared in the examination in 2015-2016, and all of them successfully passed this course. Till now, 261 students have been awarded this Diploma.

The following three new courses have been initiated in 2015-2016 in pilot mode with a maximum intake capacity of 100 candidates in each course:

Diploma in Health Communication through Distance Learning

This course has been started in the academic year 2015-2016 for imparting knowledge to the participants about the Health Communication, communication theories and the basic concepts of health and diseases in various socio-cultural contexts. At present 2 candidates are doing this course.

Diploma in Applied Epidemiology through Distance Learning

The course specially designed to impart knowledge of various epidemiological techniques and uses of epidemiology in the participants. At present 35 candidates have been enrolled for this course in the current year. Out of the 30 students taken admission last year, 15 appeared the examination and all of them passed.

Diploma in Public Health Nutrition through Distance Learning

The course specially designed to generate greater awareness and understanding of the nutritional sciences pertaining to Public Health Nutrition (PHN) among the participants. At present 55 candidates have been enrolled for this course in the current year. Of the 13 candidates taken admission in the preceding year, 12 appeared in the examination and 10 of them passed. The candidates, on successful completion of the course, will be able to:

In-service Training Courses/Workshops/Meetings

NIHFW carries a reputation in the field of health and family welfare in the country. It organizes a variety of tailor-made in-service training courses for the benefit of national and state-level health personnel of various categories. The customised training courses are focused on issues

like NHM/NRHM/RCH, HIV/AIDS, National Health Programmes, Reproductive Bio-medicine, Health, Care of Elderly, Immunization, Information Technology in Health, Nutrition and Life Disorders, Geographic Information System, Logistics and Supply Management System, Health Management, Hospital Management, Human Resource Management, Health Communication, Training Technology, Health Promotion, Health Economics/Health Financing, Statistics and Demography, Social Sciences, Adolescent, Research Methodology and so on.

During the year under review, it organized 63 training courses, workshops, contact programmes and meetings for various categories of health personnel. The details are listed below:

List of Training Courses, Workshops, Contact Programmes and Meetings

Sl. No.	Title of Course	Coordinator	Duration	No. of Participants
1.	Rapid Response Team Training (RRT)	Dr. R. K. Batra	9-20 May 2016	30
2.	Rapid Response Team Training (RRT)	Dr. R. K. Batra	9-20 May 2016	30
3.	Training of Vaccine and Cold Chain Handlers– National Training of Trainers (TOT) for State Trainers (First Batch)	Dr. Sanjay Gupta	1-6 June 2016	30
4.	Training of Cold Chain Technicians for Repair and Maintenance of ILR/ DF	Dr. Sanjay Gupta	6-11 June 2016	22
5.	Training of Cold Chain Technicians for Repair and Maintenance of ILR/ DF	Dr. Sanjay Gupta	20-25 June 2016	23
6.	Training of Vaccine and Cold Chain Handlers: National Training of trainers (TOT) for State Trainers (Second Batch)	Dr. Sanjay Gupta	22-24 June 2016	33
7.	Public Health Systems Capacity Building in India Public Health Management Training	Dr. Sanjay Gupta	27 June-2 July 2016	14
8.	Training of Vaccine and Cold Chain Handlers: National Training of Trainers (TOT) for state Trainers (Third Batch), in Lucknow, Uttar Pradesh	Dr. Sanjay Gupta	29 June-1 July 2016	35
9.	Training Course on Human Resource Management and Development	Prof. U. Datta	11-15 July 2016	12
10.	Training of Cold Chain Technicians for Repair and Maintenance of ILR / DF	Dr. Sanjay Gupta	11-16 July 2016	20
11.	Training of Vaccine and Cold Chain Handlers: National Training of Trainers (TOT) for State Trainers (Fourth Batch)	Dr. Sanjay Gupta	20-22 July 2016	46
12.	Training of Vaccine and Cold Chain Handlers: National Training of Trainers (TOT) for State Trainers (Fifth Batch)	Dr. Sanjay Gupta	27-29 August 2016	30
13.	Training of Vaccine and Cold Chain Handlers: National Training of Trainers (TOT) for State Trainers (Eight Batch)	Dr. Sanjay Gupta	29-31 August 2016	43
14.	Public Health Systems Capacity Building in India: Rapid Response Team Training	Dr. R. K. Batra	29 August- 9 Sept. 2016	28
15.	Public Health Systems Capacity Building in India: Public Health Management Training.	Dr. R. K. Batra	30 August- 9 Sept 2016	25
16.	Training Course on Monitoring and Evaluation under NHM	Prof. V.K. Tiwari	3-7 September 2016	20

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Sl. No.	Title of Course	Coordinator	Duration	No. of Participants
17.	Public Health Management Training	Dr. N.K. Yadav	13-20 Sept. 2016	05
18.	Training Course on IT Application for Information Management in Health Science Libraries	Mr. Salek Chand	26-30 Sept. 2016	20
19.	Training course on Management for Senior Nursing Administrators	Dr. Nanthini Subbiah	3-8 October 2016	35
20.	Training Course on Capacity Building of Health Personnel in Health Promotion	Prof. Poonam Khattar	17-21 October 2016	10
21.	Training Course on Orientation Training on Health Policy, Planning and Financing in Context of PIP under NHM	Prof. V.K. Tiwari	21-25 November 2016	20
22.	Frontline Epidemiology Training	Dr. Sanjay Gupta	21 November 2016-28 February 2017	27
23.	Training of Cold Chain Technicians for Repair and Maintenance of ILR / DF and Voltage Stabilizer	Prof. Sanjay Gupta	28 November-3 December 2016	24
24.	Training Course Leadership Development in the Health Sector	Prof. Rajni Bagga	5-9 December 2016	20
25.	Training Course on Health Care Management of the Elderly	Prof. T. Bir	5-9 December 2016	20
26.	Training Course on Logistics and Supply Management System in Health and Family Welfare	Prof. Sanjay Gupta	19-23 December 2016	21
27.	Training Course on Curriculum Design and Evaluation for Faculty Members of Training Institutions	Prof. A.K. Sood	9-13 January 2017	21
28.	Training Course on Scientific Writing	Dr. Renu Shahrawat	6-9 February 2017	15
29.	Training Course on Hospital Administration for Senior Hospital Administrators	Prof. A.K. Sood	6-24 February 2017	27
30.	Training Course on Environmental and Occupational Health for Health Professionals	Dr. Sanjay Gupta	13-17 February 2017	21
31.	Training of Cold Chain Technicians for Repair and Maintenance of WIC-WIF	Dr. Sanjay Gupta	13-18 February 2017	23
32.	Training for the Third National Batch of ECCVMC	Dr. Sanjay Gupta	27 February-3 March 2017	17
33.	Public Health Management (PHM) Training Course and Development of PHM Training Modules	Dr. Sanjay Gupta	15-25 March 2017	22
S. No.	Workshops	Coordinator	Duration	No. of Participants
1.	Three-Day Workshop to Assess the Modules and Facilitators' Guide under the National Tobacco Control Programme (Phase-II)	Dr. Poonam Khattar	12-14 July 2016 2-3 August 2016 14-16 September 2016	20 33 27
2.	Training of Trainer's (TOT) Workshop under National Mental Health Programme (NMHP)	Prof. U. Datta	4-5 August 2016	30
3.	Training-cum-Workshop on Counseling Skills for Health Professionals		7-11 November 2016	13

Ph.D. and Summer Training Programme

In addition to the various courses and in-service training programmes, students from universities are encouraged to pursue their Ph.D. courses and summer trainings in biotechnology, bio-chemistry, zoology, etc. at this Institute. The faculty members of the Institute act as supervisors and co-supervisors for these scholars. Six students had enrolled for their Ph.D. in NIHFW with registration in various universities while two students completed their short-term summer training.

RESEARCH AND EVALUATION

Research programmes of the Institute basically deal with operational research, applied research, and evaluation of various health programmes across the country. Some research studies focus on reproductive health. The Ministry of Health and Family Welfare, Government of India; international and bilateral organizations also bank on the Institute to undertake research and evaluation programmes. In addition to research studies, research projects on major areas of public health and family welfare of regional and national importance are conceived and undertaken.

During the year 2016-2017, the Institute conceived 17 studies out of which 10 have been completed including four by the M.D. (CHA) students, and the remaining seven are under progress as follow:

Completed Studies

1. **Evaluation of Prerna Strategy of Jansankhya Sthirata Kosh (Pushpanjali Swain, Jai Kishun, Parimal Parya and Subhash Chand)**

Objectives

- To assess the functioning of Prerna Strategy of JSK in five states, and identify any constraints in the functioning and implementation of the scheme.
- To assess the awareness level among community surroundings of the couples about Prerna strategy.
- To assess the appropriateness of the procedures for payment and validate the data of payment to the couples.
- To assesses the effect of the strategy on other couples in their family and amongst neighbours.

Findings

- The scheme was implemented in few selected blocks of the districts e.g. in one block in Kalahandi district and two blocks in Jagatsinghpur district of Odisha under the Prerna Scheme in 2009-2010. Similar situation prevailed in other states also.
- Due to poor civil registration system, the illiterate couples did not have birth certificates and marriage certificates; they prepared the certificates as per their needs either from the courts or through affidavits.
- JSK did not have any clear-cut guideline regarding type of documents they require for birth and marriage certificates (for instance, in Saran district of Bihar, medical board has been formed to issue the birth certificates to implement the scheme. Similarly in Rajasthan, the panchayats were authorized to issue birth and marriage certificates.) Therefore, the parity between states was lacking.
- In the beginning, the health officials took initiatives to identify the couples with requisite criteria stated in the Prerna scheme and helped them to prepare the documents, but they did not get any incentive whereas the NGO personnel got Rs. 500/- per case.
- JSK awarded the couples with monetary incentives who fulfilled the laid down criteria and submitted the required documents issued by the district officials or provided by NGOs. No money was provided to the districts for processing the documents till the time of giving awards in term of NSC/KVP to the beneficiaries. No funds were provided for awareness generation.

- The scheme has been implemented with retrospective effect prior to 2009. It was found that around three-fourths of couples awarded by Prerna, had their first child on or before 2009. Hence, the Prerna scheme did not have any effect on the community as the selected couples fitted to the criteria by chance.

Recommendations

- Proper actionable implementation of Prerna Scheme may be framed; and accordingly, the annual budget may be given to district health society through PIP with different heads such as correspondence, photocopy of documents, travel expenses, certificate distribution event, etc.
 - JSK should provide ownership to the state and district authorities for better implementation of the scheme.
 - The state/district officials may be empowered to promote the scheme.
 - Decentralize the scrutiny to identify Prerna couples to minimize the selection process.
 - Implementation should be for the whole district/state but not partially; and the process should be continuous and regular.
 - Framing of proper guidelines to identify the birth and marriage certificates required for the scheme to avoid malpractice.
 - Increase IEC activities about the scheme throughout the year and not only during the fortnight of population day.
 - Incentives to health workers who help identify the Prerna couples, and help in the processing of required documents.
 - It is evident from the survey that all Prerna couples did not plan for the scheme but fitted to it by chance. To encourage small-family norm in the BPL community, it is suggested to reframe the Prerna strategy by introducing one-time award to all the couples who get married after the legal age, and adopt one child or two-children norm.
2. **To Develop a Monograph on Lifestyle Diseases and School Health Promotion Programmes (Poonam Khattar)**

Objectives

- To critically review the available literature on health promotion for the school going students and to analyze and collate information for school health promotion programmes related to policy for health promotion, various health promotion measures such as physical activity, nutrition and academic stress.
- To identify the most promising elements of existing health promotion programmes and interventions specifically focusing on physical activity and nutrition that could be implemented in other schools.
- To suggest successful interventions and potential role of public health experts for health promotion in schools.

Highlights

- After a thorough review of the all available literatures on school-based interventions from the year 2000 onwards including all the published, unpublished, literatures available on internet/e-mode; the Monograph has been developed. The monograph contains various chapters such as Introduction, School Health Promotion and Policy Measures, Diet and Lifestyle Diseases, Physical Activity, Academic Stress, and Recommendations.

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- Several preventable health risk behaviours are often established during childhood or adolescence, and continue into adulthood. Schools provide a promising setting for promoting healthy lifestyle through curricular and co-curricular approaches.
- Anxiety and depression typically emerge in mid-late adolescence. School-based prevention programmes offer a means of targeting a broad portion of the population at or just the emergence of these conditions. To date, no prevention programme has successfully focussed on anxiety, depression and eating disorders simultaneously. Addressing these issues simultaneously would be an advantage in terms of cost-effectiveness and reducing the burden of on school curricula on students.
- The school environment can be improved by providing healthy meals; breakfast, fruits, vegetables and milk, provision of vending machines with nutritious snacks and water.
- The establishment of a school health nutrition service will definitely usher in a healthy environment. To improve children's nutritional behaviour patterns and knowledge, the community must also be involved in school health promotion.
- The physical education programmes in the schools offer the only systematic opportunity for young people to take part in and learn about physical activities. Such activities encourage the students by providing them with opportunities, time, and access to facilities in an environment which is supported by teachers, parents and friends. Hence, they should be integrated in the school curriculum.
- Planning of health promotion in schools by adopting a multi-faceted approach for inculcating positive lifestyle behaviours among the children and adolescents with the active involvement of parents, teachers, school administrators, and members of the community is the first step in this direction. The concept of health promotion in schools is still making a headway. Much needs to be done at the policy level to integrate the health promotion activities in schools.

3. To Develop Health Education Materials for School Children (from Class III to X) (Poonam Khattar)

Objective

- To Develop Health Education Materials for School Children (from Class III to X).

Highlights

- A review of the available health education materials in the existing books of environment science from standard III to V, science books of standard VI to X and the syllabi of Health and Physical Education for classes I-X developed by the National Council of Education Research and Training (NCERT), Central Board of Secondary Education (CBSE) and other materials was done. A Need Assessment Workshop was conducted with the experts from diverse fields including medical doctors, public health experts, school teachers, teacher-education experts and NCERT officers to review and suggest the specific themes/topics for classes III to X for the development of the health education books.
- Six broad areas were identified by the experts- Hygiene and Sanitation, Nutrition, Communicable Diseases, Non-Communicable Diseases, Sexual and Reproductive Health, Health Promotion Education including other related themes. The experts opined to include these aspects in the curricula of classes III to X. They deliberated upon specific topics which should be covered in each class. It was suggested that important topics should be covered at least once, in primary and secondary level so as to reinforce behavioural changes amongst the students. A standard format for the books and manual for the teachers was also developed during this workshop.

- Various meetings were held with the experts and a prototype was finalized. This prototype was pre-tested in two schools and the feedbacks received from the teachers were also incorporated. Further review of these books was undertaken by a Content Review Committee constituted by the Directorate General of Health Services, Ministry of Health and Family Welfare, Government of India followed by submission of the finalised books to the Director General of Health Services, MoHFW. And a dissemination meeting was also held with various stakeholders.
4. **Development of Training Module and Facilitators' Guide for the Programme Staff at State and District Level under the National Tobacco Control Programme (NTCP) (Poonam Khattar)**

Objective

- To Develop Training Module and Facilitators' Guide for the Programme Staff under the National Tobacco Control Programme.

Deliverables

- Training Needs Assessment (TNA): Training Needs Assessment schedules were developed and sent to all programme and district-level staff of the states with an objective of assessing the Training Needs and developing a training curriculum. Experts analyzed the training needs based on proformas received, roles/responsibilities, operational guidelines, etc. Draft curriculum for the training was developed during the workshop.
 - The Training Curriculum with 15 chapters was finalized with the learning objectives.
 - A training Module, a Facilitators' Guide, power-point presentations for facilitators' and background reference material were developed.
5. **Evaluation of Knowledge and Skills of ANMs and Staff Nurses regarding RMNCH+A Services in Selected CHCs and PHCs of Tamil Nadu and Uttar Pradesh (Nanthini Subbiah, Renu Shahrawat, S.V. Adhish, Geetanjali, Vinod Joon and V. Bhattacharya)**

Objectives

- To study the knowledge and skills of ANMs and staff nurses regarding RMNCH+A services in selected PHCs and CHCs of Tamil Nadu and Uttar Pradesh.
- To identify the gaps in the knowledge and skills of ANMs and Staff Nurses in the delivery of RMNCH+A services.
- To suggest measures to bridge the gap in knowledge and skills, if any, in the context of job functions of ANMs and Staff Nurses in delivery of RMNCH+A services.

Findings

- Out of total 172, 84 samples (36 in U.P. and 48 in Tamil Nadu) were ANMs and 88 (40 in U.P. and 48 in Tamil Nadu) were staff nurses representing the states of U.P. and Tamil Nadu. About 133 respondents of both the States have more than 3 years of work experience.
- More than 83% of ANMs and 75% of nurses replied correctly when asked to mention at least 4 examinations that should be performed on pregnant women during each ante-natal check up. More than 92% of the samples in both the states had knowledge about infection prevention practices;

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- On immediate care of normal newborn babies, nurses of U.P. had less knowledge in comparison to Tamil Nadu nurses.
- About 98% of respondents of Tamil Nadu and 53% in U.P. had the correct knowledge of common signs and symptoms of dehydration in babies.
- When asked about the duration of IUCD, 72% of the respondents of U.P. could correctly answer 5 years as compared to 40% of the ANMs and nurses of Tamil Nadu.
- Overall skills of respondents indicated that except weight checking, hand washing and temperature recording, in all other areas such as BP recording using mercury sphygmomanometer, urine testing, essential newborn care, newborn resuscitation, measurement of height and haemoglobin estimation; the skills ANMs and nurses of U.P. were less than the average score.
- Statistically significant correlation between the knowledge and skills of nurses is found in U.P. but not for the ANMs. Similarly, no statistical correlation was found in the knowledge and skills of ANMs of Tamil Nadu.

Recommendations

- Conducting regular skill development trainings is essential to impart necessary skills required to provide RMNCH+A services. This will enhance the skills of ANMs and nurses to cater to the needs of community in provision of RMNCH+A services.
 - For effective service delivery, it is essential to make the health facility functional at an optimal level by improving the staffing as per the IPHS standards (2012).
 - At present, the services provided by the ANMs at VHNDs are restricted to maternal care such as ANC and child care especially immunization. Their services can be expanded with the amalgamation of missing services such as nutrition, counselling to adolescents, family planning, curative and preventive diseases on the basis of priority.
 - ANMs spend considerable amount of time in maintaining registers and reporting which could be utilized in delivering key healthcare services.
6. **A Study on Social Determinants of Family Size and Its Implications in Population Growth in Uttar Pradesh and Bihar (T. Bir and A.M. Elizabeth)**

Objective

- To explore the social determinants of family size affecting population increase and to suggest measures for minimizing uncontrolled population growth in U.P. and Bihar.

Findings

- 50.8% and 71.1% of the households in U.P. and Bihar respectively were nuclear families. More than three-fourth of the population in both the states belong to Hindu religion.
- 37.4% and 36.6% of the females in U.P. and Bihar respectively were illiterates. Occupational structures in both the states were found to be almost same.
- 55.6% households in U.P. have piped water facilities with 81.7% having source of water within the household. But in Bihar, 61.9% households depend on the tube well for water. 54.6% of the households in U.P. have no toilet facilities as compared to 39.7% in Bihar.
- 44.4% households in U.P. have and 65.5% in Bihar have electricity in their houses. 54.1% of the families in U.P. and 51.2% of the families in Bihar had BPL ration-cards.
- 59.8% respondents in U.P. and 77.9% in Bihar stated that male child is more important than girl child. Sons ensure economic, social and physical security in the old age was pointed out by 95.0 % in U.P and 95.6 % of the respondents in Bihar. Similarly, sons are helping hands in cultivation and producers for the family was stated by 94.0% of the respondents in U.P. and 97.7 % in Bihar respectively.

- Among the sampled households, 81.1% in U.P. and 87.4 % in Bihar believed that girls are paraya dhan (other's asset). 49.7% of the respondents in U.P and 49.9% in Bihar expressed that two children are ideal for completing the family. At the same time, 86.9% of the samples in U.P. and 93.0% of the respondents in Bihar reported that it is difficult to afford so many children.
- 72.6% of the respondents in U.P. and 76.7% in Bihar stated that there should be a gap of minimum three years between two children. Among the reasons for non-utilization of contraceptives, 45.9% of women in U.P. and 46.9% in Bihar told that they wanted to become pregnant while 54.1% women in U.P. and 53.1% in Bihar informed that their husbands didn't wish to use contraceptives. 29.2% women in U.P. and 37.4% in Bihar stated that they didn't like them.
- 65.2% of women in U.P. and 64.9% in Bihar discussed with their husbands about using contraceptive methods, family planning and the desired number of children. 58.0% of women in U.P. and 83.9% women in Bihar did not know that there is a risk of getting pregnant during ovulation period.

Recommendations

- The stake holders must put emphasis on awareness generation activities on family planning, contraceptives, legal age at marriage, MTP facilities, and prevention of unwanted pregnancy; as well as must promote one-child or two-children norm.
- Cash incentives for terminal method of family planning should be increased to a sizable amount of Rs. 20,000-25,000/- which will result in increasing the adoption of tubectomy and vasectomy.
- BCC activities should include all the available media like traditional such as folk, theatre, drama, etc. as well as the most ultramodern media like mobile apps, radio and TV to enhance and ensure quality RCH services at the local level. Since there was lack of accountability at all the level of service delivery; responsibility must be fixed up on the officials for desired results.
- The existing health care service providers were not doing proper follow-up of PNC, and ensuring choices of contraception required for the clients. Quality counselling, need-based care and services for health promotion should be ensured by the local Counsellors, ANMs and ASHAs in the villages.

M.D. THESES

Besides the above-mentioned studies, the following four research studies have been completed by the students of the three-year duration M.D. (CHA) Course.

1. **Training Need Assessment for Induction Training of GDMOs under Allopathic System of CGHS in Delhi (Binay Kumar and Utsuk Datta)**

Objectives

- To explore the existing training mechanism in terms of training policy, available training infrastructure, training materials and appropriate trainers.
- To assess the training needs of Allopathic GDMOs under CGHS in terms of knowledge and skill required to perform managerial and administrative job.
- To develop an induction training strategy based on existing training mechanism and training need assessment.
- To document the Induction Training Capsule for GDMOs under the Allopathic System of CGHS.

Findings

- Lack of any structured training policy or guidelines, separate funds for training, trained trainers, system of maintaining database of training, training institution and/or training infrastructure, and materials for training activities under the system of CGHS.
- Due to lack of training policy/guidelines, 42% of GDMOs had not attended any training programme in the last 5 years. Among who attended, 64% only once in 5 years and 71% training programmes were held outside the CGHS. There was only one induction training for GDMOs in last 5 years and it was without prior TNA.
- 31% of GDMOs were neither aware of their or their sub-ordinate staff's job responsibilities (JR). Moreover, among the GDMOs who were aware of the job responsibilities, were more aware of only the curative aspects of their JR and had only partial knowledge about the JR of their sub-ordinate staff.
- Although, majority of the GDMOs had correct knowledge of the organizational structure and functioning of the CGHS; majority didn't have the correct knowledge of different managerial and administrative issues like store management (2%), equipment management (34%), bio-medical waste management (14%), imprest money management (42%), supervision and monitoring (16%), annual performance appraisals reports (36%), RTI Act (1%), conduction of meeting (27%) and national health programmes.
- Almost all the GDMOs had adequate skills for using the CGHS webpage. However, majority had poor supervisory skills.
- 65% of the clients/patients expressed that they were not explained about the diagnosis and treatment given at the end of consultation while almost 1/5th of the clients also expressed that they were not given adequate time and their problems were not listened to carefully.

Recommendations

- There should be proper a training policy under the CGHS system with emphasis on TNA.
 - There should be a separate cadre for training under CGHS, and in build, system of training must be linked with career advancement.
 - A separate fund should be earmarked for training purpose, preferably 2.5% of the salary budget as per NTP 2012 guidelines.
 - Training policy may also address issues related to development of training institutions and training infrastructure in CGHS, Delhi.
 - MCTC of CGHS may develop a computer-based training database.
 - There is an urgent need for development of separate cadre of trainers along with proper guidelines for their selection and development of these trainers which must be addressed in the training policy.
 - Induction training should be imparted to the GDMOs at the time of entry into the organization and this should be reflected in the training policy/guidelines.
 - Curriculum of induction training must incorporate contents relating to managerial and administrative activities along with organizational structure and functioning, orientation about NHP, and communication skills.
 - There should be a provision of regular Continuing Medical Education, and in-service training from time to time must also be incorporated in the training policy.
 - Non-training issues like working conditions, filling of the medical and paramedical vacant posts, better computer and internet system and SOPs must also be taken up.
2. **A Study on Waiting Time in Out-patient Department of a Multi-Specialty Hospital in Delhi (Anita Yadav, Jayanta K. Das and Pushpanjali Swain)**

Objectives

- To study the waiting time in the outpatient department (OPD) of a multi-specialty hospital of Employees State Insurance Corporation (ESIC) in Delhi.
- To describe the organizational and functional setup of the OPD.
- To study the operational process and patient flow in the OPD.
- To determine the factors contributing to waiting time in the OPD.

Findings

- The median total net waiting time to avail of all the services was 107 minutes (range 28 – 208 minutes). This time was mainly due to the time spent waiting to see a doctor with a median of 60 minutes (range 18–155 minutes) and for getting registration done with a median time of 30 minutes with a range of 5 - 90 minutes.
- A total of 29 (13.7%) out of 211 patients surveyed waited for less than 60 minutes while 182 (86.3%) of them waited for more than 60 minutes in the OPD to avail of various services. For consultation, 79.1% (167/211) of the patients waited for more than 30 minutes whereas for registration, 52.6% (111/211) of them spent more than 30 minutes waiting in the queue.
- Time spent with the doctor in the consultation room varied from 2 to 25 minutes with majority (89.6 %) of them spending less than 15 minutes. Mean (SD) consultation time was found to be 6.9 minutes.
- Out of 211 patients interviewed, 133 patients (63%) felt that waiting time was long while 29.4% of the patients (62 out of 211) perceived the waiting time as short and 7.6 % of the patients said they can not say.
- Factors contributing to long waiting time under the category of equipment and facility were less number of registration counters, less number of consultation rooms, insufficient BP instruments, server down/network problem and inadequate signages.
- Shortage of medical and para-medical staff, and staff arriving late to OPD were factors related to human resource while the process related factors contributing to long waiting time were lack of systematic patient calling system, time required to fill investigation forms, going through old reports, mixing of old and new patients and criss-cross flow of patients.
- The most common factors contributing to long waiting time under the category of patients/attendants were found to be large number of patients, early arrival, lining up in wrong queue and some patients jumping the queue.

Recommendations

- The hospital OPDs and dispensaries should be linked so that new patients referred from dispensary need not be registered again at hospital and their waiting for registration can be avoided.
- There must be fixed-day appointment system for follow-up patients.
- Systematic patient calling system with electronic display to avoid overcrowding and smooth functioning of OPD.
- Health assistant should be provided for tasks not requiring technical specialization like recording vital parameters, filling up investigation forms, drug slip, etc.
- Colour-coded sign boards in Hindi for each department should be placed at prominent places.
- A well-defined career path, professional freedom and performance-based incentives to be provided to keep the employees motivated and to retain them with the organization.

3. **A Study of the Structure and Functioning of *Rogi Kalyan Samiti/Swasthya Kalyan Samiti (RKS/SKS)* at CHCs in a District of Haryana (Rajeev Ranjan and Sanjay Gupta)**

Objectives

- To study the structure and functioning of SKS at CHCs in a district of Haryana.
- To assess the functioning and factors affecting the functioning of SKS at CHC.
- To assess the awareness and knowledge about SKS among the patients attending OPD and IPD.

Findings

- The structure of SKS was as per the guidelines of NHM Haryana. The representation of non-health personnel as SKS members was very limited. The meetings at Farukhnagar and Aurangabad were irregular. Pataudi had the most regular meetings of SKS and most of the members were regularly attending the meetings. The meetings had limited discussions and no standard operating procedure was followed. The lack of training about SKS was considered a major obstacle by SKS members in the successful functioning of SKS.
- SKS had been successful in improving basic facilities. 61.4% of total interviewed clients agreed on availability of all medicines at the CHC pharmacy. At Pataudi 76.7% of all interviewed beneficiaries agreed with availability of all medicines. At Hodal, 63.2% of beneficiaries perceived that good drinking water facilities were available at the CHC. As per the minutes of meetings, SKS was also involved in repair and maintenance of building across all the CHCs.
- The grievance redressal mechanism through SKS was not apparent at any of the CHCs.
- The major proportion of available funds was spent on activities not directly related to patient welfare. There were problems related to timely release of funds. The CHCs were inadequately staffed and inadequately resourced.
- The supervision and monitoring by district and state authorities on the functioning of RKS/SKS at CHCs was not regular. Training and inadequate fund were the most common issues suggested by the concerned chairmen and member secretaries to improve the functioning of SKS.
- The factors related to poorly functioning health system in the district was also responsible for poor functioning of SKS. The apathy of local political leaders and affluent class to improve the conditions of CHCs had been also found to be a factor for the poor functioning SKS.
- Patients didn't have the awareness and knowledge of SKS.

Recommendations

- Written guidelines on SKS should be available and circulated amongst SKS members. There must be more representation from non-health personnel and local leaders and other community representatives.
- A long-term vision for the concerned CHCs may be developed and circulated amongst the SKS members to facilitate a coherent functioning of SKS. Team work and cooperation need to be promoted amongst SKS members. Meetings should be conducted on regular basis and SOPs must be in place.
- Community participation needs to be strengthened. SKS chairmen and member secretaries should develop good management skills and firm commitment to improve the CHCs. People-friendly services in health facilities will enhance ownership of the

SKS. There should be efforts to promote ownership of CHC by the affluent segments of society as well.

- A proper grievance redressal mechanism should be in place.
 - SKS members should undergo regular trainings on SKS. There should be efforts to start community monitoring. Supportive supervision from district and state authorities should be done from time to time.
 - Release of funds should be done on time with trained accountants to manage them. Specific guidelines for fund utilization should be provided.
 - There is a need to generate awareness through IEC activities for SKS. Education sector could be focussed to improve literacy level in the catchment population of respective CHCs to further the SKS usage.
4. **Psycho-social Stress and Coping among Migratory Student Population in University of Delhi (Rameshwar Sorokhaibam and Rajni Bagga)**

Objectives

- To study the psychosocial stress and coping mechanisms among the migratory students in University of Delhi.
- To identify the presence of student support centres in the university and to analyse the services provided by them.
- To suggest measures to manage psychosocial stress and coping mechanisms among the migrated student community.

Findings

- These migratory students are broadly divided into two groups, general migratory students and Northeast students. Majority of the migratory students are from urban areas and Hindu nuclear families belonging to general category with parents in private jobs while majority of the Northeast students are Christians, mostly belong to scheduled tribes with family occupation mainly in the government sector. Most of them are staying in rented accommodations.
- Of the five levels of psychosocial stress, majority of the migratory students are in the low-level category while some general migratory students are in the very low stress level. Not a single student is seen in the high and very high stress level of the scale. Moderate stress is however seen relatively more among the NE students and also among the females.
- Majority of the migratory students adopted problem-focused coping and emotion-focused coping mechanisms than negative coping or humor-coping of the four broadly divided groups of coping mechanisms of the COPE scale. The females are found to be adopting more of emotion-focused coping than that of males while the males adopted more of both the problem-focused coping and negative-coping than their female counterparts.
- On comparison between the male general migratory and NE students, the male general migratory students adopted preferentially more of problem focused-coping and humor-coping while North-East students employed more of emotion-focused coping and negative-coping mechanisms.
- Similarly, between the female general migratory and NE students, the female general migratory students adopted more of problem-focused coping and humor-coping while the female NE students employed more emotion-focused coping and negative-coping mechanisms.

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- Information gathered from the student support centres show that there are different committees available for the student support for all the students including the migratory students but no specific student support centres for the migratory students except the Northeast cell which is exclusively for the NE students with a designated nodal officer in all the four colleges. The NE cell has been formally functioning for the last 4-5 years in three of the colleges while in one college, it was only recently formed with a nodal officer.

Recommendations

- Safety of girls with special emphasis on migrated females must be a top priority at the policy level. Hostels must be available for them as hostels are safer than outside/rented accommodations.
- University administration must focus on socio-cultural interactive programmes, counseling, training and functional student-support centres.
- At the community-level, RWAs could be roped in for the safety of students as most of them stay as tenants in the nearby localities.
- Students must be oriented and trained on social skills to decrease their stress-level.
- Media must play a constructive role in distressing the migrated student community through various means.

On-going Research Studies

1. Development of Enzyme and Colloidal Gold Based Immunoassays (ELISA and LFIA) using Bridge and Antigen Heterology for the detection of Medroxyprogesterone Acetate, Prednisolone, 17 α -Methyltestosterone and Nandrolone in biological fluids and tissues of animals (Tulsidas G. Shrivastav, Rajesh Kumar, Priti Singh, Suman Rani and Divya Verma).
2. An Assessment of *Janani Shishu Suraksha Karyakram* in the States of Uttar Pradesh and Punjab (Jai Kishun, Pushpanjali Swain, Parimal Parya and Subhash Chand).
3. Study on Awareness, Health seeking Behaviour, Psychosocial and Economic Consequences due to chronic Hepatitis B. Virus (HBV) and Chronic Hepatitis C Virus (HCV) Infection Among Patients Attending Tertiary Care Hospital in Delhi (Prof. V.K. Tiwari, Dr. Balasundram.P)
4. A study of Perception Regarding Health Status and Satisfaction with Life Among Elderly in Rural Areas of South Delhi (Dr. Sanjay Kumar, Prof. S. Vivek Adhish)
5. A Study on the Organizational Structure and Functioning of Family Welfare Centre (Family Planning Services at a Tertiary Level Hospital in Delhi (Prof. A. K. Sood, Dr. Sushil K. Vimal)
6. A study on Functional Disability in Elderly People Visiting Maharishi Valmiki Hospital, Pooth Khurd, North Delhi (Prof. T. Bir, Dr. Kavindra Kumar)
7. A study to identify the Risk Factor for Non Communicable Disease in ESIC Beneficiaries Availing ESI Hospital Services In Delhi (Dr. Renu Shahrawat, Dr. Jagbir Singh)

SPECIALISED SERVICES



The Institute, since its inception, has been providing some selective health care services mainly for training and research purposes. The clinic of the Institute provides services in the field of infertility management, menopause and adolescents and youths. NIHFW also facilitates access to documents, journals, reports, etc. through the National Documentation Centre and Department of Communication.

Details of the specialised services are as described below:



Clinical Services

Management of Infertility

The Institute is recognized as one of the centres of excellence in reproductive health care. The laboratory facilities are utilised for thorough investigation of reproductive disorders such as endocrinological, anatomical/surgical, etc. of patients. The scientific approaches adopted in the management of endocrinological and

reproductive disorders and infertility management have been proved to be successful.

The services on ante-natal and post-natal care, immunization, supply of iron and folic acid, vitamin 'A' supplementation, etc. were provided to the patients visiting the clinic.

Clinical Laboratory Services

The laboratory services form the backbone of preventive and curative aspects of health care services.

The clinic provides the following laboratory services:

- Routine test (hematology and urine)
- Andrology
- Semenology
- Bio-chemistry
- Serology

Some of the lab tests are provided at a nominal charge.

During the year, the regular laboratory services (bio-chemical, immunological, histological and radioimmunoassay of hormones) were provided to the patients. Further, services for ABO, RH, MN blood groupings and malaria parasites were also provided.

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TESTS	TOTAL
Infertility	
New (couples)	804
Female Follow-up	5412
Male Follow-up	2759
Reproductive Endocrinology	
Gynae.	
New	754
Follow-up	648
ANC	
New	206
Follow-up	266
Adolescents Female	
New	9
Follow-up	18
Adolescents Male	
New	5
Follow-up	2
Well-Women Clinic	
New	13
Follow-up	13
Staff Female- General	
New	15
Follow-up	31
Staff Male- General	
New	47
Follow-up	58
Child	
New	209
Follow-up	390
Endometrial Biopsy	139
Imaging Services	546
Testicular FNAC	32

Adolescent and Youth Clinic

Adolescents and youths form a major chunk of the Indian population. They carry with them hopes and new aspirations, and are energetic. Therefore, adolescents and youth require special attention, education and specialist guidance for adopting a healthy lifestyle. They need to be oriented and guided on various health issues. Proper counseling and health education of the Adolescents and youth on various health issues can lead to decline of unwanted pregnancies, reproductive tract infections and sexually transmitted infections. Keeping this in view, the adolescent and youth clinic of the Institute provides them information/counseling regarding reproductive health needs in a friendly atmosphere.

Press Unit

The reprography and printing of research, training, consultancy and administrative activities of the Institute are done by the press unit. The background and introductory documents for various training courses, survey schedules, and other forms for administrative purpose were also reproduced.

Printing and Publication Services

The Institute prints and publishes various publications every year as a part of its continuing education programme. Some of the important publications are:

- Annual Report of 2015-2016
- Annual Accounts 2015-2016
- Programme Advisory Committee (PAC) Document for 2016-2017
- Stock verification reports of all departments, NIHFW

Health and Population: Perspectives and Issues

The Institute has been publishing its ISSN-numbered multi-disciplinary quarterly Journal, Health and Population: Perspectives and Issues regularly since 1978. With a wide circulation both at national as well as international-level, it includes articles of scientific and educational interest in the areas of health services, family welfare, population, hospital administration, health-economics, health-communication, population, social sciences and other allied disciplines.

The Journal is indexed in the following:

- (i) Index Medicus for WHO South-East Asia Region, WHO, New Delhi;
- (ii) Cambridge Scientific Abstracts, Bethesda, MD, USA;
- (iii) IndMED: A Bibliographic Database of Indian Bio-Medical Research, New Delhi;
- (iv) Indian National Scientific Documentation Centre, New Delhi;
- (v) EMBASE, the Excerpta Medica Database, Netherlands;
- (vi) All India Index to Periodical Literature in English Database, Hyderabad;
- (vii) CAB Abstracts, CAB International Publishing, Wallingford, the United Kingdom,;
- (viii) Global Health Database, CAB International Publishing, Wallingford, the United Kingdom; and
- (ix) Guide to Indian Periodical Literature, Indian Documentation services, Gurgaon, Haryana.

The abstracts of papers published in the journal are also available on the Institute's web-site:- www.nihfw.org while the full papers are available on www.indmed.nic.in.

NIHFW Newsletter

Started in 1999, the quarterly newsletter carries the developments taken place in the areas of academic research, education, training, projects and collaborations, visitors, guest-lectures, etc. in a specific quarter. The quarterly developments are disseminated to all the concerned across the country. The Newsletter is also available on www.nihfw.org.

Audio-Visual and Art Services

Art, photographic and projection services were provided by the Institute for various activities in the year under report.

National Documentation Centre

Library facilities available at National Documentation Centre (NDC) are one of the best in India in the field of public health. Over a period of two decades, NDC has developed a well-balanced and up-to-date collection of over 60,385 documents including 39,561 books, 12,400 journals, technical reports, annuals reports, statistical reports, conference reports, modules, non-book materials, etc. in the field of health, population and family welfare and allied areas carrying worldwide information.

NDC undertook the following activities in the reported year:

- The training course which was started in 1999 on IT Application for Information Management in Health Science Libraries has trained more than 500 health science librarians so far.
- Developed a database of MD Theses in public health submitted in PG health science colleges and institutions in India.
- Union Catalogue of non-book materials is available in all health science libraries in Delhi including NIHFW.
- Bibliographical database on Tribal Health, HIV/AIDS, Female Foeticide, etc.
- Compiled a Compendium of Reports/Documents published in health and family welfare disciplines in India.

NDC did the following documentation services in 2016-2017:

- Selective Disseminate Service (SDS)
- Current Awareness Services (CAS)
- Health and Family Welfare Abstract (Quarterly)
- Health News Repositories (both English and Hindi)
- Daily Health News Bulletin
- List of Additions

In addition to the above, through Online Public Access Catalogue (OPAC), bibliographical details of all publications/documents are accessible at the link- <http://14.139.63.242/>. Important publications like committee/commission reports, technical reports, HPPI journals, important NIHFW publications, etc. have been digitized and accessible through the link- <http://www.nihfw.org/WNDC.aspx>.

NDC is a member of following online services:

- NDC is an active member of Developing Library Network (DELNET) and shares its resources with more than 5000 member libraries including Library of Congress, Washington. DELNET has a total collections of 2,45,45,450 books and 37,847 periodicals.
- NDC is a member of NML-ERMED India Consortium to provide free access of 258 journals on <http://www.nihfw.org/ERMEDConsortiumJournals.html>.

Demographic Data Centre

The Demographic Data Centre in the Department of Statistics and Demography has been functioning since 2003. The purpose of the centre is to develop a data bank of information on socio-demographic, health and family welfare, etc. available from different sources at the national and state-levels; which in turn, provides ready reference materials to the professionals and researchers. The Demographic Data Centre procured NFHS-1, NFHS-2, NFHS-3, DLHS-1, DLHS-2, DLHS-3, various rounds of NSSO Data, Census-1991, 2001 and 2011 Data and Annual Health Survey of Nine States. Data are analyzed and published from time to time. The Centre has prepared a population profile using census 2011 data and uploaded on the institute website and also prepared a census population profile 2001-2011 as well as State-wise Census 2001-2011 Pyramids for demographic data centre.

Computer Services

The Institute has provided computer and internet access to all its faculty, students, research and administrative staff through Campus Wide Area Network. The whole network is connected with six servers hosted in Computer Centre, connecting 400 nodes in the institute through 1 GB fibre optic NKN connection.

The computer centre is actively engaged in teaching and training in Information Technology (IT) besides undertaking analysis of large data sets. The Computer Centre has two well equipped computer labs for teaching/training purpose and for the use of students. The intranet softwares developed in the institute are used for providing information on salary, pensions, and billings. The Biometric Attendance Monitoring System has been installed in the Institute and is accessible to all the staff and students. The Institute has its own website www.nihfw.org and e-mail facilities for the officials.

The Computer Centre has a state of the art video-conferencing facility that is used for e-learning and meetings. It has got a specially designed sound proof room, enterprise class Polycom Video Conferencing equipment and high bandwidth internet line. The Conferencing room can accommodate up to 20 participants. The twin screen projectors provide best options to hold conference with teams/partners/any enterprise across the country or globe.

The details about the Institute are available on-line on www.nihfw.org which is managed and maintained by the Computer Centre of the Institute.

SPECIALISED PROJECTS AND CONSORTIUM ACTIVITIES

National Health Mission/Reproductive and Child Health-II

As the nodal Institute for training under NHM/RCH-II, The National Institute of Health and Family Welfare (NIHFW) has been coordinating and monitoring all the training programmes under National Health Mission (NHM) with the support of 22 Collaborating Training Institutions (CTIs) in various parts of the country. NHM covers RCH, NUHM, Disease Control Programme and Non-Communicable Diseases.

Highlights

Review of State PIPs: The RCH unit reviewed and prepared comments on the training component of draft and supplementary/additional PIPs of states for 2016-17 (14 States/UTs) and for 2017-18 (14 State/UTs) for finalization and submission to MoHFW. Consultants from RCH Unit attended NPCC meetings conducted at Nirman Bhawan, MoHFW for finalizing the budget approval of 20 States/UTs PIPs for 2016-2017 during April-June 2016; and of 3 States/UTs PIPs for 2017-2018 in the month of March 2017.

Monitoring: To ensure the quality of training imparted in the States/UTs, rationale deployment of trained staffs and utilization of skills of trained manpower; RCH consultants monitored 18 RCH trainings under NHM in 14 states. In addition to the assessment of quality of training, health facilities were also visited to assess the status of trained manpower, infrastructure and healthcare services provided. Furthermore, to discuss the financial issues and settlement of remaining RCH-I balance; Consultant (Finance) visited 10 SIHFWs/CTIs. In the process of TMIS establishment, one RCH consultant visited Ranchi, Jharkhand to orient the state officials on TMIS.

Quarterly Progress Report and Annual Training Progress Report for FY 2016-2017 were prepared and submitted to MoHFW.

Achievement of Trainings under RCH-II/NHM: Total of 2,90,014 persons including 26,891 Medical Officers; 25,509 Staff Nurses; 39,862 ANM/LHVs; 2,750 Laboratory Technicians; 2,309 ToT and 1,92,693 combined categories were trained on various aspects across the country.

Meeting of Directors/Principals of CTIs: A review meeting of Directors/Principals of Collaborating Training Institutes (CTIs) was held on 16 January 2017 at the NDC Conference Hall, NIHFW. Shri Arun Singhal (JS-Training MoHFW) and Shri Arun Kumar Jha (Economic Advisor, MoHFW) jointly Chaired the meeting. Among others, Dr. N. K. Dhamija (Dy. Commissioner Training MoHFW), Dr. Sangeeta Saxena (Dy. Commissioner Training, MoHFW), Prof. Jayanta K. Das (Director, NIHFW) and Dr Nanthini Subbiah (Nodal Officer- RCH, NIHFW) attended the meeting.

NUHM: A one-day workshop on NUHM was held on 17 January 2017 to orient the SIHFWs/CTIs and SHSRCs about NUHM and the role to be played by them for its effective implementation of training programmes and their quality assessment. Dr. Arun K. Panda, IAS (AS & MD-NHM) Chaired the meeting. For preparing an Action Plan for training activities under NUHM for Financial Year 2017-18, concerned states were coordinated. The received NUHM Action Plan from the States were compiled and submitted to MoHFW for further action.

Professional Development Course in Management, Public Health and Health Sector Reforms for DMOs: Ten-week duration Professional Development Course (PDC) in Management, Public Health and Health Sector Reforms for District Level Medical Officers is a continuous activity at 17 designated institutes across the country including NIHFW. A total of 38 MOs have been trained at IIHMR, Jaipur in the financial year 2016-2017.

Policy Unit for Health, Nutrition and Population Development

Policy Unit was set-up in the institute in 2011 with technical support and financial funding from USAID through Health Policy Project to undertake an evidence-based policy research and analysis, advocacy and multi-sectoral coordination on issues related to population, health and nutrition. The Unit works under the Department of Planning and Evaluation and is managed by a Steering Committee under the Chairmanship of the Director, NIHFW. During 2011–2015 the unit organized capacity building dialogues, workshops, meetings, training programmes for stakeholders and professionals at national as well as state level. It also produced more than 15 evidence-based research documents in the area of FP, population stabilization, political advocacy, fund-flow study in NRHM, monitoring and supervision for FP, etc. These evidence-based documents were developed for policymakers, bureaucrats, and technocrats.

The 1st National Dialogue on Family Planning and Population Stabilization was organised at NIHFW on 5 May 2016 under the Chairmanship of Mr. A. R. Nanda, Former Secretary (Health), MoHFW, Government of India and the Chairperson of the Advisory Committee of the Policy Unit, NIHFW. Dr S.Y. Quraishi, Former Chief Election Commissioner, also attended the meeting as the Guest of Honour.

Public Health Systems Capacity Building in India Project in Collaboration with CDC, Atlanta

Public Health Systems Capacity Building in India Project has been established at NIHFW in collaboration with CDC, Atlanta. The objective of this project is to strengthen capacity of health workforce in surveillance, outbreak investigation and early detection of impending outbreaks and public health management skills at state and district level. Under the project, three training programmes namely Rapid Response Team (RRT) Training, Public Health Management (PHM) Training and Frontline Epidemiology Training are being conducted, the details of which have been given in the section- Education and Training.

Impact of the Trainings on Public Health System

Trained manpower of RRT and Frontline Epidemiology Training is utilizing the knowledge and skills by improving the surveillance of diseases under IDSP, prevention of impending outbreaks and investigations of outbreaks. Manpower trained in PHM is also using acquired knowledge and skills in improving delivery of health programmes.

Centre for Health Informatics (CHI) for National Health Portal (NHP)

The National Health Portal (NHP) has been set-up by Ministry of Health and Family Welfare (MoHFW) to provide health information to the citizens of India. The NHP serves as a single point access for authenticated health information for citizens, students, healthcare professionals and researchers. The following new initiatives have been undertaken during the year 2016-2017 to benefit the masses.

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Microsites have been designed for providing information on Immunization, Medicine and Supplements, Quit Tobacco Programme, mDiabetes, Electronic Health Record Standard for India Helpdesk, National Consultation of National eHealth Authority (NeHA), Integrated Health Information Platform (IHIP), and E-Health Initiatives from the States of India.

Mobile Applications

NHP Indradhanush Mobile Application: The “NHP Indradhanush” is designed to alert parents for the vaccination of their children up to 16 years of age. The vaccine schedule is configured automatically by providing the date of birth of the child. The user can register any number of children for which he/she would like to get vaccination alerts. The user can also add any other vaccine, if recommended by the physician, to the reminder list.

NHP Swasth Bharat Mobile Application: The objective of this mobile application is to empower the citizens to find reliable and relevant health information. The application provides detailed information regarding healthy lifestyle, disease conditions (A-Z), symptoms, treatment options, first aid and public health alerts.

Pradhan Mantri Surakshit Matritva Abhiyan (PMSMA) Mobile Application: Under the Pradhan Mantri Surakshit Matritva Abhiyan (PMSMA), free health check-ups will be given to pregnant women on 9th of every month with the participation of private doctors. Ante-natal check-up facility would be provided to all the pregnant women during their second and third trimesters. It is a platform to know more from qualified doctors about breast-care during pregnancy, lactation and danger signs during pregnancy. Private doctors who want to contribute, can register themselves by calling on the toll free number 18001801104 or by registering on <https://pmsma.nhp.gov.in/>. Moreover, they can SMS ‘PMSMA <space> Name’ to 5616115 for registration. The objective of Pradhan Mantri Surakshit Matritva Abhiyan is to decrease the maternity mortality rate, provide safe delivery, and give healthy life to the baby.

No More Tension: Stress is an inseparable part of human existence. Stress is perceived today as one of the very important factors affecting physical and mental health. People due to their hectic lifestyle do not realize being affected by Stress and considered it as a part of their daily lifestyle. The stress management application not only provides information about stress but also helps to know your stress levels and how to reduce them.

India Fights Dengue: This application aims at educating and empowering you to protect yourself from dengue.

All the above-mentioned mobile applications are available on Google Play Store and Apple App Store.

National Health Portal (NHP) Participation

In addition to the above-mentioned activities, NHP also participated in various events as illustrated below:

- NHP participated in the India International Trade Fair during 14-27 November 2016. A good number of visitors marked their presence at the NHP stall. To attract the IITF visitors to the stall, NHP adopted various marketing techniques such as holding health quiz and distributing publicity collaterals.

- NHP participated in the National Consultation on National e-Health Authority (NeHA) that was held on 4 April, 2016 at AIIMS, New Delhi. Representatives from more than 20 states, and representatives from private healthcare providers, healthcare IT experts and vendors attended the consultation. Gracing the occasion as the Chief Guest, Mr. Sunil Sharma, Joint Secretary (e-Governance), elaborated on the various ICT initiatives of the MoHFW.
- NHP organized a One-Day Knowledge Sharing Session/Workshop on the “Integrated Health Information Platform (IHIP)” on 23 July, 2016 in the Institute.
- NHP participated in health check-up camps and IEC campaigns of various health initiatives including e-Health initiative which was organized during 22—25 December, 2016 at Varanasi by the Ministry of Health and Family Welfare.

National Skills Training Unit (DAKSH)

National Skills Lab- *DAKSH* at NIHFW was established on 9 March 2015 in collaboration with LSTM, UK and the Maternal Health Division of MoHFW, Government of India, to upgrade the skills of health care providers for providing quality RMNCH+A services. The main functions of this Skills Lab is to handhold and guide the states in creating skills lab and also train the state trainers. The skills lab training is being imparted to Auxiliary Nurse Midwives, Lady Health Visitors, Staff Nurses, Nursing Tutors and Medical Officers.

The Skills Lab comprises four skill stations and one labour room where the trainees with the help of trainers learn 35 basic skills in 6 days of training through practicing skills on mannequins, simulation exercises, demonstrations, role plays, videos and presentations. Training covers ante-natal, intra-natal, post-natal and newborn care, family planning, infection prevention management of complications and other RMNCH+A services.

The six-day training includes pre and post-training assessment of skills and knowledge of participants through administration of OSCE and questionnaires; demonstration and theory sessions. Theory sessions adopt videos and power point presentations. Skills sessions are demonstrated in Skill Stations by trainers on mannequins/equipment as per the standardized checklists which is followed by practice of skills by the trainees on mannequins under the supervision of the trainers. By the end of each day, there is time for Supervised Skills Practice to learn any skill. On the last day of training, the post-training assessment and certification are done.

A total number of 195 trainees in 25 batches from 7 States- Delhi, Gujarat, Haryana, J&K, Himachal Pradesh, Odisha and Rajasthan, have been trained in skills lab during the period 1 April 2016 to 31 March 2017. Out of total participants, 37 are doctors, 132 are nurses, 9 are ANMs and 17 are skills lab trainers. All the participants received certificate of participation after completion the training.

Annual Sentinel Surveillance for HIV Infection

NIHFW has been entrusted with the responsibility of coordinating, monitoring, improving the data quality and to prepare the country report of the Annual HIV Sentinel Surveillance (HSS) activities since its inception in 1998. NIHFW is coordinating the currently ongoing 15th round of HSS (2016-2017) among ANC and HRG sites across the country. This round of surveillance is proposed to be implemented at 877 ANC and 551 HRG sites. The following activities were initiated in connection with the 15th round of HSS at NIHFW.

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National pre-surveillance meeting for the 15th round of HSS: In coordination with NACO, NIHFW conducted two two-day national pre-surveillance meetings (NPSMs) during 24-25 and 28-29 November, 2016. The first pre-surveillance meeting was organized for the regional institutes (RIs) of South Zone, Central Zone and North Zone and their respective State AIDS Control Societies (SACS) while the second batch of NPSM was for the SACSs attached to the RIs of West Zone, East Zone and North East Zone.

NIHFW presented an overview of the key findings of the CTM in the preceding i.e. 14th round of the HSS. The NPSMs discussed the preparation of the SACS for the forthcoming HSS. The gaps in the preparedness, if any, were identified and the practical remedies were suggested to the SACS teams. The changes in the operational guidelines were also discussed in detail.

Orientation meeting for central team members: NIHFW selected 30 Central Team Members (CTMs) from various medical colleges/public health institutions from across India. A one-day orientation meeting on HSS was conducted for them at NIHFW on 31 January 2017. The meeting discussed field experiences from the previous round, methodology to be adopted at the ANC and HSS sites, suggested changes in the HSS guidelines, data formats for each of the sentinel groups and the checklist prepared for conducting the supervision in the allotted states and sites.

HSS survey and supervision: The HIV Sentinel Surveillance at the ANC sites started on 1 February 2017. In consultation with NACO, NIHFW prepared a list of critical sites to be supervised by the CTM. The allotment of states to the CTMs was done on the basis of their choice, CTM's location and the requirement. NIHFW supervised the CTMs visits in coordination with the respective RIs and SACSs. Majority of the critical sites were visited by the CTMs.

Mother and Child Tracking Facilitation Centre (MCTFC)

Mother and Child Tracking Facilitation Centre has been functional at The National Institute of Health and Family Welfare since 29 April 2014. It is a major step taken by Government of India under the National Health Mission in improving the maternal and child health care services. Mother and Child Tracking Facilitation Centre was envisaged to support MCTS in improving its data quality. MCTFC is expected to call beneficiaries (pregnant women and children) registered in MCTS and validate their records. Further, provision of medical consultants is also there to resolve the health related queries of beneficiaries or health workers.

Subsequently the scope of MCTFC has been expanded. Besides validating the data entered in MCTS by making phone calls to pregnant women and parents of children and health workers; it serves as a powerful tool in providing relevant information and guidance directly to the pregnant women, parents of children and to community health workers. Thus, it helps in creating awareness among them about health services and promoting right health practices and behaviour. It gets feedback from the service providers and recipients of mother and child care services on various mother and child care services, programmes and initiatives like JSSK, JSY, RBSK, National Iron Plus Initiative (NIPI), contraceptive distribution by ASHAs, etc. This feedback helps the Government of India/State Governments to easily and quickly evaluate the programme interventions, and plan appropriate corrective measures to improve the health service delivery. Further, it checks with ASHAs and ANMs on the availability of essential drugs and supplies like ORS packets and contraceptives; promotes government schemes and programmes, assesses the health care services, training needs of health workers; and assists the MoHFW in evaluating health care services, and government schemes and programmes at the field level.

Infrastructure at MCTFC

State-of-art call centre has been established at NIHFW campus with seating capacity of 86 Helpdesk Agents and other managerial staff. MCTFC has a central server room for hosting servers, network and telecom equipments and application. Helpdesk Agents are provided with computers and softphone for making calls to the beneficiaries and health workers.

MCTFC Application

The MCTFC application has two modules each for four categories such as pregnant women, children, ASHAs and ANMs. There are two modules for pregnant women meant for 3-6 months of pregnancy (2nd ANC) and 8-9 months (4th ANC). The modules detail out information of Ante-Natal Care (ANC), Post-Natal Care (PNC) to lactating mothers and immunization details of children. Further, the modules contain information about the government health intervention programmes being run for the pregnant women/children and standardized awareness messages tailored to the current health condition of the beneficiary. The two modules on children are also meant for the post-natal mothers with new-born babies up to 1.5 month old and 6-9 months respectively. The modules deal with verification of information like location details, health worker details, immunization details and other child-related information. They also contain standardized child health awareness messages for children up to the age of 1 year. The modules prepared for ASHAs include basic verification and updating details like name, location and bank details. The modules also validate the services that are rendered by ASHAs like ANC visits, immunization, family planning, adolescent health, etc. Similarly, besides having details like name, location and bank details of ANMs for verification and updating, the modules for ANMs also validate the services that are rendered by ANMs like ANC visits, immunization, family planning, adolescent health, etc.

The MCTFC calling operation covers areas such as Maternal Health, Child Health, Immunization, Family Planning and Adolescent Health. Based on the interaction with beneficiaries and health workers, reporting system of MCTFC provides performance reports that are fed back to MCTS. Some Key Performance Indicators (KPIs) are identified from these reports and the performance of States is assessed on the basis of these KPIs. Accordingly, States take necessary corrective action to improve their performance indicators.

Operationalization of MCTFC

MCTFC is currently operational with 86 Helpdesk Agents making outbound calls to beneficiaries and health workers every day except on national holidays. In addition, there are two doctors who respond to the specific queries of beneficiaries and health workers and provide non-clinical advice to them. A new HSP has been appointed and augmented application has been initiated with Hindi, English along with 5 regional languages- Gujarati, Odia, Assamese, Bengali and Telugu which have been added on 10 March 17. A campaign was initiated to assess the effective implementation of *Janani Shishu Suraksha Karyakram* (JSSK) in the country. More than 20,000 beneficiaries in 18 States have been covered under this campaign. A campaign to get the feedback on awareness about danger signs among pregnant women was initiated for Uttar Pradesh. Similarly, a campaign on maternal and newborn care video shown to mothers in district hospital was initiated for states of Uttar Pradesh, Bihar, Punjab, Haryana, Madhya Pradesh, Himachal Pradesh, Uttarakhand and Rajasthan. Another campaign on the distribution of free drugs availed of by the beneficiaries was initiated in the states of Bihar, Chandigarh, Chhattisgarh, Delhi, Jharkhand, Haryana, Himachal Pradesh, Madhya Pradesh, Punjab, Rajasthan, Uttarakhand and Uttar Pradesh.

Validation of MCTS Data

Total 21,88,591 beneficiaries including 19,706 ANMs and 1,34,716 ASHAs were contacted through MCTFC for validation of records for the financial year 2016-2017, promotion of Government schemes and assessment of services delivered at the field level and effectiveness of implementation of Government schemes.

MCTFC IVR System

Voice messages related to maternal health, child care, immunization and family planning are being delivered to pregnant women and parents of children through MCTFC IVRS system. These messages are being sent to the respective beneficiaries to spread awareness on maternal health, child care, immunization and family planning. Total 18 messages are sent to pregnant women and parents of children; and more than 12 lakh messages have been delivered to pregnant woman and parents of children.

National Cold-Chain and Vaccine Management Resource Centre (NCCVMRC)

NCCVMRC has completed all the activities as per the approved annual work plan for 2016-2017. Its achievements in training and capacity building include training of cold chain technicians on repair and maintenance of WIC/WIF, ILR/DF and voltage stabilizers. During the year, NCCVMRC has trained around 240 CCTs. In addition, the newly designed module for vaccine and cold chain handlers was launched by the NCCVMRC for the MoH&FW which completed ToTs for 296 state-level master trainers in 8 batches within a span of 3 months. For immunization programme managers, NCCVMRC conducted an Effective Cold Chain and Vaccine Management Course (ECCVMC) for 17 state and district-level participants. The Centre further modified and refined the course to match with international standards and was renamed as Training on Vaccine and Cold Chain Management or T-VaCC. An Immunization Training Management Information System (iTMISS) has been developed by NCCVMRC to track and record all immunization related trainings for the MoH&FW.

NCCVMRC also facilitated the National Review Meeting on Implementation of EVM Improvement Plan at Lucknow and reviewed the progress of implementation plan status of 11 states. NCCVMRC also successfully coordinated the Immunization Supply Chain Review Meeting for all the districts of Uttar Pradesh. It has submitted monthly reports to MoH&FW on temperature monitoring of bulk vaccine stores of 9 states with 106 sensors.

NCCVMRC has taken an active role in facilitating the Government of India's roll out of newer vaccines, specifically related to estimates of cold chain capacity planning, for Rotavirus vaccine and MR vaccine. It has also facilitated the Government of Assam in conducting the State Training of DIOs on Routine Immunization. Besides these discrete activities, NCCVMRC is continuously involved in providing technical support to the State Governments and to the Government of India on various cold chain and supply chain related issues.

CONSULTANCY AND ADVISORY SERVICES



Activities of the Director

Besides managing and supervising all the activities of the Institute; Prof. Jayanta K. Das, Director, with expertise in the field of Public Health, Health Management and Hospital Administration; took part in the following meetings, discussions, workshops, etc. in different organizations in various capacities. A few of his significant activities are listed below:

International

- Attended the `Global Partner Consultation on Effective Vaccine Management Assessment Tool Version 2.0 (EVMA2.0) and Links to Immunisation Supply Chain Improvement Planning, at Copenhagen, Denmark during 20-23 June 2016.
- Attended the Teach to Reach Summit: Innovative Methods for Immunization Training, and Chaired a group to prepare recommendations for Training on Building Capacity of Trainers in Immunization Focusing on Developing Strategies for Implementation, Building on Learning Science, Instructional Design and Measurement; held at Barcelona, Spain during 29 November—1 December 2016.

National

- Attended the National Consultation on National e-Health Authority (NeHA) with different stakeholders, States/UTs and Departments on setting up of NeHA; held at AIIMS, New Delhi, on 04 April 2016.
- Chaired the session on Improving Quality of Family Planning Services in the National Family Planning Summit–2016, organized by the Ministry of Health and Family Welfare, at The Grand hotel, Vasant Kunj, New Delhi on 05 April 2016.
- As an expert member, attended the Expert Review Committee Meeting (ERC) for Case Classification of AFP Cases with Inadequate Stool Samples–WHO, at WHO Office, New Delhi, on 06 April and 27 June 2016.
- Delivered a lecture on Case Studies in Hospital Procurement in MDP on Budgeting and Hospital Procurement, at National Institute of Financial Management, Faridabad on 22 April 2016.
- As a member, attended the meeting of the National Human Rights Commission Core Advisory Group on Health, at Manav Adhikar Bhawan, GPO Complex, INA, New Delhi on 06 May 2016.
- Attended the FICCI Health Services National Committee Meeting at FICCI, Federation House, New Delhi on 09 May 2016.
- Attended the National Consultation on Transitioning from MDGs to SDGs in India–Ensuring Healthy Lives and Promoting Well-Being for all Indians at all Ages, organized by WHO-India and MoHFW at Hotel Taj Palace, New Delhi on 10 May 2016.

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- As a member, attended the Executive Body meeting of IPHA– Delhi State Branch, at Vardhman Mahavir Medical College on 14 and 25 May 2016.
- Delivered the key-note address on the occasion of Annual Day Celebration of Gopabandhu Institute of Medical Sciences and Research (GIMSAR), at Madhabpur, Athgarh, Cuttack during 15-16 May 2016.
- Took a session on Management of Emergency Health Services during Post-Disaster, Particularly Related to Reproductive Health, Trauma (Physical and Psychological) and NCDs, and Logistic Management in Relation with Disaster Management in Rapid Response Team Training, at NIHFW on 17 May 2016.
- Acted as an Examiner in the practical examination in the speciality of Field Epidemiology conducted by National Board of Examination (NBE), at Vardhman Mahavir Medical College and Safdarjung Hospital, New Delhi on 19 and 20 May 2016.
- As an expert member, attended the meeting of the Expert Review Committee (ERC) for the Case Classification of AFP Cases with Vaccine Virus in Stool Samples, at WHO Office, New Delhi on 25 May 2016.
- As the Guest of Honour, delivered the key note address to the participants on the occasion of International Anti-Dengue Day, organized by the Indian Public Health Association– Delhi Chapter, on 28 May 2016 at NIHFW, New Delhi.
- Took a session on Managerial Techniques in Managing Health Services at the International Institute of Health Management Research, Dwarka, New Delhi on 01 June 2016.
- Received the Life Time Achievement Award, conferred by the Indian Society for Malaria and Other Communicable Diseases (Indian Association of Epidemiologists) and also attended the XI Joint Annual Conference on Public Health in Digital India and Swachh Bharat, at Bengaluru during 10-12 June 2016.
- Attended the meeting to suggest modalities on reduction of expenditure under CGHS under the Chairmanship of Dr. B. Athani, Special (DGHS), at Nirman Bhawan, New Delhi on 14 June 2016.
- Attended the Global Health Security Agenda quarterly meeting, co-chaired by Dr. Jagdish Prasad, DGHS and Dr. Soumya Swaminathan, DG-ICMR, at Nirman Bhawan, New Delhi on 16 June 2016.
- Attended the Celebration of Maternal and Neonatal Tetanus Elimination and Yaws-Free India, held under the Chairmanship of Union Secretary, Department of Health and Family Welfare, in New Delhi on 7 July 2016.
- On the occasion of World Population Day, as a panelist, took part in a live discussion on Population Stabilization on Lok Sabha Television on 09 July 2016.
- On the occasion of World Population Day, as a panelist, took part in a talk on Population Stabilization– Key to Success, which was broadcast on All India Radio on 11 July 2016.
- Attended a National Workshop on Jimmedari Nibhao, Plan Banao organized by MoHFW at Vigyan Bhawan, New Delhi, on 11 July 2016.
- As a Member, attended the First Meeting of Technical Expert Group (TEG) on Injection Safety in India under the Chairmanship of Secretary (HFW) at Nirman Bhawan, New Delhi on 13 July 2016.
- Took a session on Equipment Planning, Procurement, Audit, Maintenance, Repairs and Disposal in BEA in the Second Contact Programme of PGDPHM course at Army Hospital (R&R), Delhi Cantonment, New Delhi on 19 July 2016.

- Attended a meeting regarding action points emerging from the RoD of the IMM relating to ASEAN-India Summit, East Asia Summit and Meckong Ganga Cooperation, held by the Ministry of External Affairs on 9 June 2016. The meeting was chaired by the Additional Secretary (H), MoHFW.
- As a Member, attended the Executive Committee Meeting of VMMC and Safderjung Hospital on 11 August 2016.
- As the Chairman, conducted the sixth meeting of Institutional Review Board of National Institute of Public Cooperation and Child Development, in New Delhi on 13 August 2016.
- As a Member, attended a meeting to discuss the draft toolkit for Dengue Disease Burden Estimation, organized jointly by NVBDCP and WHO, WHO Country Office, New Delhi on 16 August 2016.
- As the Convener, attended a meeting under the Chairmanship of Prof. K.K. Talwar on Preparation of Guidelines on Ethical Practices by Doctors, held at National Human Rights Commission, New Delhi, on 18 August 2016.
- Chaired the session on Strengthening Patient Safety: Focus on Injections Safety, in the 11th National Quality Conclave of Quality Council of India, on 19 August 2016.
- Chaired a session on Trauma Care in Fast Growing Economies, in the World Trauma Congress 2016 on 20 August 2016. The event was organized by the JPN Apex Trauma Centre, AIIMS, New Delhi and Indian Society for Trauma and Acute Care in association with World Coalition for Trauma Care in New Delhi.
- As an Expert Member, attended the selection committee meeting for various posts of faculty in All India Institute of Medical Sciences, New Delhi, on 22 August 2016.
- Attended the Technical Committee Meeting on Carcinogenesis to discuss the Roles and Responsibilities of Ministries and Stake-holders on 23 August 2016. Union Secretary, MOHFW, chaired the meeting.
- Attended the National Consultation on Application of Mobile Telephony in Old Age Care, organized by the Department of Geriatric Care, AIIMS, New Delhi on 26 August 2016.
- As a special invitee, attended the 10th FICCI HEAL- Re-engineering Indian Health Care, organized by the Federation of Indian Chamber of Commerce and Industry, New Delhi on 31 August 2016.
- As an expert took part in the Capacity Building Working Group in the India Africa Health Sciences Meet, organized by the Indian Council of Medical Research (ICMR) and the Ministry of External Affairs, Government of India, in New Delhi, during 1-3 September 2016.
- Attended the Course on Building Global Capacity to Recognize and Mitigate Agents of Opportunity for Chemical and Radiological Emergencies, organized by the DGHS in collaboration with NDMA, BARC, CDC and hosted by AIIMS, in New Delhi on 5 September 2016; and in Mumbai during 8-10 September 2016
- Organized the National Multi-Stakeholder Consultative Workshop on 'Inter-sectoral Capacity Building on Public Health in Emergency (PHiE) Situations in India, in collaboration with UNICEF, held in New Delhi on 06 September 2016.
- As the Chief Guest, attended the Convocation Ceremony of Distance Learning Courses at the State Institute of Health and Family Welfare, Bengaluru, Karnataka, on 20 September 2016.
- As the Chairperson of Organizing Committee, organized the 3rd International Conference on Occupational and Environmental Health, in collaboration with VMMC and Safdarjung Hospital, at NIHFW during 23-25 September 2016.

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- Attended the Launch of the France Alumni Network- India Chapter, organized by the French Embassy in New Delhi on 28 September 2016.
- As a Member, attended the Expert Review Committee of AFP cases at WHO, New Delhi, on 29 September 2016.
- As a Member, attended the Board of Studies Meeting of University School of Medicine and Para Medical Health Sciences, at Guru Govind Singh Indraprastha University, New Delhi, on 7 October 2016.
- As a Member, attended the first Expert Group Meeting on Bio-medical Waste Management at National Centre for Disease Control, Delhi, on 17-18 October 2016.
- Conducted an Interactive Session for the students of PGDHHM Course at Research and Referral Hospital, Delhi Cantonment on 18 October 2016.
- Delivered the Welcome Address at the National Seminar on New Vaccines for All: Why, Which, When?, jointly organized by Jan Swasthya Sahyog (JSS) Bilaspur; Sama Resource Group for Women and Health, Delhi; National Medical Journal of India (NMJI); and the Forum for Medical Ethics Society (FMES), Mumbai; at NIHFW on 20-21 October 2016.
- As a Member, attended the Expert Review Committee Meeting for the Case Classification of AFP Cases with Inadequate Stool Samples, organized by WHO at New Delhi on 24 October 2016.
- Attended a meeting to discuss the interventions to the COP 7 (Seventh Session of the Conference of the Parties) to the WHO Framework Convention on Tobacco Control (WHO FCTC), held under the Chairmanship of Spl. DGHS at MOHFW on 1 November 2016.
- Attended a meeting on Constitution of Ten Sectoral Groups comprising Secretaries of related Ministries/Departments, held under the Chairmanship of Additional Secretary and Mission Director, MOHFW, New Delhi, on 1 November 2016.
- Attended the Asian Ministerial Conference for Disaster Risk Reduction, organized by National Institute of Disaster Management, in New Delhi during 3-5 November 2016.
- Attended the Launch Ceremony of Pradhan Mantri Surakshit Matritva Abhiyan (PMSMA), organized by MOHFW in New Delhi on 4 November 2016.
- Took a session on Case Studies in Hospital Procurement in the training course on MDP for Finance and Hospital Procurement of DGHS, organized by National Institute of Financial Management, Faridabad, on 5 November 2016.
- Chaired the session on Existing Registries and Inter-Ministerial Coordination– Lessons Learnt, in the workshop on Building the Bridge between Air Quality, Weather and Health in India, organized by the Centre for Environmental and Occupational Health, at National Centre for Diseases Control (NCDC), in collaboration with Center for Disease Control and Prevention (CDC), Atlanta; in New Delhi on 8 November 2016.
- Attended the Technical Review Meeting of GHSA project (CDC) held under the Chairmanship of Director General of Health Services in MOHFW, New Delhi, on 8 November 2016.
- As Co-Chairman, organized the Indian Ageing Congress 2016– 18th Biennial Conference of Association of Gerontology (India) and 14th Annual Conference of India Academy of Geriatrics, at All India Institute of Medical Sciences, New Delhi, during 9-11 November 2016.
- As a Member, attended the Executive Body Meeting of VMMC and Safdarjung Hospital at Vardhman Mahavir Medical College, New Delhi on 9 November 2016.
- As a Member, attended the Governing Council Board Meeting of International Institute of Health Management Research, Delhi, on 14 November 2016.

- Attended the First Meeting of the National Task Force on SDG-3, in the Ministry of Health and Family Welfare, New Delhi, on 21 November 2016.
- Attended the Expert Review Committee Meeting for the Case Classification of AFP Cases with Inadequate Stool Samples, organized by WHO, New Delhi, on 25 November and 23 December 2016.
- On the occasion of Organ Donation Week to promote organ donation, participated in the walkathon and pledge ceremony, organized by MoHFW on 27 November 2016.
- Attended the Meeting regarding mechanism for Implementation of Capacity Development Framework– Role of NIHFW-NHSRC, held under the Chairmanship of Joint Secretary (Urban Health), MoHFW, on 7 December 2016
- Delivered two lectures on (i) Right to Information Act; and (ii) Sexual Offences at Workplace, in the Training Course on MDP on Legal Issues in Health and Hospital Management organized by IIMR, New Delhi, on 8 December 2016.
- As a Member, attended the first meeting of the Re-constituted Advisory Council of Indian Institute of Public Health, Delhi; at Public Health Foundation of India, Gurugram on 21 December 2016.
- Attended a meeting regarding issues about the modification of criteria for MD (CHA) for the session beginning 2017 onwards, held under the Chairmanship of Special DGHS in MoHFW on 5 January 2017.
- Attended a Roundtable Meeting on how to effectively involve communities and other stakeholders in Disease Elimination Programmes under Sustainable Development Goals in South-East Asia, organized by Voluntary Health Association of India, New Delhi on 13 January 2017.
- Organized the Review Meeting of the Director/Principals of Central Training Institutes (CTIs) under RCH-II/NHM in NIHFW on 16 January 2017.
- Organized a joint workshop with NHSRC on Capacity Building of Health Personnel under NUHM, in NIHFW on 17 January 2016.
- As an expert, attended the Expert Review Committee Meeting for Case Classification of AFP Cases with Vaccine Virus Isolation in Stool Samples, organized by WHO in New Delhi on 30 January 2017.
- Delivered the key note address at the HIV Sentinel Surveillance– National Pre-surveillance Meeting of Central Team Members, organized in NIHFW on 31 January 2017.
- Delivered the Welcome Address in the National Seminar on Rheumatic Heart Disease, organized by Directorate General of Health Services, MoHFW, in NIHFW, on 2 February 2017.
- Attended the National Urban Health Mission Review Meeting held under the Chairmanship of Joint Secretary (UH), in National Health Systems Resource Centre on 2 February 2017.
- Attended the Joint Video Conference to focus on areas of convergence between Ministry of Urban Development and MoHFW for effective implementation of National Urban Health Mission, held under the Chairmanship of Additional Secretary/Mission Director, MoHFW, on 3 February 2017.
- As a Member, attended the Quarterly Review Meeting of Implementation of GHSA Projects in India, held under the Chairmanship of DGHS, in MoHFW on 7 February 2017.
- Attended the 8th SEAPHEIN Annual Meeting held in Jaipur, Rajasthan on 13 and 14 February 2017.
- As an expert, attended the Expert Review Committee Meeting for Case Classification of AFP Cases with Vaccine Virus Isolation in Stool Samples, organized by WHO in New Delhi on 22 February and 27 March 2017.

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- Inaugurated the training course on Implementation of Quality Management System (QMS) at CD4 Laboratories, organized by National AIDS Control Organization, MoHFW, in NIHFW on 2 March 2017.
- Attended the meeting of Expert Group to review the ongoing training programmes for Workforce Development under the Global Health Security Agenda (GHSA) in India, at MoHFW, New Delhi, on 14 March 2017.
- Chaired the Session on Present Trends and Practices in Bio Medical Waste Management and Road Map of Future Bio Waste Management in India, in the Hospital Summit 2017, organized by PHD Chamber in New Delhi, on 17 March 2017.
- Attended the International Advisory Committee of LASI-DAD, organized by the India Team of Harmonized Diagnostic Assessment of Dementia (DAD) for Longitudinal Aging Study of India (LASI)- LASI DAD Study, in New Delhi on 22 March 2017.
- Acted as a Moderator in the session on Maternal and Child Health in the National Conference on Health and Well Being: Community as Solution (Caritas India), held in New Delhi, on 22 March 2017.
- As Member, attended the meeting of Board of Studies of University School of Medicine and Para Medical Health Sciences, GGSU, New Delhi, on 24 March 2017.
- Attended the meeting of Public Health Task Force in MoHFW, New Delhi, on 27 March 2017.
- Attended the Hospital Disaster Resilience Meeting, organized in collaboration with Asian Disaster Preparedness Center (ADPC), Bangkok, at NDMA Bhawan in New Delhi on 29 March 2017.
- Attended the Training Course on Conduct Rules and Disciplinary Proceedings, organized by Institute of Good Governance, in New Delhi on 30 and 31 March 2017.
- As a Member, attended the Meeting of National Human Rights Commission (NHRC) Core Advisory Group on Health, held in New Delhi on 31 March 2017.

Activities of Faculty/Staff Members

Prof. V.K. Tiwari, Head, Department of Planning and Evaluation

- Presented a paper on Management and Implementation of Mukhya Mantri Nishulk Dava Yojna (MMNDY) in a District Hospital, Rajasthan: Perspectives, Issues and Challenges, in the 14th Annual Conference of Indian Association for Social Sciences and Health (IASSH) in Collaboration with Gokhale Institute of Politics and Economics, Pune, held during 23-25 September 2016.
- Presented a paper on Twin Burden of TB and DM among Patients Attending a Tertiary Care Hospital in Delhi in the 34th Annual Conference of Indian Society of Medical Statistics at Indian Statistical Institute, Kolkata during 1-3 December 2016.
- Presented a paper on Predictors of Risky Sex Behaviour in Adolescents in the 37th Annual Conference of Indian Association for Study of Population (IASP) organized by the Institute of Economic Growth, University of Delhi during 7-9 December 2016. Also chaired the first poster presentation session and also chaired the session on Tools for the Monitoring and Tracking.
- Attended the workshop on Measuring FP 2020 Indicators under Track 20 Project, organized by the Ministry of Health and Family Welfare, Government of India, at India Habitat Center, New Delhi on 21 June 2016.
- Attended the National Conference on NCDs, organized by the MoHFW, New Delhi on 22 June 2016.

- Invited by Population Council, India Office, to a one-day seminar on 31 March 2017 to share lessons learnt from a programme of research to reduce violence against women and girls that the Population Council has conducted in partnership with the Government of Bihar, Centre for Catalysing Change (C3), and the London School of Hygiene and Tropical Medicine.
- Attended the Confidential Expert Committee Meetings of UGC NET Examination during 5-10 April, 27-28 July, 7-12 November 2016 and on 6 January 2017 at the CBSC Office, Noida, New Delhi.
- Evaluated the Ph.D. thesis on An Epidemiological Study of Low Birth Weight in India: Biostatistical Appraisal, by Mr. Dharmendra Kumar Dube, Guwahati University; and was an external examiner in the viva-voce.
- Evaluated the Ph. D. thesis on Utilization of Maternal and Child Health Care Service in Rural Manipur by Mr. P. Thongkhanthang, I.P. University, Delhi; and was an external examiner in the viva-voce.
- Evaluated the Ph. D. thesis on Determinants of Neonatal Health Care and Health Seeking Behaviour in Udhampur District of Jammu and Kashmir by Mr. Ajay Sanotra, CSRD, School of Social Sciences, JNU; and was an external examiner in the viva-voce.
- Evaluated the Ph.D. thesis on Modeling of HIV Type-I Infection Transmission from Mother to Child in Bengaluru City by Mr. Basavarajaiah D. M., National Institute of Epidemiology, Indian Council of Medical Research, Chennai.
- Evaluated the Ph. D. thesis on Spatial and Multilevel Modeling to Study the Utilization of Reproductive and Child Health Services in Empowered Action Group (EAG) States by Mr. Khangembam Jitenkumar Singh, National Institute of Medical Statistics (NIMS), Indian Council of Medical Research, New Delhi.
- Delivered four lectures on Inter-disciplinary Refresher Course on Research Methodology viz., Overview of Research, Types of Research, Sampling Design and Sample Size Calculation, and How to Enhance Chance of Publication in Good Journals; in the refresher course for university teachers of Hari Sing Gaur Central University, Sagar during 27-28 January 2017.

Prof. Rajni Bagga, Head, Department of Management Sciences

- Presented a paper on Role and Strategies for Behaviour Change Communication in Generating Community Support in the one-day workshop on Prevention and Control of Vector-Borne Diseases, at India Habitat Centre, New Delhi on 18 April 2016.
- Conducted three-day Leadership Development Training Course for Senior State and District Medical Officers of Government of Telangana, at IIFHW Hyderabad during 2-4 May 2017.
- On an invitation from the Scientific Professional Programme Committee (SPPC), attended the ICM's 31st Triennial Congress in Toronto during 18–22 June 2017; and chaired a session on The Impact of Midwifery Care in which papers from USA, Indonesia and India were presented.
- Presented a paper on Community Health Nursing Leadership: Influence of Gender, Position and Lack of Access to Decision-Making during a two-day National Consultation on Community Health Nursing in India, organized by ANSWERS at the Centre of Social Medicine and Community Health, Jawaharlal Nehru University, New Delhi on 11 and 12 August 2016.

Prof. Pushpanjali Swain, Head, Department of Statistics and Demography

- Attended the Routine Health Information System training at IIPH, Gurgaon on 6 and 7 June 2016.
- Attend the meeting of the Technical Advisory Committee of NFHS-4 at Nirman Bhawan, New Delhi on 6 September 2016.
- Attended the Experts' Consultation meeting on HIV Surveillance and Estimation, at Le Meridian, New Delhi during 27-29 September 2016.
- Chaired a session in the 37th Annual Conference of IASP on Population and Sustainable Development, at Institute of Economic Growth, Delhi during 7-9 December 2016.
- Attended the 10th Common Review Mission, in Nagaland during 5-12 November 2016.

Prof. Poonam Khattar, Department of Education and Training

- Deliver a talk on Capacity Building in Health Promotion in the National Dissemination Meeting for Development of an Integrated Model for Health Promotion in a District Setting of Punjab and Haryana, an ICMR Project, organized by PGIMER at the Advanced Eye Centre, PGIMER, Chandigarh on 22 August 2016.

Dr. Nanthini Subbiah, Associate Professor, Department of Community Health Administration

- Attended the expert group review meeting on Development of Training Modules for Elderly Health Care Providers Under NPHCE during 4-6 October 2016 at NIHFW, New Delhi.
- Attended the course writers meeting for development of Bridge Programme in Community Health for Nurses at IGNOU, Maidan Garhi, New Delhi.
- Attended the expert group meeting on Preparation of Draft NUHM Orientation Module, at NIHFW on 21 October 2016.
- Attended a series of NUHM Core Group Meetings and RCH-related meetings at NHSRC and MoHFW.
- As the Nodal Officer, coordinated the CTI Directors Review Meeting at NIHFW on 16 January 2017.
- As Nodal Officer, coordinated the one-day Orientation Workshop for Directors of CTIs/ SHSRC on NUHM at NIHFW on 17 January 2017.

Mr. Salek Chand, Senior Documentation Officer

- Chaired a technical session in the International Conference on From Ownership to Access: Leveraging the Digital Paradigm; jointly organised by Ambedkar University, Delhi; Society of Library Professionals and Special Library Association (USA)- Asian Chapter, at Ambedkar University, Delhi on 19 and 20 May 2016.

Dr. Ankur Yadav, Asst. Professor, Department of Communication

- Delivered a lecture on Management of Social Behavioural Change Communication at Filed Level in the Workshop on Challenges of Communication at the Field Level, under the aegis of Health and Family Welfare Department, National Health Mission and State Institute of Health and Family Welfare, Government of Karnataka; at Hotel Surya, Bengaluru on 27 September 2016.

Dr. Diwakar Yadav, Asst. Professor, Statistics and Demography

- Attended a seminar on Physical Activity- A Key Health Promotion Strategy towards NCD, at NIHFW on 21 October 2016.
- Attended a meeting related to Implementation of Roof Top Solar PV Projects in NIHFW, at NTPC Office, New Delhi on 6 December 2016.
- Presented a paper on Role of Continuum of Care for Maternal Health Service Utilization in Contraceptive Use among Currently Married Women in Uttar Pradesh, India; in the 37th Annual Conference of Indian Association for the Study of Population, at Delhi University, during 7-9 December 2016.

Ms. Vaishali Jaiswal, Asst. Research Officer, Department of Epidemiology

- Attended a two-day National Consultation on Community Health Nursing in India, at the Centre of Social Medicine and Community Health, Jawaharlal Nehru University, organized by ANSWERS, on 11 and 12 August 2016.
- Presented a poster on Implications of Household Air Pollution in India on Health: An Overview, in the 3rd International Conference on Occupational and Environmental Health, jointly organized by Department of Community Medicine, VMMC and SJH; NIHFW; and OHS-MCS, New Delhi; during 23-25 September 2016.

ADMINISTRATIVE MEASURES

During the year under review, several administrative procedures for finalizing the matters relating to retirement, pension, promotion/appointment, etc. have been streamlined in the Institute.

(i) **Governing Body (GB)**

The major responsibility for management of the Institute's affairs has been entrusted with the Governing Body. Hon'ble Union Minister for Health and Family Welfare is the Chairperson of the GB. The GB takes policy decisions to further the functioning of the Institute. According to the By-Laws of NIHFW, though it is mandatory to convene the GB meeting at least once a year for the transaction of business of the Institute, not a single GB Meeting has been held during the last five years.

(ii) **Standing Finance Committee (SFC)**

The SFC is an important committee which provides guidance in the matters of financial management of the Institute. The 57th Meeting of the Standing Finance Committee of NIHFW was convened on 2 December 2015 under the chairmanship of Mr. Bhanu Pratap Sharma, Secretary, Health and Family Welfare, MoHFW.

(iii) **Programme Advisory Committee (PAC)**

The committee includes representatives of different disciplines, drawn from Central and State levels and Central Training Institutes, either directly or indirectly involved in the promotion of health and family welfare programmes in the country. The committee normally meets at least twice a year to review the activities of the Institute to provide guidance in the academic activities.

A mid-term review meeting of PAC was held on 23 November 2016. Col (Dr.) P. K. Dutta (Retd.), Chaired the meeting and assessed all the training and research activities of the Institute for the year 2016-2017. The PAC also reviewed all the completed studies as well as the current status of the on-going studies. All the faculty members, Medical Officers and Research Officers attended the meeting.



USE OF HINDI IN OFFICIAL WORK

An Official Language Implementation Committee is functioning in the Institute under the Chairmanship of Director, NIHFW, to monitor the progress of the implementation of the Official Language Policy in NIHFW. During the period under report, the Committee held all its quarterly meetings regularly. The present composition of the Official Language Implementation Committee is given below:

Prof. Jayanta K. Das, Director	Chairman
Dr. Utsuk Datta, Dean & Professor, Deptt. of Education & Training	Vice-Chairman
Shri Rajiv Ranjan Singh, Dy. Director (Admn.)	Member
Prof. S.V. Adhish, Head, Deptt. of C.H.A.	Member
Dr.V.K. Tiwari, Professor, Deptt. of Planning & Evaluation	Member
Dr. (Mrs.) Neera Dhar, Actg. Head., Deptt. of Communication; & Professor, Deptt. of Education & Training	Member
Dr. Mirambika Mahapatro, Assoc.Professor, Deptt. of Social Sciences	Member
Dr. Ankur Yadav, Asst. Prof., Deptt. of Communication	Member
Dr. Rajesh Kumar, Asst. Prof., Deptt. of R.B.M.	Member
Shri Salek Chand, Senior. Doc. Officer., N.D.C.	Member
Dr. J.P. Shivdasani, Research Officer	Member
Shri Jagdish Sharma, D.E.O.-Gr. E, Computer Center	Member
Section Officer (Admn.1)	Member
Section Officer (Admn.2)	Member
Section Officer (Academic)	Member
Workshop and Maintenance Officer	Member
Accounts Officer	Member
Officer In-charge (Stores)	Member
Dr. Ganesh Shankar Srivastava, Sub-Editor (Hindi)	Member
Assistant Director (O.L.)	Member-Secretary

A brief resume of the progress regarding implementation of Official Language Policy during the period under report (i.e. from April, 2016 to March 31, 2017) is given as follows:

1. Use of Hindi in Correspondence

During the period under report, 96.52% of the letters (including fax messages) that included 97.42% letters meant for region 'A', 92.90% for region 'B' and 90.03% of letters for region 'C' were issued in Hindi against the fixed target of 100% for 'A' & 'B' regions and 65% for 'C' region. Cent percent General Orders were issued bilingually during the period under report. Similarly, all the letters received in Hindi were replied to in Hindi.

2. Translation Works

Apart from the day-to-day translation work in Hindi, the following specific translation works were also accomplished during the period under review:

NIHFW Annual Report 2016-2017

- i. Annual Report, 2015-2016
- ii. Annual Accounts, 2015-2016
- iii. Translation of material pertaining to disciplinary procedures
- iv. Translation of proformas and revised form E pertaining to Investigation/Tests (R.B.M. Department)- 2 sets
- v. J.S.K. evaluation Interview and Survey Schedules for the states of U.P. and Punjab (S & D Department)- 2 sets
- vi. Tender notice/agreement forms
- vii. Translation of question papers for the written/skill tests for various posts in the Institute
- viii. Translation of material for uploading on Institutes's website
- ix. Translation of material compiled for inclusion in the Annual Report for the year 2016-2017 of Ministry of Health and Family Welfare
- x. Audit Report Certificate, SAR para, and related materials for the year 2015-2016
- xi. Translation of material on Hindi cell and other events/activities for Institute's quarterly Newsletter
- xii. Translation of various forms related to day-to-day work of the Institute
- xiii. Translation of Informed Patient Consent Proforma for collecting blood samples for HIV/AIDS (C.H.A. Department)
- xiv. Translation of information material pertaining to panels of Annual Day-2017 exhibition of the Institute
- xv. Translation of Review Statement for the year 2015-2016

3. **Hindi Teaching Scheme**

A. **Training of Staff under Hindi Teaching Scheme in Hindi Stenography and Hindi Typewriting**

Out of 9 regular Stenographers, 8 stenographers have already been trained in Hindi Stenography and remaining one will be nominated in the next session of training. Similarly, out of 15 LDCs, 10 have already been trained in Hindi typing and remaining three employees are being nominated for Hindi typing training in the next session of the training.

B. **Training of Staff in Hindi**

All the 186 eligible staff members of the Institute have attained working knowledge in Hindi. Out of which 103 staff members have proficiency in Hindi and the remaining 83 have acquired the working knowledge in Hindi.

4. **Incentive Scheme for Progressive Use of Hindi in Official Work**

During the financial under report, 8 employees participated in the aforesaid Incentive Scheme. Their work will be evaluated by a sub-committee.

5. **Hindi Fortnight**

Hindi fortnight was celebrated in the Institute during 1-15 September 2016 under which the following activities were organized:

- On 1 September 2016, an appeal was issued from Director, NIHFW for all the staff members to make progressive use of Hindi in their day-to-day official works.
- On 2 September 2016, an Essay Competition on *Vridh jano mein ekakipan evam tanav ke karan badhti Samasyaein* was organised for the staff.
- On 5 September 2016, Hindi Noting and Drafting competition was held.
- During 6-7 September 2016, 17th Hindi Workshop on Use of Hindi in Official Work was organised.
- On 8 September 2016, Hindi Elocution Competition on *Gramin kshetron mein Matar evam shishu ke liye swasthay aur poshan sevayein kitni paryapt hai* was organised.
- On 9 September 2016, *Hindi Shrutlekhan* (Dictation) competition for the M.T.S. was conducted.
- On 13 September 2016, written Hindi Quiz Competition was held.
- On 14 September 2016, Hindi Day was celebrated in the Institute. Prof. Puran Chand Tandon, eminent author and critic, graced the Day as the Chief Guest. He spoke on *Swatantra Bharat mein Hindi mein kaamkaj ki anivaryta*, to acquaint the staff members with the provisions of Official Language Act.

Official Language Inspection of Institute

On 23 August 2016, an Inspection Team from the MoHFW visited the Institute and had a meeting with the Director, NIHFW.

6. Other Activities

- Shri Arvind Kumar, Asstt. Director (O.L.) Participated in the meeting of *Nagar Rajbhasha Karyanvayan Samiti* at the Conference Hall of the Central Electricity Authority, Seva Bhawan, R.K. Puram, New Delhi on 15 April, 26 August, 30 August 2016 and 28 March 2017. He also attended the Review Meeting of Hindi Advisory Committee, MoHFW under the Chairmanship of Shri B.K. Aggarwal, Additional Secretary, MoHFW, on 30 August 2016.
- Shri Arvind Kumar, Asstt. Director (O.L.) and Dr. Ankur Yadav, Faculty In-charge of Hindi Cell, participated in the Sixth three-day Hindi Rajbhasha Conference at JIPMER, Puducherry, organised under the aegis of MoHFW during 9-11 January 2017.

7. JAN SWASTHAY DHAARNA

In order to encourage the staff of the Institute to write their articles in Hindi, NIHFW brings out a publication with the title *Jan Swasthay Dhaarna*. The 23rd issue of this publication is under process that contains the following articles:

1. *Ghatak hai Ucch Raktchaap aur ati tanaav* by Sh. Arvind Kumar.
2. *Jahreela Pradushan* (poem) by Sh. Arvind Kumar.

EVENTS

125th Birth Anniversary of Dr. B. R. Ambedkar Observed

NIHFW observed the 125th Birth Anniversary of Bharat Ratna Dr. Bhim Rao Ambedkar on 18 April 2016 as his birthday on 14 April was declared a holiday. Director, NIHFW, Prof. Jayanta K. Das and other officials offered floral tributes to the chief architect of the Indian Constitution on the later date. Many staff members spoke on the contribution of Dr. Ambedkar for the welfare of the masses.



Book Exhibitions

National Documentation Centre organised two Book Exhibitions on 27 May and 26 September

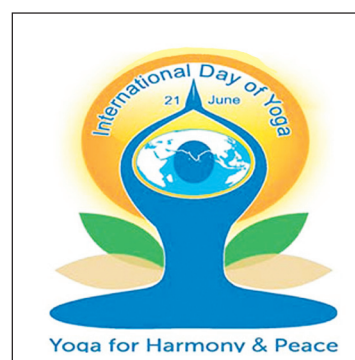


2016. The first exhibition exclusively displayed only Hindi books primarily on Social Sciences, Public Health, Statistics and Demography, Planning and Evaluation, Bio-medicine, Family Welfare, Management Sciences, Obstetrics and Gynaecology, Hospital Management, Health Education, Health Communication, Epidemiology, Hindi Literatures, etc. Many renowned publishers displayed their publications. Faculty, research staff, students and trainees visited the exhibition and

recommended books for procurement. Prof. J. K. Das, Director, inaugurated the exhibition.

NIHFW Celebrated 2nd International Day of Yoga

The Institute celebrated the 2nd International Day of Yoga in the morning of 21st June 2016 on the lawns. On the occasion, two yoga sessions were conducted on the campus for the staff and their family members in the morning and afternoon. Yoga experts- Dr. (Ms.) Shellindeshwari and Shri Manoj, from the Ministry of Ayurveda, Yoga and Naturopathy, Unani, Siddha and Homeopathy (AYUSH), New Delhi demonstrated and taught some yoga postures (*asanas*) and appealed all to practice yoga daily.



World Population Day

The Institute organised the World Population Day on 12 July 2016 as a majority of the employees attended the World Population Day walkathon and talk at the India Gate and Vigyan Bhawan on 11 July. Coordinator of the programme, Dr. Pushpanjali Swain, Head of the Department of S&D, spoke on the theme of the year- 'Investment in Adolescence.' Prof. U. Datta spoke on the

importance of decreasing the school dropout for stabilizing population. Prof. Jayanta K. Das, Director, highlighting on Population Momentum, Family Welfare, Family Planning, said that investment in the high percentage of adolescent population will result in great dividends. On the occasion, MD-CHA students played a skit on Family Planning for Population Stabilisation. An open oral quiz event was also conducted to create awareness amongst the staff about population; and the winners were given away prizes.

70th Independence Day

Prof. Jayanta K. Das hoisted the National Tri-colour in front of the Administrative Block on 15 August. Various senior officers of NIHFW addressed the gathering after the recitation of the National Anthem. At the end, kids of the staff presented some heart-touching patriotic songs.



Vigilance Awareness Week



As per the directive of the Central Vigilance Commission, the Vigilance Awareness Week was observed in the Institute during 31 October–5 November 2016. CVC had chosen Public Participation in Promoting Integrity and Eradicating Corruption as the theme of the year. Prof. Jayanta K. Das, Director, took the pledge and administered the same to the public servants. He explained about the relevance of Vigilance Awareness Week. Prof. Pushpanjali Swain, CVO, NIHFW, called the employees to be vigilant for adhering to integrity and transparency in official functioning; and eradicate corruption from all spheres of life.

Posters in English and Hindi on Vigilance Awareness and Anti Corruption were displayed at prominent locations on the campus. These posters carried messages for instilling vigilance awareness in the minds of the employees and the importance to reform their attitudes towards corruption. The objective of the messages exhibited was to inculcate the importance of good values and ethics among the employees. The messages in the posters focused on Fight against Corruption, Honesty Pays Honours, Making the System Clean and Transparent, Hard Work and Dedication, and Truthfulness and Controlling Greed.

On the occasion, an Essay competition was organised for the employees, and Poster and Slogan competitions were conducted for the employees' children up to 15 year old. This was done with the objective of making the youth aware of a corruption free society and their role in combating corruption. Prof. Das gave away the prizes to the winners of these competitions. Mr. Mukesh Chaturvedi, Director, Ministry of Personnel, Public Grievances and Pensions, New Delhi, also delivered a lecture on Public Participation in Promoting Integrity and Eradicating Corruption.





NIHFW Celebrated 40th Annual Day

40th Annual Day of the Institute was celebrated on March 9, 2017 at NIHFW. The function was graced by the guests from multifarious organizations; including faculty from various medical colleges of India, former faculty and employees of NIHFW, officials from the MoHFW, various sister organizations and

delegates from different international organizations. At the outset, Prof. Jayanta K. Das, Director, NIHFW, presented the Institute's report highlighting the achievements of the Institute during 2016-17.

Shri C. K. Misra, Union Secretary, Ministry of Health and Family Welfare, was the Chief Guest on the occasion. While appreciating the various activities of the Institute, the Secretary pointed out that the Institute being premier in the field of health and family welfare, its work should speak on own and should match with other institutions like All India Institute of Medical Sciences, New Delhi. He also desired that the faculty members of the Institute should do such research which guide ministry for further action.



Dr. Jagdish Prasad, Director General of Health Services, Government of India, was the Guest of Honour. He expressed his satisfaction with the report presented by the Director. Realizing the various constraints of the Institute, Dr. Prasad suggested that the Director of the Institute should be given full freedom to pursue various academic activities and adequate human resource which is lying vacant in most of the departments of the Institute.

Awards for the academic toppers of the year for MD in Community Health Administration, Post-graduate Diploma in Health Administration, Post-graduate Diploma in Public Health Management and Certificate Courses in Health and Family Welfare Management, Hospital Management, Health Promotion, Health Communication, Epidemiology and Public Health Nutrition through Distance Learning were given away. The best workers and best sports persons of the year were also rewarded.





Annual Sport Day

The Annual Sport Day was observed on 7 March 2017 on the play ground of the Institute. Prof. Jayanta K. Das, Director; graced the occasion as the Chief Guest. Prof. Das, Director; and other faculty members gave away the prizes to the winners of various indoor and outdoor games. Running race competition was also held separately for the staff engaged in house-keeping, security and horticulture.



VISITORS TO THE INSTITUTE

The Institute received The students and faculty from the following educational institutes in the year 2016-2017:

- Sabari College of Nursing, Kirumambakkam, Puducherry, on 1 June 2016.
- Department of Community Medicine, Armed Forces Medical College, Pune, on 5 September 2016.
- Fortis Institute of Nursing, Mulund-Goregaon Link Road, Bhandup, (W) Mumbai, Maharashtra, on 27 September 2016.
- Bombay Hospital College of Nursing, New Marine Lines Mumbai, on 19 October 2016.
- Akal College of Nursing, Eternal University, Sirmour District, Himachal Pradesh, on 10 November 2016.
- Laxmi Memorial College of Nursing, Balmatta, Mangalore, Karnataka, on 9 December 2016.
- Government Homoeopathic Medical College, Thiruvanthapuram, Kerala, on 14 December 2016.
- Nitte Usha Institute of Nursing Sciences, Deralakatte, Karnataka, on 5 January 2017.
- Father Muller College of Nursing, Father Muller Charitable Institutions Kankanady, Mangalore, Karnataka, on 27 January and 13 February 2017.
- Tejasvini Nursing Institute, College of Nursing, Kudupu, Mangalore, Karnataka, on 7 February 2016.
- Shree Devi College of Nursing, Ballabagh, Mangalore, Karnataka, on 8 February 2017.
- College of Nursing, Govt. Medical College, Nagpur, Maharashtra, on 15 February 2017.
- SDPS College of Nursing, Indore, M.P., on 22 February 2017.
- Terna Nursing College, Terna Medical College, Nerul, Navi Mumbai, on 27 February 2017.
- J.S.S. College of Nursing, Mysore, Karnataka, on 28 February 2017.
- Vivekananda College of Nursing, Sevashram, Lucknow, U.P., on 2 March 2017.
- College of Nursing, St. Philomena's Hospital, Bengaluru, Karnataka, on 15 March 2017.

In addition to the above, MD students of Community Medicine and Diploma in Health Promotion Education (DHPE) students from the following Medical Colleges visited NIHFW in the reported year:

- Armed Forces Medical College, Pune, Maharashtra, on 5 September 2016.
- Family Welfare Training and Research Centre, Khetwadi, Mumbai, Maharashtra, on 18 November 2016.
- Maulana Azad Medical College, New Delhi, during 16-20 January 2017.
- VMMC and SJH, New Delhi, during 23-25 January 2017.
- University College of Medical Sciences (UCMS) and GTB Hospital, New Delhi, during 23-25 January 2017.
- Lady Hardinge Medical College (LHMC), New Delhi, during 23-25 January 2017.
- School of Medical Sciences and Research, Sharda University, Greater Noida. U.P., on 9 and 10 February 2017.
- Himalayan Institute of Medical Sciences, SRH University, Dehradun, Uttarakhand, on 22 March 2017.

PUBLICATIONS

1. V.K. Tiwari, Kuldeep Kumar, Sherin Raj T.P. & P.D. Kulkarni: Standards, Frameworks and Practices in Health Management Information and Evaluation Systems (HMIES) in Australia and India: Lessons for Future Transition in India. *Journal of Health Management*, 2016, Vol.18 (1): 70-83. DOI: 10.1177/0972063415625555.
2. Sherin Raj T.P., V.K. Tiwari and J.V. Singh: Regional Variations in Use and Non-use of Contraceptives in Rajasthan. *The Journal of Family Welfare*, Vol. 61, No.2, December 2015.
3. V.K. Tiwari, Sherin Raj T.P. L.K. Piang, K.S.Nair and Harneet Kaur: Treatment Seeking Behaviour and Referral Practices: A Study on the Cancer Patients in Tertiary Care Hospitals in India, *Janasamkhya*, Vol. XXXIII, 2015, p. 65-80.
4. K.S.Nair, V.K.Tiwari and Sherin Raj: Vouchers for Reproductive and Child Health Services: Demand-side Financing Scheme in Uttarakhand, India. *Artha Vijnana*, March 2015, Vol. LVII, No.1, p. 21-36.
5. Abhiman Chouhan, V.K. Tiwari, Sherin Raj, P.D. Kulkarni, K.S. Nair & Ramesh Gandotra: Functioning of Government and NGO-run Anganwadi Centres in Delhi: A Comparative Study. *Health and Population: Perspectives and Issues*, Vol. 38, No. 3 & 4, July - Dec, 2015.
6. Vijay Kumar Tiwari, Piyush Verma & Sherin Raj T.P.: Factors Associated with Diabetes Mellitus among Tuberculosis Patients Attending Tertiary Care Hospital in Delhi, India. *Indian Journal of Community Health*, Vol. 28, No.4, 2016, p. 369-373.
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APPOINTMENTS, PROMOTIONS AND SUPERANNUATIONS

Appointments

- Mr. Rajendra Rohila has been appointed as LDC on 1 June 2016.
- Mr. Saket Kumar has been appointed as Assistant Librarian on 20 June 2016.
- Mr. Suraj Kumar Shah has been as LDC on 14 July 2016.
- Mr. Sandeep Kumar has been as DEO, Gr.- B on 1 August 2016.
- Dr. Sangita has been appointed as ARO on 10 October 2016.
- Ms. Neha Pathania has been appointed as Staff Nurse on 18 October 2016.
- Ms. Jeetu has been appointed as Staff Nurse on 24 October 2016.
- Dr. Mihir Kumar Mallick has been appointed as Professor, Social Sciences on 1 December 2016.
- Mr. Jitesh has been appointed as LDC on 16 December 2016.
- Ms. Bhawna Kathuria has been appointed as ARO on 23 February 2017.

Promotions

- Mr. Shyam Veer has been promoted as UDC on 3 October 2016.
- Mr. Chander Mohan has been promoted from Xerox Operator to Reprographic Assistant.
- Mr. Perumal has been promoted from Driver Grade-III to Grade-II
- Mr. Niranjana Kumar has been promoted from Driver Grade-II to Grade-I
- Mr. Sher Singh has been promoted as Xerox Operator on 3 October 2016.
- Mr. Pawan Kumar has been promoted as Driver, Ordinary Grade on 3 October 2016.
- Mr. Anil Kumar has been promoted as Driver, Ordinary Grade on 3 October 2016.
- Mr. Dayal Singh Negi has been promoted as Driver, Ordinary Grade on 3 October 2016.
- Mr. Narendra Kumar Vashist has been promoted as Driver, Ordinary Grade on 3 October 2016.
- Mrs. Manju Gaba, has been promoted as UDC (Ad-hoc) on 1 November 2016.
- Dr. Chetna Chouhan has been promoted as CMO on 25 January 2017.

Superannuations

- Dr. Utsuk Datta, Professor.
- Mr. Prahlad Singh
- Mrs. Suman Pathania, UDC.
- Mrs. Darshan Sharma, UDC.
- Mr. Sham Das, MTS.



- i. List of Governing Body Members of NIHFW**
- ii. List of Standing Finance Committee Members of NIHFW**
- iii. List of Programme Advisory Committee Members of NIHFW**
- iv. List of Faculty Members of NIHFW**
- v. Existing Manpower in NIHFW**

**List of Governing Body Members of NIHFW
(As on 31 March 2017)**

1.	Shri Jagat Prakash Nadda Hon'ble Union Minister of Health and Family Welfare, Nirman Bhavan, New Delhi	Chairman (Ex-Officio)
2.	Shri C.K. Mishra, IAS Secretary (Health & F.W.) Ministry of Health and Family Welfare Nirman Bhavan, New Delhi	Vice-Chairman (Ex-Officio)
3.	Dr. Jagdish Prasad Director General of Health Services Ministry of Health and Family Welfare Nirman Bhavan, New Delhi	Member (Ex-Officio)
4.	Dr. Soumya Swaminathan Secretary Deptt. of Health Research & Director General Indian Council of Medical Research, Ansari Nagar, New Delhi	Member (Ex-Officio)
5.	Dr. Randeep Guleria Director All India Institute of Medical Sciences Ansari Nagar, New Delhi	Member (Ex-Officio) director@aiims.ac.in
6.	Sh. Sanjeeva Kumar Additional Secretary (Health) MoHFW, Nirman Bhavan, New Delhi	Member (Ex-Officio) ash-mohfw@nic.in
7.	Ms. Vijaya Srivastava Addl. Secretary & Financial Advisor Ministry of Health and Family Welfare, Nirman Bhavan, New Delhi	Member (Ex-Officio)
8.	Shri Arun Singhal Joint Secretary Ministry of Health and Family Welfare Nirman Bhavan, New Delhi	Member (Ex-Officio)
9.	Dr. Ladu Singh Acting Director International Institute for Population Sciences Govandi Station Road, Deonar, Mumbai-400088	Member (Ex-Officio)
10.	Shri Alok Kumar, Advisor (Health) NITI Aayog, Yojna Bhawan, New Delhi-110001	Member (Ex-Officio)
11.	Prof.(Dr.) Pranab Kumar Dutta C-9/9682, Vasant Kunj, New Delhi-110070	Member (Chairperson of PAC, NIHFW) (Ex-Officio)
12.	Vacant	Member

13.	Vacant	Member
14.	Vacant	Member
15.	Vacant	Member
16.	Vacant	Member
17.	Vacant	Member
18.	Vacant	Member
19.	Dr. Jayanta K. Das Director NIHFW, New Delhi	Member-Secretary (Ex-Officio)

(1-11 & 19 are ex-officio members)

**List of Standing Finance Committee Members of NIHFW
(As on 31 March 2017)**

1.	Shri C.K. Mishra, IAS Secretary (H&FW) Ministry of Health and Family Welfare Nirman Bhavan, New Delhi-110108	Chairperson
2.	Dr. Jagdish Prasad Director General of Health Services Nirman Bhavan, New Delhi-110108	Member
3.	Ms. Vijaya Srivastava Additional. Secretary & Financial Advisor Ministry of Health and Family Welfare Nirman Bhavan, New Delhi-110108	Member
4.	Shri Alok Kumar Advisor (Health) NITI Aayog, Yojna Bhavan, New Delhi-110001	Member
5.	Shri Arun Singhal Joint Secretary Ministry of Health and Family Welfare Nirman Bhavan, New Delhi – 110108	Special Invitee
6.	Prof. Jayanta K. Das Director, NIHFW, New Delhi-110067	Member-Secretary (Ex-Officio)

**List of Programme Advisory Committee Members of NIHFW
(As on 31 March 2017)**

1.	Prof. (Dr.) Pranab Kumar Dutta C-9/9682, Vasant Kunj New Delhi-110070	Chairperson
2.	Shri Arun Singhal Joint Secretary Ministry of Health and Family Welfare Nirman Bhavan, New Delhi-110108	Member (Ex-Officio)
3.	Dr. Jagdish Prasad Director General D.G.H.S., Nirman Bhavan, New Delhi-110108	Member (Ex-Officio)
4.	Shri Alok Kumar Adviser (Health) Room No. 333-A NITI Aayog, Yojna Bhawan, New Delhi-110 001	Member (Ex-Officio)
5.	Dr. L. Ladu Singh Acting Director International Institute of Population Sciences Govandi Station Road, Mumbai-400088	Member (Ex-Officio)
6.	Dr. Soumya Swaminathan Secretary Deptt. of Health Research; & Director General- Indian Council of Medical Research Ansari Nagar, New Delhi-110029	Member (Ex-Officio)
7.	Smt. Vini Mahajan, IAS Principal Secretary (Health & Family Welfare) Deptt. of Health & Family Welfare Govt. of Punjab., Room No. 227, 2nd Floor, Mini Secretarial Chandigarh, Punjab	Member
8.	Dr. Kirti Bhushan Director General, Health Services Directorate of Health Services Delhi Government, F-17, Karkardooma, Delhi-110032	Member
9.	Prof.(Dr.) Krishnanagshu Ray Director Institute of Health & Family Welfare Deptt. of Health & Family Welfare Govt. of West-Bengal, 29, G.N. Block, Sector-V Bidhan Nagar, Kolkata, West Bengal	Member
10.	Dr. Baldev Kumar Director, Health Services Block No. 38, SDA Complex, Kasumpti, Shimla, Himachal Pradesh-171009	Member

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11.	Dr. Rishikesha T. Krishnan Director Indian Institute of Management Pithampur Road, Indore, Madhya Pradesh	Member
12.	Dr. Subeer S. Majumdar Director, National Institute of Animal Biotechnology, D.No. 1-121/1, 4th and 5th Floors Axis Clinical Building, Miyapur, Hyderabad-500049	Member
13.	Dr. Sanjay Gupta Professor Deptt. of CHA, NIHFW, New Delhi	Member
14.	Dr. A. K. Sood Prof. and Head Deptt. of E&T, NIHFW, New Delhi	Member
15.	Dr. V.K. Tiwari Professor, Department of P&E NIHFW, New Delhi	Member
16.	Prof. J.K. Das, Director NIHFW, New Delhi	Member-Secretary (Ex Officio)

List of Faculty Members (As on 31 March 2017)

Prof. Jayanta K. Das	Director
Prof. Sanjay Gupta	Dean of Studies
Department of Communication	
Dr. Neera Dhar	Professor and Acting Head
Dr. Ankur Yadav	Assistant Professor
Department of Community Health Administration	
Dr. S. V. Adhish	Professor and Acting Head
Dr. Sanjay Gupta	Professor
Dr. Nanthini Subbiah	Associate Professor
Department of Medical Care and Hospital Administration	
Dr. A. K. Sood	Professor and Acting Head
Department of Education and Training	
Dr. A. K. Sood	Professor and Head
Dr. Neera Dhar	Professor
Dr. Poonam Khattar	Professor
Prof. U. Datta	Professor (on contract basis)
Department of Epidemiology	
Dr. Sanjay Gupta	Professor and Acting Head
Department of Management Sciences	
Dr. Rajni Bagga	Professor and Head
Department of Planning and Evaluation	
Dr. V. K. Tiwari	Professor and Head
Dr. Ramesh Chand	Assistant Professor
Department of Reproductive Bio-medicine	
Dr. T. G. Shrivastav	Professor and Head
Dr. Renu Shahrawat	Assistant Professor
Dr. Rajesh Kumar	Assistant Professor
Department of Social Sciences	
Dr. T. Bir	Professor and Head
Prof. Mihir Kumar Mallick	Professor
Dr. Meerambika Mahapatro	Associate Professor
Dr. Sarita Gautam	Assistant Professor
Department of Statistics and Demography	
Dr. Pushpanjali Swain	Professor and Head
Dr. Jai Kishun	Assistant Professor
Dr. Diwakar Yadav	Assistant Professor
Total faculty members:	21 (including Director)

EXISTING MANPOWER IN NIHFW AS ON 31 MARCH 2017

Category	Sanctioned No.	No. in Position (%)	Vacant Posts (%)
Group-A (Consolidated)	66	34 (51.5%)	32 (48.5%)
• Faculty	50	21 (42%)	29 (58%)
• Non-Faculty	16	13 (81%)	03 (19%)
Group-B	132	74 (56%)	58 (44%)
Group-C (Technical and Non-technical)	120	83 (69%)	37 (31%)
Group-C (MTS and erstwhile Group-D including Offset Press Helper and Lab. Attendant)	103	64 (62%)	39 (38%)
Total	421	255 (60.5%)	166 (39.5%)



आरोग्यम् सुखसम्पदा

राष्ट्रीय स्वास्थ्य एवं परिवार कल्याण संस्थान
The National Institute of Health and Family Welfare
Munirka, New Delhi - 110067