

## IN THE NEWS

### J P Nadda leads Yoga Session at 69th session of the WHO SEARO Regional Committee at Colombo

New Delhi, Sept 7 : Following in the vision of the Hon. Prime Minister of India, Shri Narendra Modi, Union Minister of Health & Family Welfare, J P Nadda led the yoga session at the 69th session of the WHO Regional Committee of South-East Asia Region at Colombo, on Wednesday.

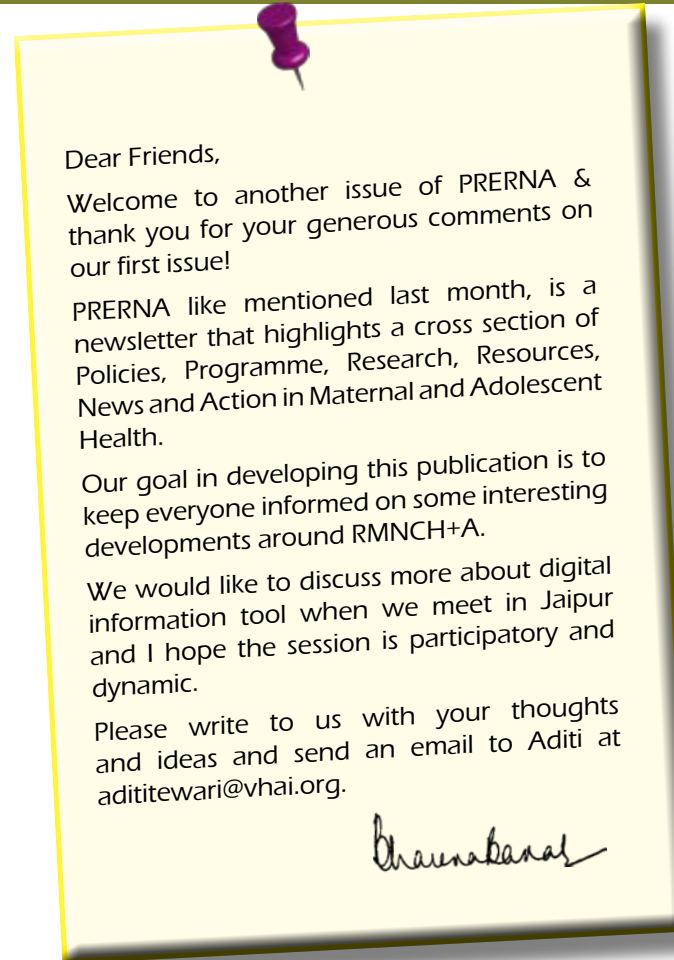
Yoga is not just a set of exercises. Rather, Yoga is a philosophy of discipline and meditation that transforms the spirit and makes the individual a better person in thought, action, knowledge and devotion, the Health Minister elaborated.

Read more : <http://www.newkerala.com/news/2016/fullnews-115650.html>

### Health Ministry launches the biggest Leprosy Case Detection Campaign in the country

32 crore persons to be screened across 19 States/UTs

In line with the vision of Shri Narendra Modi, to eradicate Leprosy from India, Shri J P Nadda, Union Minister of Health and Family Welfare reviewed the National Leprosy Eradication Programme and pursuant to that, Ministry of Health and Family Welfare has launched the biggest Leprosy Case Detection Campaign (LCDC) in the country on 5th September 2016 across 149 districts of 19 states/UTs. This fortnight-long campaign will cover



1656 blocks/urban areas of these districts and screen a total of 32 crore people for leprosy. For this purpose, 297604 teams comprising of one lady ASHA worker and one male volunteer each would visit every house in their allotted area and screen all the family members for leprosy.

Read more: <http://pib.nic.in/newsite/pmreleases.aspx?mincode=31>

### Sanofi, Google parent form \$500 million diabetes joint venture

French drugmaker Sanofi ([SASY.PA](http://www.sanofi.com)) and Verily, the life sciences unit of Google parent Alphabet Inc([GOOGL.O](http://www.alphabet.com)), on Monday said they would invest about \$500 million in a joint venture combining devices with services to improve diabetes care, an example of growing ties between the pharma and tech sectors.

Read more: <http://in.reuters.com/article/sanofi-alphabet-diabetes-idINKCN1112EJ>

### Sugar industry downplayed heart risks of sugar, promoted risks of fat: study

"The sugar association paid very prestigious Harvard scientists to publish a review focusing on saturated fat and cholesterol as the main causes of heart disease at the time when studies were starting to accumulate indicating that sugar is a risk factor for heart disease," Schmidt told Reuters Health by phone. "That has an impact on the whole research community and where it's going to go."

"For example a lot of the messaging during this period around how to prevent heart disease focused on, why don't you use margarine rather than butter, which has less saturated fat," Schmidt said. Now we know that margarine is full of trans fat, which causes heart disease and has been nearly eradicated from the U.S. food supply.

Read more: <http://in.reuters.com/article/us-health-heart-sugar-risks-idINKCN1111QH>

## IN OPINION

### Quality services for safe abortion, a matter of rights

Abortion is one of the subjects to be discussed extensively at both national and international levels as it has become controversial all over the world. Everybody is in a dilemma whether a mother has a right to terminate her pregnancy at any time she wishes or an unborn child has a right to life.

The right to life is a very broad concept and is fundamental to all. In India, right to life has been recognised under Article 21 of the Constitution which says that, "No person shall be deprived of his life and personal liberty except according to procedure established by law."

Read more: <http://www.deccanherald.com/content/567435/quality-services-safe-abortion-matter.html>

### Only focusing on IP will not enhance healthcare

Access to healthcare is a major challenge in developing countries as this involves making available affordable and quality medicines to people living in poverty. Goal 3 of the UN's sustainable development goals (SDGs) seeks to ensure healthy lives and promote well-being for all at all ages.

A recent UN panel has been formed to look into the idea of access to medicines but somehow limits its scope to just IP and Innovation and these, in turn, act as a hindrance to access. This approach is too narrow in scope and may end up damaging the prospects of healthcare access in developing countries. Such an approach may cause immense damage, as thinking could develop that only IP and Innovation act as the barrier to access while ignoring other factors that might have a considerable bearing on healthcare access in developing countries like India.

There are four essential points about healthcare access in developing countries that need to be factored in before making any decisions on the issue.

Read more:

<http://www.millenniumpost.in/NewsContent.aspx?NID=321934>



### Draft surrogacy bill violates fundamental right of people to choose modes of parenthood

On August 24, the Union cabinet approved the Surrogacy (Regulation) Bill, 2016. The bill proposes a ban on commercial surrogacy, restricting "ethical" and "altruistic surrogacy" to legally-wedded infertile Indian couples, who have been married for at least five years.

The husband must be between 26 to 55 years of age and the wife must be between 23 to 50 years of age.

Overseas Indians, foreigners, unmarried couples, single parents, live-in partners and gay couples are barred from commissioning the services of surrogate mothers. Only a married blood relative, who must have herself borne a child, and is not an NRI or a foreigner, can be a surrogate mother, once in a lifetime. Indian couples with biological or adopted children are prohibited from having children through surrogacy.

Commercial surrogacy will result in a jail term of at least 10 years and a fine of up to Rs 10 lakh. The proposed law is not yet in the public domain.

Read more: <http://indianexpress.com/article/opinion/columns/surrogacy-bill-ban-commercial-2998128/>

## IN THE POLICIES



### 10 legal rights that women should know

We live in a shady and messed up world, where life of a person is taken away by a loved one, where goddesses are worshipped while women (of any age) are maimed and harassed. The only way out to keep an eye on such horrific happenings is to make laws and rules stricter to keep a check on the horrendous crimes. So, to help women know their rights and to help them fight back, here are 10 legal rights that they should know.

Read more: <http://timesofindia.indiatimes.com/life-style/relationships/man-woman/10-legal-rights-that-women-should-know/articleshow/50742542.cms>

### Reviewing India's Protection of Children from Sexual Offences Act three years on

On 30 November 2015, MP Shri Rajiv Chandrashekar spoke at an Open House on 'Why we need to start talking about Child Sexual Abuse and protect our children'. With the enactment of the Protection of Children from Sexual Offences Act (POCSO Act), and increasing awareness among civil society groups, there is an unprecedented momentum regarding protecting children from sexual abuse. Issues that were previously brushed under the carpet are now being openly addressed. The moment therefore seemed right to talk about the progress of the POCSO Act. Has it lived up to its promise? What more do we need to do to make this legislation effective?

Read more: <http://blogs.lse.ac.uk/southasia/2015/12/18/reviewing-indias-protection-of-children-from-sexual-offences-act-three-years-on/>



### Child Sexual Abuse: Break The Silence

"A landmark legislation, POCSO is the first step towards protecting children in India from crimes of a sexual nature. Many hope this will fill a long-felt void in the legal and institutional response on the issue. However, unless rigorously enforced, the legislation by itself can achieve little.

Extensively disseminating knowledge about POCSO can make a difference among law enforcement agencies, child protection institutions, judiciary and society. Accountability should be periodically reviewed to ensure the law serves its purpose."

Read more: <http://www.satyamevjayate.in/child-sexual-abuse/reviewing-pocso.aspx>







## IN THE PARLIAMENT

### Question:

- (a) Whether the burden of Non- Communicable Diseases (NCDs) like cancer, diabetes, mental disorder, hypertension and heart attacks etc. is increasing in the country affecting especially the youth;**
- (b) if so, the details thereof and the reasons therefor;**
- (c) whether the Government has launched any initiative to proliferate preventive care to check the NCDs and if so, the details thereof; and**
- (d) whether the Government is formulating any policy to run awareness programmes regarding such diseases and bring down the prices of these medicines for these diseases?**

### ANSWER

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI FAGGAN SINGH KULASTE)

(a) & (b): Indian Council of Medical Research (ICMR) has undertaken a survey on diabetes viz. ICMR India Diabetes (ICMR-INDAB) Study on the prevalence of diabetes. It is an ongoing study and current results available from 15 States/UTs indicate overall prevalence of Diabetes which vary from 4 to 13.

As reported by ICMR, based on the "Three year Report of the Population Based Cancer Registries: 2012-14", the estimated incidence and mortality of cancer cases in India for all sites is as under:-

Year	Estimated incidence of Cancer Cases	Estimated mortality of Cancer cases
2013	1270781	641455
2014	1328229	670541
2015	1388397	701007

ICMR has informed that according to the Report of National Commission on Macroeconomics and Health, there were 380 lakh cases of Cardiovascular Diseases (CVDs) in the year 2005 and these were estimated to rise to 641 lakh cases in the year 2015. The number of deaths from CVDs was estimated to more than double during this period.

The data available from the Indian Council of Medical Research-India Diabetes (INDIAB) Study Phase I done in the rural and urban settings in 3 States and 1 Union Territory viz., Tamil Nadu, Maharashtra, Jharkhand and Chandigarh for hypertension indicates the range of prevalence of hypertension from 19.8 to 31.5.

In 2005, the National Commission on Macroeconomics and Health reported that 10-20 million people (1-2 of population) suffered from severe mental disorders such as schizophrenia and bipolar disorder and nearly 50 million (5 of population) suffered from common mental disorders such as depression & anxiety, yielding an overall estimate of 6.5 of the population.

The major factors contributing to the Non-Communicable Diseases include inappropriate life styles, tobacco use, obesity, inappropriate diet, physical inactivity, alcohol consumption, high blood pressure, air pollution etc.

(c) & (d): Government of India has launched National Programme for Prevention and Control of Cancer, Diabetes, Cardiovascular Diseases and Stroke (NPCDCS) which is implemented for interventions up to District level under the National Health Mission. NPCDCS has focus on awareness generation for behaviour and life-style changes, screening and early diagnosis of persons with high level of risk factors and their treatment and referral (if required) to higher facilities for appropriate management for Non-communicable Diseases. Under NPCDCS, diagnosis and treatment facilities for common NCDs are provided through different levels of healthcare by setting up NCD Clinics at District Hospitals and Community Health Centres (CHCs).

Recently, on 22<sup>nd</sup> June, 2016, Operational Guidelines have been released for implementing population level screening for diabetes, hypertension & common cancer viz. breast, cervical & oral. The guidelines include screening for risk factors of these diseases. Such screening will generate awareness on risk factors of common NCDs.

To address the burden of mental disorders, the Government of India is implementing the National Mental Health Programme (NMHP) and the District Mental Health Programme (DMHP) with the objectives to :-

Provide mental health services including prevention, promotion and long-term continuing care at different levels of district health care delivery system.

Augment institutional capacity in terms of infrastructure, equipment and human resource for mental healthcare.

Promote community awareness and participation in the delivery of mental health services, and Broad-base mental health into other related programmes.

For holistic development of adolescent population, the Ministry of Health and Family Welfare in 2014 launched Rashtriya Kishor Swasthya Karyakram (RKSK) to reach out to 253 million adolescents - male and female, rural and urban, married and unmarried, in and out of school adolescents with special focus on marginalized and underserved groups. The six thematic areas covered under RKSK include Non-Communicable Diseases.

Presently seven Affordable Medicines and Reliable Implants for Treatment (AMRIT) outlets have been opened at Central Government institutions with an objective to make available Cancer and Cardiovascular Diseases drugs and implants at discounted prices to the patients. Approval has also been accorded for opening of



## IN THE PARLIAMENT

such outlets at 8 more Central Government institutions. Mis HLL Lifecare Ltd, which is a 100 Government of India owned PSU under this Ministry, has been directed to contact all States which may like to open AMRIT outlets in major State Government hospitals/institutions. As per the approval accorded for setting up AMRIT, the prices of the products are to be reasonable and significantly lower than the market price.

National List of Essential Medicines (NLEM) contains medicines for major NCDs.

Drugs Price Control Order (DPCO), 2013 fixes ceiling price for these medicines.

Several awareness initiatives have been undertaken by the Government including observance of World Diabetes Day, organising of screening for major NCDs including blood pressure and major awareness events at occasions such as the India International Trade Fair (HTP), Delhi and use of print, electronic and social media, etc. In addition NPCDCS supports awareness generation activities to be undertaken by the States.

### Question:

**(a) whether Government's attention has been drawn to the latest UNICEF report revealing the abysmal state of child healthcare in India, the worlds fastest growing economy where around 1.2 million children died of preventable diseases in 2015; and**

**(b) if so, the details thereof and Government's reaction thereto?**

### ANSWER

MINISTER OF WOMEN AND CHILD DEVELOPMENT  
(SHRIMATI MANEKA SAN JAY GANDHI)

(a) Yes Sir, Government is aware of the latest UNICEF report which highlighted the fact that around 1.2 million children died of preventable diseases in 2015.

(b) As per the information received from Ministry of Health and Family Welfare, following interventions are implemented under the National Health Mission (NHM) across the country to reduce child mortality:

Promotion of institutional deliveries through cash incentive under Janani Suraksha Yojana (JSY) and Janani Shishu Suraksha Karyakaram (JSSK) which entitles all pregnant women delivering in public health institutions to absolutely free and no expense antenatal check-ups, delivery including Caesarean section, postnatal care and treatment of sick infants till one year of age.

Strengthening of delivery points for providing comprehensive and quality Reproductive, maternal, newborn, Child and Adolescent Health (RMNCH+A) Services, ensuring essential newborn care at all delivery points, establishment of Special Newborn Care Units (SNCU), Newborn Stabilization Units (NBSU) and Kangaroo Mother Care (KMC) units for care of sick and small babies. Home Based Newborn Care (HBNC) is being provided by ASHAs to improve child rearing practices.

Early initiation and exclusive breastfeeding for first six months and appropriate Infant and Young Child Feeding (IYCF) practices are promoted by Ministry of Women and Child Development in convergence with Ministry of Health and Family Welfare. Village Health and Nutrition Days (VHNDs) are observed for provision of maternal and child health services and creating awareness on maternal and child care including health and nutrition education.

Universal Immunization Programme (UIP) provides

vaccination to children against many life threatening diseases such as Diphtheria, Pertussis, Tetanus, Poliomyelitis, Tuberculosis, Measles, Hepatitis B, Meningitis and Pneumonia due to Haemophilus Influenzae type B. In addition, vaccination against Japanese Encephalitis is carried out in endemic districts and vaccination against Rotavirus diarrhoea is provided in four States, namely Odisha, Himachal Pradesh, Haryana and Andhra Pradesh.

Name-based tracking of mothers and children till two years of age is done to ensure complete antenatal, intranatal, postnatal care and complete immunization as per schedule.

Rashtriya Bal Swasthya Karyakram (RBSK) for health screening, early detection of birth defects, diseases, deficiencies, development delays including disability and early intervention services has been operationalized to provide comprehensive care to all the children in the age group of 0-18 years in the community.

Some other important interventions are Iron and folic acid (IFA) supplementation for the prevention of anaemia among the vulnerable age groups, annual deworming on National Deworming Day (NOD) and home visits by ASHAs to promote exclusive breastfeeding and promote use of ORS and Zinc for management of diarrhoea in children.

Government of India has adopted the Reproductive, Maternal, Newborn, Child and Adolescent Health Strategy (RMNCH+A) to improve maternal and child health outcomes. The RMNCH+A strategy recognize that child health and survival is inextricably linked to women's health across all life stages. Besides this, 184 high priority districts with relatively weaker status of maternal and child health indicators have been identified for the intensification of RMNCH+A efforts.

## IN OUR STATES

**Every day is World AIDS day for us for we are taking care of HIV/AIDS patients and caregivers every single day," says Dr Glory Alexander, the founder and director of ASHA (Action, Service and Hope for AIDS) Foundation in Bengaluru.**



The AIDS helpline (080-23543333 & 23542222) of the Foundation is manned by two counsellors from Monday-Friday (9am-5pm). Most of the calls come from young urban educated males in the age group of 19-35 years when they feel they are at a risk of AIDS and want to know what has to be done. Records of the Foundation say that over 40,000 calls have

been received since 2000 and over 500 e-mail queries received since 2008 and over 8,000 counselling sessions have been held.

Read more: <http://www.deccanherald.com/content/566299/giving-them-life.html>

### **Uttarakhand Chief Minister Harish Rawat launches dengue awareness Campaign**

Terming stagnant water as the breeding ground for mosquitoes, CM Rawat advised people to keep flushing water containers and tanks close to where they live on a regular basis

With dengue cases on the rise in Uttarakhand, Chief Minister Harish Rawat on Monday launched an awareness campaign in the city being carried out by the state police as he joined in a clean-up drive clearing choked drains with the help of spades and shovels.

Read more: <http://indianexpress.com/article/india/india-news-india/uttarakhand-chief-minister-harish-rawat-launches-dengue-awareness-campaign-3027250/>





**ON THE ONLINE SHELF**

**Become a member of Maternal Health Task force**



Read more: <https://www.mhtf.org/> --



**Control of Childhood diarrhoea through scaling-up ZINC and ORS**

Read more: <http://nrhm.gov.in/nrhm-components/rmnch-a/child-health-immunization/child-health/iec-material.html>



**MHS- LEAFLET**

Read more: <http://nrhm.gov.in/nrhm-components/rmnch-a/adolescent-health-rsk/iec-material-rsk.html>

**MHS- POSTERS**

Read more:

<http://nrhm.gov.in/nrhm-components/rmnch-a/adolescent-health-rsk/iec-material-rsk.html>

