



GOVERNMENT OF ORISSA

**REPORT
ON
ACTIVITIES
OF**

HEALTH AND FAMILY WELFARE DEPARTMENT

2007-2008

HEALTH AND FAMILY WELFARE DEPARTMENT,

ORISSA, BHUBANESWAR

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ACTIVITIES OF THE HEALTH AND FAMILY WELFARE DEPARTMENT DURING 2007-2008

AND PLAN FOR 2008-2009

Governments in the Health and Family Welfare Department have been making constant and sincere efforts to implement schemes to ensure adequate health care services to the people. Steps are being taken to bring about improvement in the health care system of the State. Attention is also paid to take special care of the needs of the people of tribal areas and backward regions.

The main objectives of the health of the health sector programmes are as follows:

- i) Provision of adequate qualitative, preventive and curative health care to the people of the State.
- ii) Ensuring health care services to all, particularly to the disadvantaged groups like Scheduled Tribes, Scheduled Castes and the backward classes.
- iii) To provide affordable quality health care to the people of the State not only through the allopathic system of medicine but also through the homoeopathic and Ayurvedic systems.
- iv) To ensure greater access to primary health care by bringing medical institutions as close to the people as possible or through mobile health units, particularly in the under-served and backward districts.
- v) To improve health care in the KBK districts of the State.
- vi) To eliminate diseases like polio and leprosy from the State, and prevent and control other communicable diseases.
- vii) To reduce maternal and infant mortality and to improve maternal and child health.
- viii) To guarantee to the people of Orissa free treatment (including free medicines) for certain major communicable diseases.
- ix) To improve hospital services at the primary, secondary and tertiary levels in terms of infrastructure, drugs and personnel.
- x) To impart training to doctors, nurses and other paramedical staff to upgrade their skills and knowledge to improve equality health care in the State.

RESSOURCES AND BUDGETARY OUTLAY FOR 2008-2009:

During the financial year 2008-2009, an outlay of TRs. 10047854 has been proposed in Health and F.W budget which is detailed as under:

Sector	Provision for general health activities (Demand No.12)	Provision for Building Programme		
		(Demand No.7)	(Demand No.13)	(Demand No.28)
1	2	3	4	5
Non-Plan	64,71,948	1,29,762	27,560	-
State Plan (including State share for C.S.P)	17,68,719	1,68,231	-	50,000
State Plan (Special Plan for KBK)	71,500	-	-	-
Central Plan (including central share of C.S.P.)	17,35,687	5,000	-	-
Grand Total	1,00,47,854	3,02,993	27,560	50,000

This includes on out lay of TRs.609184 under State Plan towards State Matching Share to NRHM.

For the financial year 2008-2009, the State Government has made a budgetary provision of TRs 804100 under the State Plan for externally aided projects such as DFID, OHSP & Sardar Ballabh Bhai Patel P.G. Institute of Pediatrics (SVPPIP), Cuttack.

Under the Centrally Sponsored Plan, the schemes included during 2008-2009 are the National Filaria Control Programme, the National Anti-Malaria Programme and training programmes for medical and paramedical staff in the State among other staff-oriented schemes.

Under the Central Plan Schemes such as the Family Welfare Programme, procurement of Anti-T.B. drug for the National T.B. Control Programme, National Malaria Control Programme, National Programme for Control of Blindness, the Leprosy Elimination Programme and a number of training programmes for field personnel, etc. are included.

HEALTH CARE INFRASTRUCTURE IN THE STATE:

For providing basic health service to the people throughout the State, particularly to the rural and urban poor, 231 CHCs-1, 116 Block PHCs, 1162 PHCs(New), 90 Mobile Health Units (in the 8 KBK districts), 122 other Hospitals and 5927 + 447 = 6374 Sub-Centers (ANM Centers) are in operation. Besides, 619 Ayurvedic, 560 Homoeopathy and 9 Unani dispensaries are also functioning in the State.

There are 30 District Headquarters Hospitals and two district level hospitals, viz., the capital Hospital at Bhubaneswar and Rourkela Government Hospital at Rourkela. Besides, there are 22 Sub-Divisional Hospitals and 122 other Hospital, T.B. Hospital-3, Leprosy-2, Paediatric-3, Maternity-1 are functioning in the State.

Enhancement of rate of daily diet to be supplied free of cost to in-patients of Medical Institution/ Hospitals.

The rate of daily diet to the general Indoor patient has been enhanced from Rs.10.00 to Rs.20.00 and from Rs.12.00 to Rs.25.00 in case of T.B. Indoor patients.

NATIONAL HEALTH PROGRAMMES:

A number of National Health Programmes are in operation in the State to combat important communicable, non-communicable and other major diseases and effective implementation of these National Programmes under NRHM will help to reduce the mortality and morbidity and contribute to improve the quality of life of the common man. These programmes also enhance the quality of primary, secondary and tertiary health care throughout the State.

The most important among these programmes are the National Leprosy Elimination Programme (NLEP), the National Anti-Malaria Programme (NAMP), the National AIDS Control Programme, the Revised National and Tuberculosis Control Programme (RNTCP), the National Programme for Control of Blindness (NPCB), the National Filaria Control Programme and the national Iodine Deficiency Disorders (IDD) Control Programme.

It is envisaged to functionalise 30 units.

ACTIVITIES UNDER NATIONAL RURAL HEALTH MISSION (NRHM)

National Rural Health Mission (NRHM) was launched by Honorable Prime Minister, Dr. Manmohan Singh in New Delhi on 12th April 2005. In Orissa the National Rural Health Mission was launched by Chief Minister, Sri Naveen Patnaik and Union Health Minister. Dr. Anbumani Ramadoss on 17th June 2005. NRHM seeks to provide effective health care to rural and urban population throughout the state with special focus on the backward districts with weak human development and health indicators especially among the poor and marginalized groups like women and the vulnerable sections of the society.

Reproductive and Child Health Programme- II:

Reproductive and Child Health Programme- II is major component under NRHM and an ongoing health programme. The focus of the programme is to address health needs of Men, Women and Children with emphasis on rural health care services. The acute health problem that Orissa has been facing over these years is the high rate of Maternal & Infant Mortality. To address the issue a 100% centrally sponsored scheme namely Janani Suraksha Yojana (JSY) is in operation under the over all umbrella of NRHM that mainly focuses on providing antenatal care, delivery at the hospital and post delivery care for both mother and child by way of extending cash incentives to the Pregnant Women. Main aim of this programme is to reduce infant and maternal mortality by promoting institutional delivery. Under this programme incentive of Rs. 1,400/- is provided to pregnant women in rural areas for institutional delivery and incentive of Rs.1, 000/- is provided in urban areas.

Similarly a number of health programmes have been taken up under NRHM Initiatives. The basic purpose of these is to provide primary qualitative health services mainly to the rural people. Different programmes under this are as follows:

ASHA:

An ASHA has been deployed in every village of population 1000 to provide basic health services to rural population. Till now 34,324 nos of ASHAs has been deployed.

ASHAs have been trained to discharge their duties & responsibilities with the help of local Mahila Swasthya Sangha, Youth Club, AWW, NGO AND ANM, Besides these they have been provided a medicine kit for treatment of cold, cough, first aid & got the knowledge of their use.

United fund:

Rs.10, 000/- has been provided to all sub-centers to meet the urgent and emergency small expenditures. This amount has been placed in a joint pass book of ANM & Local sarapanch in a local nationalized bank or post office & arrangements have been made for expenditure of the among the Sub-Centre with the approval of village health & Sanitation Committee.

Rogi Kalyan Samiti:

Registered Rogi Kalyasn Samiti (RKS) HAVE BEEN FORMED IN ALL District. Head Quarter Hospitals, Sub-Divisional Hospitals, Area Hospitals, Block CHC/PHC & PHC (N) to provided qualitative health services. Rupees 5 Lakhs for DHH rupees 1 Lakh for Block CHC/PHC & rupees 75 thousand for PHC (N) has

been provided for this purpose. The main aim of this RKS is to provide better health services through people's participation, improving the standard of health institutions, peace keeping and necessary cleaning arrangements.

AYUSH:

AYUSH doctors have been engaged in block PHC/CHC to provide alternative medicines and treatment to the rural people. Doctors are treating the OPD patients and distributing medicines. Main aim of this is to mainstreaming the conventional methods of treatment. Till now 250 AYUSH doctors have been engaged in the state and more 54 nos. are in selection process.

Village Health & Sanitation Committee:

To conduct smoothly and efficiently all the health programmes at village level, village health and sanitation committees have been formed in all revenue villages. The committees have been formed by taking people of all spheres which is headed by the local ward members. The main responsibilities of this is to aware the rural people about maternal and health services, family welfare services, healthy practices, etc. Besides, people are being made aware on various programme of leprosy, malaria, TB, blindness control etc.

Public Private Partnership:

Health services have been widened by public private partnership programme in 119 remote blocks of 29 districts. Main aim of this is to increase community ownership, widening health services, increasing qualitative health services, exchange of strength and experience between public and private etc.

Inter Sectoral Convergence:

NRHM envisaged that the determinants of health, Sanitation, Nutrition and safe drinking water influences general health to a large extent. Therefore, it is considered necessary to forge linkages with department of Women & Child Development, Rural Works Department, and Education etc.

In the State this convergence has been achieved through following activities:

- Collaboration between ANM and AWW at village Level
- Collaboration between the ICDS Supervisor and lady Health Supervisor at the sectoral level.
- Necessary linkages have been established with Panchayati Raj Department, through sensitization of PRI members.
- PRIs have been included as important members of Rogi Kalian Samitis or Hospital Management Committee.
- The District and Block training team for training of ASHA included functionaries of other Department such as District Social Welfare Officer, Programme Officer, ICDS, CDPO, ICDS supervisor, Gram Panchayat Officer.
- The ASHA in the village is also involved in the village level sanitation activities.

ACTIVITIES UNDER ORISSA STATE AIDS CONTROL SOCIETY (OSACS)

Introduction:

National AIDS Control Programme is being implemented through National AIDS Control Organization (NACO), New Delhi, under Ministry of Health & Family Welfare, Government of India with the support of DFID & World Bank fund. Accordingly autonomous organizations namely; State AIDS Control Societies have been formed in each of the States for smooth implementation of the programme.

National AIDS Control Programme (NACP)-I:

From 1992- 1999 = National AIDS Control Programme, Phase –I (NACP-I) was implemented by Government of Orissa under Director, Health Services.

National AIDS Control Programme (NACP)-II:

From 1999 -13.07.04:- Programme under NACP-II was implemented through Orissa State Health & Family Welfare Society in the name and style of State AIDS Cell (SAC).

From 14.07.2004-05.07.06:- As per the direction of National AIDS Control Organization (NACO), a new Society, i.e., Orissa State AIDS Control Society (OSACS) was formed and has been registered under Societies Registration Act XXI of 1860 vide Regd. No.21886/64 of 2004-2005.

The goals of National AIDS Control programme (Phase-II) were:

1. To reduce the spread of HIV infection in the State and to detect, reduce and control the spread of HIV infection.
2. To strengthen the State's capacity to respond to the HIV/AIDS on long-term basis.

National AIDS Control Programme (NACP)- Phase-III (2007-2012):

The year 2007 has started on an important note because, the **3rd phase of National AIDS Control Programme (NACP-III)** have been launched from 6th of July, 2007. This programme builds on the attainments of NACP-II, which has led to a relative stabilization of the HIV/AIDS epidemic in the country. The overall goal of NACP-III is to halt and reverse the epidemic in India over the next five years by integrating programmes for prevention, care, Support and treatment.

This will be achieved through a four pronged strategy:

1. Prevention of new infections in high risk groups and general population through:
 - Saturation coverage of high risk groups with TIs.
 - Scaled up interventions in the general populations
2. Providing greater care, support and treatment to a large number of PLHA
3. Strengthening the infrastructure systems and human resources in prevention care, support and treatment programmes at the district, state & national level.
4. Strengthening the nationwide strategic information management system.

Orissa is a low prevalent state but highly vulnerable to HIV/ AIDS. The developmental activities and achievements of OSACS are given below:

HIV/ AIDS Scenario:

- AIDS was first identified in the United States of America in 1981
- In India the first case of AIDS was identified in 1986 in Chennai.
- In India. 57 lakhs (approx.) people are living with HIV / AIDS (**Source: UNAIDS**)
- In Orissa the first case of AIDS was identified in 1993 in Nayagarh district.
- Till December, 2007 there are 8,200 nos. of people living with HIV / AIDS. Detailed year wise break up is given below: (**Source: Reports received from ICT Centers**)

Sl. No	Particulars	2002	2003	2004	2005	2006	January to Dec., 2007	TOTAL
1	Counseled	4,287	6,762	22,820	54,752	131,671	368,278	588,570
2	Tested	2,932	4,397	5,363	17,058	56,689	172,760	259,199
3	HIV +ve	312	687	595	1,251	2,217	3,138	8,200
4	AIDS cases	209	156	186	184	149	28	912
5	Death due to AIDS	74	135	160	184	114	28	695

ACTIVITIES UNDER TAKEN BY OSACS

Component: 1. PREVENT NEW INFECTION:

Targeted Intervention:

Targeted Interventions are a specific set of intervention in AIDS control programme targeted towards high-risk behavior group (HRG) i.e. Female Sex Workers (FSW), IDUs, MSM & Migrant laborers under NACP-III.

OSACS undertakes 23 Targeted intervention projects covering 22 districts. There are 29,975 target Population of Highly Vulnerable groups like FSWs, MSMs, IDUs, Migrant Labourers who are being covered through TI Projects. Besides above, OSACS, issued advertisement to involve more NGOs / CBOs and also for empanelment for all districts to cover more HRGs through Targeted Intervention Projects.

The main components of the TI projects are; Behaviour Change Communications, STD Treatment, Condom Promotion, Enabling environment & Community mobilization.

Objective of the Targeted Interventions are:

1. To Provide the services to target population in order to practice safe behaviors
2. To Create enabling environment to overcome obstacles & to support practice of safe behavior,
3. To empower to lobby and advocate for what they need (Community mobilization).

Capacity Building of TI Staff:

To ensure quality of interventions, TI staffs have been trained with various components of TI mentioned above in the light of NACP-III operational guidelines by Master trainers of NACO.

IEC & Awareness:

Communication continues to be one of the most important strategies in the fight against HIV/AIDS. In the absence of a vaccine or a cure, prevention is the most effective strategy for the control of HIV / AIDS. IEC is the tool of behavior change by combined use of mass media, traditional and interpersonal media having the effect of behavior change and de-stigmatizing HIV/ AIDs.

In India, the majority of the population is still uninfected. It, therefore, becomes imperative to continue intensive communication efforts that will not only raise awareness levels but also bring out behaviour change.

Electronic Media – Doordarshan:

The impressive rise in the levels of awareness about HIV / AIDS in the general community can be partly attributed of the electronic media which has taken this message right up to the village level, which has been developed in local languages and ethos. Docudrama (Katha Rakhiba), interactive programme like LIVE panel discussion, Phone-In and TV awareness spots are being telecast in regular intervals in various electronic media like Doordarshan, ETV and OTV from time to time. Regional specific TV documentaries are also being produced and telecast in Doordarshan considering local specific culture and needs.

Radio Programmes:

Radio plays an important role in any development communication as it has a high reach with minimum cost. Panel Discussions, LIVE Phone Ins, radio jingles are also being broadcast to have a direct link with listeners in the stat hook up as well as regional stations like Berhampur and Jeypore. Special Interactive Programmes “Mita Janitha” from AIR, Berhampur and Jeypore. Radio Jingles in respective dialects (lingua franca) are also being broadcast during important listening chunks.

Private FM Radio channels also play a great role in influencing youth opinion and disseminating awareness on HIV / AIDS in urban areas. Special Interactive sessions with celebrities and experts on HIV/ AIDS have been broadcast in Radio Chokolate, Big 92.7 FM in the state.

Print Media: News Paper, Magazines, and Souvenirs etc.:

To give detailed messages, print media is the appropriate media as electronic media is costly and only bears recollect effects. To create awareness on HIV / AIDS in general public, OSACS publishes messages on HIV / AIDS during special events/ occasions in the Souvenirs / Magazines / Weekly Oriya dailies from time to time.

Print Media: Posters, Leaflets, Booklets, Stickers and Dangers:

OSACS has developed Posters, Leaflets, Booklets, Exhibition Kits, Stickers, Tin sheets and Flex Banner etc to disseminate messages on HIV / AIDS for General Population and BCC materials like Flip Chart, Penis model for the High-Risk Groups (HRG) have been developed and are being disseminated. These materials are being disseminated to all service centers like ICTCs, STD Clinics, ART Centre, Community Care Centre, and Drop-in-Centre including all organizations / institutions and NGOs who are undertaking awareness activities in the state.

Mid-Media Activities:

Messages on HIV / AIDS are also being disseminated through Wall Paintings, hoardings and tin sheets. Wall paintings are being done in all the medical premises up to CHC level in the state. Permanent hoardings are also being fixed in all districts and important public places of the state.

Inter Personal Communication (IPC):

OSACS is participating in various Melas, local Mahotsav etc. by putting exhibition IEC stalls, where HIV/ AIDS counselor of ICTCs of the respective DHH/ SDH are being attending and distributing IEC materials, counseling to HRGs & general populations. Free condoms are also being distributed among HRGs. To encourage and ensure maximum participation, OSACS conducting open quiz competitions and prize distribution at the melas in which hundreds of visitors.

An innovative programme i.e. all Orissa Cycle Yatra has been done by Shri Pratap Chandra Padhy of Ganjam. He covered 314 Panchayat Samiti and 500 Police Stations of the state and aware people, High Risks Groups on roads, FSW sites. He started his Cycle Yatra from 01.12.2006 on the occasion of World AIDS day- 2006. OSACS has supported him by giving financial assistance for his travel.

Village / ULB level HIV /AIDS Awareness Campaign:

In the previous years, OSACS covered 17- districts i.e. Koraput, Rayagada, Mayurbhanj, Keonjhar, Ganjam, Khurda, Balasore, Kendrapara, Puri, Bhadrak, Gajapati, Malkanagir, Nuapada, Nawarangpur, Cuttack, Jagatsinghpur & Deogarh districts under Village/ ULB level HIV/ AIDS awareness activities, conducting 14,857 programmes covering 14,187 villages and 67 Urban Local Bodies of 188 Blocks, 3749 Gram panchayats. Under the programme, traditional folk media i.e. Street Play, Palla, Daskathia was adopted. Meetings, Rally, distribution of IEC Materials were also done. Which under the programme, we could reach an approximately 66.28 Lakhs people (both rural & urban) who witnessed the programme.

During the last and current years, Special Interactive Programmes (SIP) are being conducted by Directorate of Field Publicity (DFP) and Song & drama Division the districts of Bhadrak, Bolangir, Boudh, Gajpati, Ganjam, Kalaandi, Kandhamal, Keonjhar, Malkanagiri, Mayurbhanj, Nawarangpur, Nuapada, Puri, Sambalur, Sundargarh, Balasore, Khurda, Jajpur & Sonepur.

Observance of Events:

Special Events like, World AIDS day, Voluntary Blood Donation day, International Women's Day and International Drug Abuse & Illicit Drug Trafficking Day Vigilance week, World Health Day, International Youth Day, and National Youth Day etc. are being observed throughout the state in collaboration with line Govt. departments, agencies under the umbrella of OSACS.

Advocacy:

Advocacy with various Govt. deptts. NGOs/ INGOs, corporate bodies, Community Based Organizations, Religious leaders, Journalists, PRI members, Govt. Officials, SHGs are being undertaken with the help of our State Mainstreaming Unit.

“ICTC Campaign” was launched on 16th of August, 2007 in the Conference Hall of SIH & FW, Bhubaneswar to raise the intake at ICTCs in the state.

Integrated Counseling Testing Centre (ICTCs):

129 ICTCs are established in the state. The ICTCs provide HIV testing with pre-test & post test counseling; drugs for Opportunistic Infections; Free distribution of Condoms; Follow-up counseling done for HIV+ve cases detected in various health camps. Provides HIV testing with pre-test & post test counseling to pregnant mother. HIV+ve pregnant mothers are advised for institutional delivery. During the delivery of HIV+ve mother Nevirapin 200 mg. One Capsul is given to the mother & Nevirapin Syrup is given to the new born baby after 2 hours of delivery to protect the new born baby from HIV infection. Delivery kits are supplied for the delivery of HIV+ve mothers and staffs are advised to follow the “Universal Safety Precaution”.

Tele-Counseling Centre / Helpline:

A National AIDS Help Line (Non-Metered 1097) is operational in Orissa State AIDS Control Society, Bhubaneswar and at the 3 Medical Colleges for tele-counselling of general public on STD/HIV/AIDS.

There are 23,590 calls (Till December, 2007) have been received from general public and queried about the HIV/AIDS, Testing, Sexuality, Support, Symptoms, Myths & Misconceptions, Condoms & Other Personal Queries. The year details given below:

Year	Nos. of Tele-counseling
2003	1,437
2004	5,138
2005	6,539
2006-2007	6,114
2007-2008(Till December 2007)	4,362
Total (2003 to 2007)	23,590

Sexually Transmitted Diseases (STD) Clinics:

Sexually Transmitted Infections (STI) / RTI, especially those characterized by open sores and discharge, increase the risk of HIV transmission by ten times. Quality management STI / RTI serves as a valuable entry point for organizing prevention programme for HIV/AIDS. Facilities for free treatment of STI & RTI are available in the STD Clinics. STD Drugs like: Gama Benzene Hexa Chloride, 100ml. Bottle; Vaginal Gel 30gm. Tube; tab. Metronidazole 400 mg; Contrimazole Passaries 500mg; Cap. Doxycycline 100mg; Tab. Norfloxacin 400mg; Tab. Fluconazole 150mg; Tab Acyclovir 200mg; Tab. Erythromycin 500mg are provided free of cost to STD patients. Free distribution of Condoms and partner treatment is done at STD Clinics.

In 34 STD Clinics, it was reported that, 2, 24,639 persons have attended where 1, 33,386 persons are treated till December, 2007. The year-wise details given below:

Sl. NO	Particulars	2002	2003	2004	2005	2006	January to Dec., 2007	TOTAL
1	No. of Patients Attended	16,847	28,767	50,965	58,566	39,097	30,397	2,24,639
2	No. of Patients Treated	16,847	28,767	22,273	34,574	15,427	15,498	1,33,386

Condom Promotion:

Among the probable sources of HIV transmission in our country, heterosexual promiscuity constitutes the major route. The most successful and practical way to prevent the transmission is the use of condoms according to experience from all over the world and in India. Condoms are not only affordable but also user friendly and an effective possible way to protect further transmission of HIV.

The continuous intervention and efforts of OSACS through different agencies in condom promotional activities during the year has increased the utility of condom in the State.

The social marketing of condoms is done through Partner NGOs & other three agencies i.e Population Services International (PSI), Orissa (an international NGO) & Hindustan Latex family Planning Promotion Trust (HLFPPT), Orissa & Parivar Seva Sanstha, Orissa, Bhubaneswar. Along with these the free distribution of condoms also done by OSACS through ICTSs, ART Centers, STD Clinics, TI and Non TI partner NHOs as well as through other agencies.

The promotional programmes undertaken by the Partner NGOs (implementing Targeted Intervention Programmes) in all districts of Orissa for creating awareness among the target population for increasing the uses of condom in high risk groups and general population.

Three Condom Vending Machines (CVMs) have been installed one at Capital Hospital, Bhubaneswar, one at Badamabadi area of Cuttack city & another one is at City Hospital, Berhampur for easy availability of condoms for the high risk groups on pilot basis.

In Association with HLPPT & OXFAM:

For the first time in the state Female Condoms for Social Marketing of Condoms have been launched on 16.03.07 at Malisahi, Bhubaneswar “the CSW site for HIV/AIDS prevention programme”, which is a measure step forward for empowering women to play effective role in HIV Prevention in the state. Peer Educators of PNGOs (implementing TI Projects) CBOs of Malisahi, Bhubaneswar were trained on Female Condom Programme at Puri which enables them to generate awareness in the community level.

Blood Safety:

Transfusion of unsafe blood & blood products accounts for 1% of total HIV infection in the state. To provide safe blood & blood products (HIV free). OSACS supports **financial grants to 53 Blood Banks** (1- Govt., 50-Red Cross, 1- Charitable, 1- Public Sector-Paradeep Port Trust); and **HIV & HCV Kits** are provided to **54 Blood Banks** (1- Govt., 50-Red Cross, 1-Charitable, 2-Public Sector-Paradeep Port Trust, & IGH, RKL); **out of the 76 licensed Blood Banks** in the state including 53 Red Cross, 1 Govt., 8 Public Sector Undertaking, 1 Charitable and 13 Private Blood Banks.

Orissa achieved 59.25% against the national achievement of 54% on Voluntary Blood Collection to the total blood collection of the state during 2006. It is also depicted that, the percentage of HIV+ve on Total Blood Collections is 0.1%.

The year-wise details are given below:

Sl. No	Particulars	2002	2003	2004	2005	2006	January to Dec., 2007	TOTAL
1	Total Collection of Blood on Voluntary or Replacement	145,632	147,708	157,943	162,859	188,630	201,517	1,004,289
2	% of Voluntary Blood on Collections	18%	31%	34%	56%	59%	68%	46%
3	% of HIV+ ve on Total Blood Collections	0.10%	0.12%	0.13%	0.11%	0.11%	0.09%	0.11%

External Quality Assurance (EQAS):

In order to maintain the quality of the tests being done at each level HIV testing Centers i.e. VCCTCs, ICTCs, PPTCTs Centers & Blood Banks EQAS is followed. In Orissa there are three State Reference laboratories (SRLs) namely, the Microbiology department of SCB Medical College, Cuttack, MKCG Medical College, Berhampur & VSS Medical College of Burla. The SRLs are supplying the un-known serums to the HIV Testing Centers twice in a year for testing to verify the quality of testing, which cross checks the earlier diagnosis of testing. Simultaneously, the HIV Testing Centers are also sending all HIV+ve samples, all indeterminate samples and 5% of all HIV-ve samples to the corresponding SRLs. The process is to maintain the quality of tests done at the level of HIV Testing Centers.

MAINSTREAMING

State Mainstreaming Unit (SMU):

The HIV/AIDS Mainstreaming Project under NACP-III is a key initiative taken up with UNDP support for mainstreaming of HIV/ AIDS goals and activities into the ongoing policies, programmes and activities of relevant government departments, institutions and civil society organization including through involvement of networks of positive people.

The main Objective is to enable an equitable and inclusive HIV response across six non-health departments, 25 districts in 5 states, and select civil society and private sector organization in 5 years. Out of the five identified states (Orissa, Bihar, Chhatisgarh, Rajasthan & UP), Orissa is one of them functioning the **State Mainstreaming Unit (SMU)**.

The SMU will work with six departments (Rural Development, Urban Development, Tourism, Panchayati Raj, Tribal Affairs and Home); Corporate/ Private Sector and Civil Society Organizations at the state level as well as in five focus districts (Ganjam, Balasore, Sambalpur, Khurda and Cuttack) for Mainstreaming of HIV/ AIDS.

State Council on AIDS has been formed under the chairmanship of Hon'ble Minister, Health & FW and the first meeting was held on 31st October 2007 attended by Secretaries and other senior officials of the Govt. A consultation of Work Place Intervention was organized for corporate and private sector organization on 16th November, 2007 in association with HLPPT, OXFAM, CII and Utkal Chamber of Commerce & Industries.

A coordination meeting for Greater Involvement of People living with HIV/AIDS was organized. To mainstream HIV/AIDS in Civil Society sector, two workshops were conducted involving NGOs working in development sector other than the Health sector, NRHM partners in RCH-II Project in category "A" & "B" districts of the state were involved. The main objective of the workshop was to discuss & develop a specific strategy and related coordinated mechanism among all the organizations / agencies working in the Civil Society.

Adolescence Education Programme (AEP):

Under Adolescence Education Programme, during the financial year 2005-06 OSACS had covered 2390 No. Schools in ten districts (Angul, Balasore, Bolangir, Gajapati, Ganjam, Kendrapada, Khurda, Koraput, Puri & Sundargarh).

During the year 2006-07; as per decision of National AIDS Control Organization, MHRD, NCERT, New Delhi the School Adolescence Education Programme has been undertaken by Department of School & Mass Education of the State with a view to cover all the Government Secondary & Higher Secondary Schools (+2 Colleges); which includes formation of Red Ribbon Clubs (RRCs) in the Educational Institutions. In the first phase, teachers and peer educators of all Govt. High Schools have been trained and funds have been placed for carrying out Red Ribbon Activities. A National Review Meeting (Annual Planning Meeting of AEP & NPEP) of the Programme for Orissa and other 8 states was held in Bangalore from 3rd-6th July, 2007 to decide further course of action and strategy to be adopted. During this year NACO has approved to conduct the AEP in 1824 Schools indicating that, the refresher training programme, Monitoring & Evaluation & Red Ribbon Club Activities are to be conducted during this financial year 2007-08.

College / University Talk AIDS:

Indian Red Cross Society, Orissa State Branch, has been funded by OSACS for conducting the Red Ribbon club Activities under University Talk AIDS in degree colleges & universities. Till October, 2007; 295 Colleges have been funded @ Rs.5,000/- each with a guidelines to carry out Red Ribbon Club activities in the college by the youths.

Health NGOs, Development CBOs & PRIs:

Training of 240 staff of health NGOs (RCH Mother NGOs) in 7 batches has been completed by OSACS.

OSACS Participated in **formulation the Advocacy Strategy** for sensitizing different target Audience like, PRI Members, Media Representatives, Health Service providers, representatives of SHGs, Members of Rogi Kalian Samti & Village Health & Sanitation Mission, ASHA/ANM/AWW, Civil Society, for advocacy activities under NHRM during April. 2007.

Component: 2. CARE & SUPPORT

OI Management & PEP:

People Living With HIV/AIDS (PLWHA) are prone to different **Opportunistic Infections** like TB, Diarrhea, Cough, Fever and other malignancies. Medicines for such O.I.s are available in all the hospitals and given to the patient free of cost. As per the decision of the state government patients are allowed to reimburse up to Rs.2,000/- for medicines prescribed by Doctors beyond the free available medicines per course of treatment of the disease per person.

Anti-retroviral Medicines are provided to each District Head Quarter Hospital & Medical Colleges for Post Exposure Prophylaxis. 3 types of Antiretroviral Drugs are supplied for course of 4 weeks (28 days).

Drop-in-Centre:

OSACS has established one Drop-in Centre through CBOs (Community Based Organization) namely Kalinga Network for People Living with HIV/ AIDS (KNP +) at Bhubaneswar of Khurda district to provide proper counseling, emotional & social support to PLWHAs during their stay.

Community Care Centers:

OSACS has established four (4) Community Care Centers (CCC) in the state through NGOs like OVHA at Bhubaneswar of Khurda district, USS at district head quarter at Cuttack, TSRDS at Berhampur of Ganjam district & Lepra Society at district head quarter Koraput district.

The Community Care Centers are providing low cost community care to the People Living with HIV/ AIDS in the State. PLWHAs will receive treatment for opportunistic infections, nutrition, counseling and care at the centre. The NGO will take up the treatment and care of 10 PLWHA for a period of maximum 15 days. After 15 days the committee (PD, Clinic Doctor, NGO member) would decide on whether to extend the patient's stay or not.,

During 2007-08 (Till September, 2007): 687 PLHA have been registered in four Community Care Centers, and 476 treated for OI. There is an innovative approach for the PLHAs that, OSACS has rehabilitated to 3 PLHAs; one is at the Stitching Centre at Rourkela & another two (Mother & baby) are staying at the destitute home of "**HOINA LEPRO SOCIETY**" at Muniguda of Rayagada district for vocational training.

As per the direction of NACO, the funding pattern has been changed w.e.f., from 1st January, 2008. OSACS will not directly funding o to these Centers. Population Foundation of India (PFI) will be funded through CBCI, Kolkata, OSACS will monitor the programme.

Component: 3. TREATMENT

Anti Retroviral Treatment (ART) Centre:

Anti Retroviral Therapy comprises ARV drugs that are given to HIV infected individuals, once they have advanced immune-suppression. ART suppresses viral replication, slows

One **Anti retroviral Treatment (ART) Centre** is functional at MKCG Medical College, Berhampur from 26/9/06. Drugs for AIDS patients are available in the ART centre. There are 701 no of patient are under treatment till December, 2007.

Every month 25 to 30 samples of blood collected from HIV+ve persons and Opportunistic Infections cases are sent to School Tropical Medicines & Science, Kolkata from ART Centre, Berhampur for CD 4 Cell estimation. OI drugs & condoms are available in the ART Centre.

Sl. No	Particulars	2002	2003	2004	2005	2006	January to Dec., 2007	TOTAL
1	Nos. Registered	Not applicable as ART established from 26.09.06				327	1,802	2,129
2	Nos. of ART Received	Not applicable as ART established from 26.09.06				48	653	701

Component: 4. INSTITUTIONAL STRENGTHENING

Under **Training component**, during the year 2006-07, 6,819 participants of different categories have been trained. Which includes Medical Officers, BBOs, Councillors, Bus Owners Association, CRPF Personnel, HIV+ve People, NGO/CBO, NSS Team, PRI Members / Dist. Health Officials, Private Practitioner, Staff Nurse, Laboratory Technicians, Leaders of Disabled persons and STS & STLS and Laboratory technicians and Beauty Parlor people, Ayurvedic Medical Officers etc. Training programme on HIV/ AIDS for DPM of NRHM, BEE, CDPO, Dy. MEIO, FNGOs, MNGOs, PNGOs of 10 districts have been completed through State Institute of health & Family Welfare, Orissa, Bhubaneswar. Capital Hospital Bhubaneswar has been declared by NACO as Regional Training Centre for Training of Blood Bank staffs.

During the year 2007-08 (Till October, 2007): There are 2,215 Medical Officers, Staff Nurse, LTs, Pharmacists, Counsellors, Dy. MEIOs of 30 districts, District Nodal Officers (AIDS), NGO, CBO etc. have been trained. Apart from that, 239 Ayurvedic Medical Officers of 12 districts (Keonjar, Mayurbanj, Bhadrak, Balasore, Dhenkanal, Angul, Bargarh, Sambalpur, Deogarh, Nuapada, Jharsuuguda & Sundargarh) have been trained on HIV/AIDS, 435 Govt. Medical Officers & Private practitioners have been trained on ART, STD, and STI/RTI in 13 batches covering 25 districts of the state in collaboration with OXFAM India Trust, New Delhi. In collaboration with UNICEF; OSACS has been conducting 5- days PPTCT Training programme on HIV/AIDS for the ICTC Team (Medical Officer I/C, O & G Specialist, Female Counselor & LT of ICTC, Labour room Staff Nurse of O & G Dept.) of the DHH, SDH, / Area Hospital & CHC etc. of 29 ICTCS. Full site sensitization workshop HIV/AIDS has been conducted for the Medical Officers, Staff Nurse, Pharmacist, LT, Counselors of DHH, SDH, Area Hospital and CHC level of 3 Medical colleges & 7 high prevalent districts of state.

As per the direction of NACO, 12-days training programme on HIV/AIDS for ICTC Councilors is taken up by OSACS at Jayaprakash Institute of Social Change, Kolkata. The training programme of the counselors is scheduled to be completed by January, 2008. 22 Laboratory Technicians of OSCAX working with Blood Banks have been trained on HIV testing policy at VSS Medical College, Burla, Sambalpur.

HIV Sentinel Surveillance:

To know the HIV prevalence of the state, NACO has directed to conduct the HIV Sentinel Surveillance through Various sites, i.e. STD Site, ANC Site & HRG site. As per the criteria fixed by NACO 250 samples have been collected from STD Site & HRG Sites to know the rate HIV prevalence among the Vulnerable Groups. For STD sites the samples have been collected from the STD Clinics of selected Govt. Hospitals & samples collected from the pockets vulnerable to HIV/AIDS for the HRG sites through PNGOs where TI Projects are implanted. However, 400 samples collected from the ANC Sites to know the prevalence rate among the general population which have been collected from the Antenatal Clinics of the selected Govt. Hospitals.

Till 2005-06, in Orissa, there were 14 no of Sentinel Surveillance sites covering 10 districts to know the prevalent of the people living with HIV/AIDS. During the year, 2006-31 new sites were established as per NACO's instruction. The total sites come to 45 nos. (23 ANC sites; 7 STD sites; 15 HRG sites) covering all the 30 districts of the state. The Sentinel Surveillance-2006 started on 1-9-2006 and successfully completed by the dateline of 30th Nov. 2006. Orissa is the first state in the country in submitting the HIV Sentinel Surveillance data to NACO/NIHFW for which it received commendation from NACO.

The HIV Sentinel Surveillance-2007 started on 15.11.07. This year total sites are 48 nos. (31 ANCs Sites; 7 STD Sites & 10 HRG Sites)

Year-wise Rate of the HIV Prevalence under HIV Sentinel Surveillance of the State are given below:

Year	No. of site	No. of site	Rate Prevalence	No. of site	Rate Prevalence	No. of site	Rate Prevalence	No. of site	Rate Prevalence	No. of site	Rate Prevalence	No. of site	Rate Prevalence	No. of site	Rate Prevalence
2001	11	7	1.31%	4	0.13%										
2002	12	7	0.97%	5	0.15%										
2003	12	7	2.51%	5	0.00%										
2004	14	7	3.20%	5	0.50%	2	5.20%								
2005	14	7	3.60%	5	0.60%	2	2.60%								
2006	45	7	2.34%	23	0.55%	2	1.00%	1	10.40%	5	1.44%	6	2.73%	1	3.20%

Interagency Collaboration:

For the first time all funding agencies both international & national operating in the state like UNICEF, UNDP, DFID, OXFAM, HLPPT, Lepira Society, CONCERN World Wide, KIIT Deemed University, Population Service International, Parivar Seva Sanstha, Action Aid, Satyam Foundation, Orissa AIDS Solidarity Forum etc. have come together into one platform and determined to fight against HIV/AIDS in an intensive manner in the arena of IEC, CARE, SUPPORT & TREATMENT on HIV/AIDS.

In Collaboration with Satyam Foundation:

In the collaboration with SATYAM FOUNDATION, OSACS developed some of the IEC Materials to create awareness among the youth & general public. Satyam in its endeavor proposed to conduct sensitization workshops/ meeting in all the Management Colleges/ Institutes, IT Development sectors of the state.

The agency also supported to OSACS in the filed of Information & Technology for developing the Web Site of OSACS, the first & foremost information tools of the modern society.

In Collaboration with UNDP:

For the first time in Orissa, Photo training of Commercial Sex Workers (CSW) to build capacity for opening up to alternative options of livelihood which enhanced their self esteem and confidence for maintaining with the society.

First of its kind and the country as Master Trainers HIV+ve People belong different state through XIMB train in the community people to manage the CBOs themselves which would be a thrust strategy in ensuing NACP-III phase.

With the help of UNDP, OSACS has led to the development of identity Card-cum-Information Pocket Booklet to be distributed among migrant labourers of Ganjam [which is the most prevalent district] who are going out to place like SURAT.

In Collaboration with OXFAM:

For the first time to finalize workplace intervention strategies a workshop was organized with the participation of industrial houses, UN Agencies, Education institutions, NGOs etc. Orissa is the first low prevalent state in the country to have this kind of workshop organized.

OSACS trained to the HIV/AIDS Counselors in two batches through the experts of most prestigious institute of the Country i.e. TISS, Mumbai.

As a result of collaboration OXFAM has provided kits and Drugs as and when required by OSACS.

In Collaboration with UNICEF:

For the first time in Orissa, UNICEF has approved its annual action plan for conducting the HIV/AIDS prevention programme with a total budget of 150000 USD on dated 29.12.06.

District level training programme for the PPTCT Team i.e., Medical Officer, O & G deptt., Micro-biology deptt., & Pediatrics deptt., Staff Nurse & HIV/AIDS Counselor of all districts have been conducted by OSACS.

As a result of intersectoral collaboration for the first time in the state UNICEF has agreed to provide kits and drugs for PPTCT Centers of Orissa.

IEC information catalogue on HIV/AIDS has been developed with support of UNICEF containing various IEC materials developed (both print & electronic) by the agencies till date. This will help in developing the IEC strategy for the state on HIV/AIDS.

Indian Oil Corporation organizes the sanitation workshop on HIV/AIDS for Truckers for which, OSACS gives technical support including IEC materials to the organizations.

In Collaboration with Clinton Foundation:

Training programme for Private Doctors has been completed for 333 Private Doctors in five districts i.e. Ganjam (Berhampur), Sambalpur (Rourkela), Bhadrak, Dhenkanal, Cuttack, Jajpur Road (Cuttack) & Puri and has planned to take up training programme on HIV/AIDS in other districts like Koraput, Rayagada, Jagatsinghpur, Kalahandi, Sambalpur, Sundargarh & Mayurbhanj.

In first phase, CD4 Testing of Blood of People Living with HIV/AIDS (PLHA) and Child Living with HIV/AIDS (CLHA) of the state have been conducted in 17 sites during the month of December, 2007. Blood samples collected at different places will be transported to SRL Ranbaxy Laboratory for CD4 estimation of the HIV+ve People.

In Collaboration with Orissa State Road Project (OSRP):

The Orissa State Road Project (OSRP) functioning under Works department has planned to implement the HIV/AIDS prevention Programme in 906 kilometers on State Highway Nos. 4,5,6,7,9,9A, 16,17,18,19,37,49 and 53 for which technical supports from OSACS will be given by way of helping OSRP in designing its PIP, Programme strategy for the project in a comprehensive manner so that overlapping of activities on HIV/AIDS could be avoided with the HIV/AIDS prevention programme implemented by OSACS.

Memorandum of Understanding with Gujarat SACS:

In Orissa, the districts having higher rates of migration in Ganjam and many peoples have migrated to Surat & Alang of Gujarat to work in Textile Mills, the diamond cutting industry and Shipyards without adequate knowledge on the availability of health care facilities at destination sites and their other entitlements for which they are unable to have access to proper health care facilities available and are exposed to hazards and exploitation at their workplaces. Considering the above-mentioned issues a Memorandum of understanding has been signed between Gujarat SACS and Orissa SACS for a period of five years i.e. from January, 2007 to January 2011. UNDP has set up 14 ICT Kiosks in various high migration blocks of Nayagarh district, with the specific purpose for developing and disseminating information on HIV/AIDS and other facilities related to HIV/AIDS using multimedia films at the ICT Centre to migrants, women self help groups and PRI members through Community level workshops. UNDP has also agreed to set up similar kiosks in Surat and Alang. It is also agreed by both the SACS there would be intermittent joint reviews on field visit at places of Oriya Migrant concentrations in Gujarat on the implementation of activities under MoU at least once in 6 months and during the first month of the succeeding year, there would be a joint annual review by OSACS and GSACS on implementation of MoU for modification if any.

In Collaboration with UNDP; ICT Kiosks (Help-Desks) has also been established at **Berhampur and Balugaon railway stations where, the pre-departure information as well as counseling on HIV/AIDS and distribution of IEC Materials to be provided to the out-migrants.**

Letter of Undertaking:

A letter of undertaking has been signed between NACO, PD, OSACS, & Govt. of Orissa vides letter no. 5061 dated 10.09.07. For effective implementation of World Bank Fund during NACP-III. This has been effective for NACP-III (2007-2012).

ACTIVITIES UNDER HEALTH PROGRAMME

National Leprosy Elimination Programme (NLEP):

The National Leprosy Elimination Programme is under implementation in the State since 1982-83. The programme was supported by the Government of India, bilateral aid agencies and International donor agencies like Lepira India, HOINA and the German Leprosy Relief Association.

The objective of the programme is to eliminate the disease by detecting all cases of leprosy from the community and treating them with “Multi Drug Therapy”(MDT). The “elimination of leprosy” means reducing the prevalence rate of leprosy to one or below one case per 10,000 populations. The State has achieved the “elimination” goal by end of December 2006. District of Jagatsinghpur, Malkanagiri, Keonjhar, Kandhmal, Kendrapara, Jajpur, Cuttack, Koraput, Rayagada, Nawarngpur, Balasore, Puri, Gajapati, Ganjam, Nayagarh, Khurda, Bhadrak, Dhenkanal, Kalahandi, Mayurbhanj, Bolangir, Sundargarh and Deogarh have already achieved elimination. The prevalence rate of leprosy, which was 121 per 10,000 population at the beginning of the programme (i.e. 1982-83), has now come down, to only 0.1 per 10,000 population by end of Dec’2006. It has been planned to achieve elimination of leprosy from the remaining districts of Bargarh, Sonapur, Boudh, Sambalpur Jharsuguda and Angul by Dec’2007.

The diagnosis and treatment facilities of leprosy cases have been extended to all the peripheral health institutions including Sub-Centers. Re-constructive surgery facility has also been made available at the Leprosy Home and Hospital, Cuttack and Capital Hospital, Bhubaneswar, SCB Medical College, Cuttack and MKCG Medical College, Berhampur during the year.

National Programme for Control of Blindness (NPCB):

The National Programme for Control of Blindness (NPCB) is a 100% centrally sponsored scheme. During the current financial year 2007-08 target for Cataract Surgery was fixed to 1, 24,000 out of which 60840 Nos. of Cataract Surgery made till December 2007. The target for School children to be screened is 1, 00,000 out of which 1, 50,575 Nos. of children have been screened till December 2007. Eye Surgeons are being trained up for IOL surgery. Governments have allowed assistance under GIA of Rs.142.50 lakhs during the current financial year and the total amount has already been allotted to 21 DBCSs so far. Under cash grant Government of India have released Rs.1.60 crore during 2007-08 and out of which Rs.1.18 crore has already been disbursed to different DDOs towards continuance of different posts under NPCB.

National Filaria Control Programme:

National Filaria Control Programme is functioning in 15 Filaria Control Units and 15 Filaria Clinics in Urban areas. A budget provision of Rs.30.30 lakhs was made during 2006-2007 for covering the operational cost and cost of materials and equipment under the programme both under Plan and Non Plan. During the year 2006-07, 38508 nos. of persons were examined. 372 persons were clinically found positive in the concerned institutions and treated. Besides this Rs.205.20 lakhs have been provided under central Plan for implementation of Mass Drugs Administration (MDA).

National Iodine Deficiency Disorder (IDD) Control Programme:

The National Iodine Deficiency Disorders Control Programme started during December 1989. This is a 100% Centrally Sponsored Scheme. The aim of this programme is to prevent the Iodine Deficiency Disorders like incidence of goiter, physical and mental disorders and to bring the incidence of IDD below 10% in the State. The strategy adopted is to completely ban on manufacture, sale of non iodised salt.

Panchabyadhi Scheme:

The Pnachabyadhi Chikitsa Scheme (5 Diseases Treatment Scheme) completes risk protection against the diseases i.e. Acute Respiratory Infection, Malaria, Leprosy, Diarrhoea, and Scabies initiated in Orissa with effect from 01.07.2001. Quality medicines are made available free of cost to the patients at all Government Health Institutions. Also there is provision for reimbursement of cost of medicine in genuine cases. The scheme is very beneficial to all the poorer sections.

ACTIVITIES UNDER MEDICAL EDUCATION AND TRAINING

1. The M.B.B.S. seats of MKCG Medical College, Berhampur and VSS Medical College, Burla has been enhanced from 107 to 150 for the first time during the academic session 2007-08 conditionally by Ministry of Health & Family Welfare, Government of India subject to the fulfillment of the deficiencies pointed out by Medical Council of India . Government of India have also given permission for admission in the enhanced MBBS seats in SCB Medical College, Cuttack during the academic session 2007-2008 subject to the condition of fulfillment of various deficiencies pointed out by M.C.I.

In order to fulfill the deficiencies, required posts of faculties and para medics have been created in the Medical College and Hospitals and SVPPGIP, Cuttack.

2. During Session 2007-2008, M.Ch. in Pediatric Surgery and Plastic Surgery have been instituted at SVPPGIP, Cuttack and SCB Medical College, Cuttack respectively. Similarly steps are being taken for fulfilling the deficiencies raised by MCI for M.Ch. Course in Urology, CT Surgery and reinstatement of M.Ch. Neurosurgery at SCB Medical College, Cuttack.
3. Sincere efforts have been taken by this department for enhancement of BDS seats from 20 to 50 and opening of MDS Courses in Dental Wing of SCB Medical College during the Session 2008-2009 with the aim of establishment of Dental College in place of the existing Dental Wing of SCB Medical College, Cuttack.
4. Additional facilities for 156 beds have been created in SVPPGIP, Cuttack under Government of India grants and JAICA Project with creation of 13 additional faculty posts and 78 para medical posts during the Session 2007-2008.
5. For up gradation and strengthening of emergency facilities in the casualty services Government of India have provided Rs.1.50 crore each to the three Medical College Hospitals of the State. Purchase of equipments, ambulances and construction work under the scheme is going on in the above institutions to provide state of the Art casualty service to the people of the State.
6. The Regional Centers of each three Government Medical College Hospitals have been functioning since 2006-2007 duly equipped with diagnostic equipments.
7. Three Government Medical College have been provided with funds for training of MBBS doctors for life saving Anesthesia Skill and Endoscopic Training at Department of O & G in SCB Medical College, Cuttack.
8. MKCG Medical College, and Hospital, Berhampur has been selected by the Ministry of Health & Family Welfare, Government of India for setting up of a department of Physical Medicine and Rehabilitation (PMR). Government of India is providing financial assistance for setting up of the Department. The aim of the scheme is to build capacity in the Medical College for running a Department which can train Medical Students at undergraduate and post graduate level and also manpower required for medical rehabilitation programme. It will also take up treatment and service required for rehabilitating the disabled persons.
9. There has been a provision of Rrs.1.01 crore for development and expansion of telemedicine system for the year 2007-2008 in the State.
10. DMLT/ DMRT seats have been enhanced from 30 to 60 in respect of 3 medical colleges in the State during 2007-2008.
11. Stipend of House Surgeon has been enhanced to Rs.5,000/- PM with effect from 2007-2008 batch onwards.

ACTIVITIES UNDER FAMILY WELFARE PROGRAMME

The Family Welfare Programme started in the country since 1952 with the objective of stabilizing the population to accelerate the economic growth. This programme was operated in Orissa since 1956. Achievements under various Family planning methods during 2007-08 (upto Nov.07) are as follows:-

Sterlization	-	28734
IUD insertion	-	97451
Condom Users	-	205613
Oral Pill Users	-	116603

Insurance Scheme :

As per the direction of the Honorable supreme court of India and on its execution by Govt. of India, insurance scheme has been implemented for the beneficiaries those who are accepting sterilization operation from 29.11.2005. For death, complication or failure following Sterilization the beneficiaries are suppose to be covered under Insurance Policy.

Reduction in Infant Mortality Rate (IMR) Mission:

This programme has started in the state of Orissa since 15th August 2001 with an objective of reducing the IMR from 97 to 50 per thousand live births by 2010. The key activities include:

- i. Chemoprophylaxis against malaria during pregnancy.
- ii. Immunization in Outreach in accessible areas.
- iii. Institutional delivery to the pregnant women free of cost.
- iv. Free treatment service for slum dwellers.
- v. Reimbursement of Transport cost sick neonates and puerperal mother.

Infant Mortality Rate (IMR) is a key indicator of the general health status of a population. As per (SRS) Reports 2006 Orissa's Infant Mortality Rate is estimated to be 73 per thousand live births.

There is declining trend in IMR in the state.

NAVAJYOTI

Hon'ble Chief Minister of Orissa launched the Scheme "NAVAJYOTI" under IMR Mission on 1st April 2005 to reduce Neonatal Mortality and Morbidity, 14 districts are selected, where the IMR are above the state average (as 60% death occur in the neonatal period). These districts are- Rayagada, Malkanagiri, Nawarangpur, Nuapada, Gajapati, Kalahandi, Keonjhar, Sundargarh, Kandhamal, Bolangir, Boudh, Koraput, Deogarh, Sonapur. Training of traditional Birth Attendants has been taken up in these districts on an intensified scale.

Universal Immunization Programme:

Under the Universal Immunization Programme the following achievements have been registered during 2007-08 (upto Nov'07) as follows:

Items	Achievements
T.T.(P.W.)	517036
D.P.T.	517856
POLIO	516061
BCG	549458
Measles	502572

Janani Surakhya Yojana:

Janani Suraksha Yojana (JSY) is under the overall umbrella of NRHM is being implemented by way of modifying the existing National Maternity Benefits Scheme (NMBS). While NMBS is linked to provision of better diet for pregnant woman from BPL families. JSY integrates the cash assistant with antenatal care during the pregnancy period, institutional care during delivery and immediate post-partum period in a health centre by establishing a system of coordinated care by field level health worker. The objective of JSY is centre by establishing a system of coordinated care by field level health workers. The objective of JSY is to reduce over all maternal mortality ratio and infant mortality rate, and to increase institutional deliveries.

Year	Total Beneficiary	Financial Assistance (Rs. In lakhs)
2005-06	26407	253.83
2006-07	227204	2443.80
2007-08(Dec.07)	354119	4320.75

Janani Surakhya Yojana (JSY) is a new scheme introduced during the year 2005-06 and implemented with effect from 12.04.2005. This is a cent percent Centrally Sponsored Scheme under the overall umbrella of NRHM, It replaces the existing centrally sponsored Scheme i.e. National Maternity Benefit Scheme in a modified manner. The main objective of the JSY is to reduce MMR and IMR by focusing on increased Institutional delivery and making available quality care during by linking delivery care to antenatal check up and neonatal care along with the supported referral and transport assistance.

Scale of Cash assistance for Institutional delivery

RURAL AREA			URBAN AREA		
Mother Package	ASHA Package	Total	Mother Package	ASHA package	Total
1,400	600	2,000	1,000	200	1,200

Institutional Delivery:-

2006-07=46.22%

2007-08=63.80%

(upto Nov,07)

IPPI:

National Immunization Day i.e. Pulse Polio Immunization was implemented throughout the state by giving Oral Polio Vaccines to the children in the age group of (0-5) since 1995. During 2007-08, the Pulse Polio Immunization Programme was scheduled on 20th May, 2007 (SNID) and 6th January, 2008. The percentages of achievements of the State under this programme are as follows:

1. 20th May,2007(SNID)- 4530237-94.52%
2. 6th January, 2008 (NID)-4483800-95.28%

Vitamin-A:

Vitamin 'A' administration to all Children under 1 to 5 years of age are taken up in the campaign every Wednesday of May and December 2007. This was a special effort on the part of the State Government in collaboration with UNICEF.

Achievements under various Family Planning methods during 2006-07 are as follows:

Sterilisation	-	45,617
IUD insertion	-	1, 16,457
Contraceptives-	-	2, 58,081
Oral Pill Users	-	1, 40,482

Reduction in Infant Mortality Rate (IMR Mission):

IMR was reduced from 97 to 75 per thousand live birth by 2005.

Maternal Mortality Rate (MMR):

Maternal Mortality Rate in the state is 358 per one lakh live birth according to sample registration system (SRS) 2005.

Janani Surakhya Yojana (JSY) is being introduced with effect from 12.04.2005.

The main objective of this plan is to facilitate Institutional Delivery and to provide quality antenatal care for mothers and neonates.

Financial assistance of Rs.1400.00 in rural and Rs.1000.00 in Urban areas is provided for Institutional delivery.

Implementation of PC & PNDT Act and NIPI Scheme in Orissa.

For smooth implementation and enforcement of the provision of PC & PNDT Act in the state different bodies like (1) State Supervisory Board (2) State Level Advisory Committee (3) State Appropriate Authority and (4) State Level Task Force Committee at the State Level and District Level Advisory Committee, District Appropriate Authority, Sub-Divisional Level Appropriate Authority & District Level task Force Committee has been reconstituted.

1. With the help of District Task Force, Ultrasound clinics and MTP centers are regularly being inspected
2. Review of progress is being done by the DHS, Orissa and DFW, Orissa during monthly CDMO Conference
3. Quarterly report on PNDT Act are being submitted to Government of India regularly
4. Awareness about the act and its prescribed punishment for the law violators are being made from among the people through IEC activities.
5. Advertisements are being made in Oriya news papers and in Door Darshan during Oriya serials through OTV/ETV channels
6. Display boards are to be fixed at the entrance, waiting space and inside the ultrasound clinics for making people aware of the offence of sex determination and the punishment thereof.
7. State Supervisory Board meeting was held on 29.09.2007 to review the activities regarding implementation of the Act.
8. State Advisory Committee meeting was held on 18.08.2007, 24.10.2007 and 17.01.2008 to aid and advise the Appropriate Authorities for better implementation of Act.

NIPI Scheme:

MOU between UNOPS and Orissa State Health & Family Welfare Society has been signed during December, 2007. The aims and objectives of the partnership is to facilitate rapid scale-up of the quality child related health services. UNOPS fund amounting rupees sixty million has been received by Health & Family Welfare Society for implementation of the scheme.

Family Planning Insurance Scheme:

Government of India, Ministry of Health and Family Welfare (Department of Family Welfare) has introduced family planning insurance scheme in the state through Oriental Insurance Company with effect from November, 2005.

ACTIVITIES UNDER STATE INSTITUTE OF HEALTH & FAMILY WELFARE (SIH & FW)

The State Institute of Health & Family Welfare, Orissa is the collaborating Institute for all RCH Training programmes declared by the National Institute of Health and Family Welfare. (NIHFW) New Delhi as the Center of Excellence. The Institute has enhanced its capacity-building by providing Master Training on RCH through the NIH & F.W. imparting “Training of Trainers” on RCH to faculties of all training institutions and district health managers and O & G and pediatric Specialists, Integrated Skill Development Training to Health Workers, Health Supervisors and Medical Offices and Specialized Skill Development Training to different Medical Officers on Laparoscopic Sterilization, Mini Laparotomy, MTP, IUD and No Scalpel Vasectomy (NSV).

This Institute is also the Nodal Agency for Training Programmes sponsored by the Orissa Health Systems Development Project (OHSDP) and Programmes under the UNFPA- assisted, Integrated Population & Development (IPD) Project, Moreover, this Institution is organizing different vertical training programmes such as the AIDS Training Programme,

Leprosy Training Programme, TB Training Programme, Pulse Polio Training Programme, Vitamin-A Training Programme, Blindness Control Training Programme, etc. It is also responsible for preparation of training curriculum and learning resource materials, monitoring of all the above training programmes and evaluating such training programmes. All IEC activities of the H & F.W. Department are being carried out through this Institute.

Further this institute has been identified by GOI as premier Institute for which the “Professional Development Courses” (PDC) of Senior Medical Officers from different States at Regional level i.e. Bihar, Jharkhand, Chattisgarh and Orissa has been introduced in the State during 2004-06. Orissa is the 1st State who has taken such step to undertake the 1st batch of this course through out the country. This course will enable them to upgrade the knowledge on Medical Technology, Judicious Management of scarce resources, applying the knowledge in the field of changing dimensions in Health care delivery and Information Technology, in Health Sector Management.

This Institute has also organized the State Award function where different categories of dedicated Health personnel (8 Nos.) were awarded during 2004-06 i.e. best Medical Officer from Allopathic, Ayurvedic, Homeopathic, best Pharmacist, best Staff Nurse, best Health Workers (Male & Female) and best attendant.

ACTIVITIES UNDER DRUGS CONTROL ADMINISTRATION

The main aim and objective of Drugs Control Administration is to regulate, Manufacture, distribution and sale of Drugs and to ensure availability of quality Drugs to the Consumers of our State at a fair price and as well as to prevent the Circulation of objectionable advertisements making false claim about drug on the a Label or separately by leaflets to misguide the consumers.

This organization is functioning with 22 Drugs Inspectors in the Districts Level and two Drugs Inspectors at Head Qrs. Level to take up statutory inspection of the Drug Manufacturing premises as well as sales premises and to take up statutory sampling of Drugs for test and analysis at approved laboratory to locate the adulterated, misbranded, spurious and sub-standard Drugs. They are also engaged in verification of label of the Drug towards objectionable claim if any made by the concerned manufacturer narcotic drugs coming under NDPS Act. 1989 through proper prescription under D & C Rules, 1945 to prevent Drug abuse.

The Drugs Control Admn. Orissa at its Head Qrs. At Bhubaneswar has two Zonal offices at Sambalpur and Berhampur to grant and renew the sale drug license and also to keep a close watch over the enforcement made by the respective Drugs Inspector, within the State of Orissa.

This organization has own testing laboratory at Bhubaneswar for test and analysis of Drugs as well as Excise samples except injectable, Disinfectant fluid, sterilized surgical items and other biological drugs.

The laboratory is in process of renovation with assistance of Govt. of India for test and analysis of further more drugs including injectable and other biological Drugs.

During the past four year w.e.f. 2004-05 to 2007-08 (Up to January'08) the achievements/ activities of the Drugs Control Admn., Orissa, Bhubaneswar are enclosed herewith for kind information.

Forecast of Programme of Activities of the Drugs Control Administration:

1. The Laboratory facilities are being augmented by funding under C.S.P. and T.F.C. grants.
2. Creation of 20 more posts of Drugs Inspectors and their ancillary staff to be posted in the periphery.
3. Functioning of a Quality Assurance Cell to identify the drug samples as per the method prescribed by W.H.O. for making available of quick Test Reports.
4. The Intelligence Wing of this Directorate is being re-oriented to conduct Raids in suspect able areas of the State to curb menace of movement of suspect, Spurious, Sub-Standard and time barred drugs.
5. Steps are being taken for computerization of the licensing system for increasing the revenue collected.

ACHIEVEMENTS OF DRUGS CONTROL ADMINISTRATION:

1.(A)	No. of Inspections carried out	2007-08(January)
I	Sales premises	2556
II	Hospital Stores	23
III	Manufacturing units	26
IV	Drug recall	63
V	Complaint investigated	22
	TOTAL:	2690
(B)	No. of inspections carried out under DPCO, 95	665
(C)	No. of inspections carried out under DMR (OA)	426
(D)	No. of inspections carried out under NDPS	3
(E)	(i) No. of inspection carried out on Homoeopathy Premises	11
	TOTAL INSPECTION:	2690+1105+1648 = 5443
(F)	No of sample drawn For T/A:- Trade	3168
	Hospital	936
	Mfg. Unit	178
	Total no. of sample drawn For T/A	4282
(G)	Total no. of sample declared as SQ	1085
(H)	Total no. of sample declared as NSQ	63
2(A)	No. of S.C.N. issued	1194
(B)	No. of Licenses suspended	675
(C)	No. of License cancelled	29
(D)	No. of prosecutions launched	11
(E)	No. of prosecutions under investigation	74
3	No. of raids conducted	1648
4	No. of licenses renewed	521
5	No. of cases in which drugs prohibited by the D.C.G.(I) has been detected	Nil
6	Irrational combination and labeling detected and new drugs	Nil
7	Total revenue Collected (Lic. Fees and fines)	TRs. 16373

DURING RAID PERIOD UP TO 31.01.08:

(1) No. of raid conducted :-		
RETAIL	-	1176
Wholesale	-	338
Others	-	<u>84</u>
Total:		1648
(2) No. of Samples Drawn	-	4058
(3) No. of cases registered	-	45
(4) No. of prosecution submitted in the court	-	11
(5) No. of prosecution under consideration (Seizure-43 + NSQ-29)	-	72
(6) No. of sample declared as spurious	-	2
(7) No. of Sample declared as NSQ	-	51
(8) No. of sample declared as SQ	-	<u>643</u>
TOTAL T/R RECEIVED	-	696
(9) No. of stop sell orders issued	-	166
(10) No of Drug recall initiated	-	51

ACTIVITIES UNDER INDIAN SYSTEM OF MEDICINE & HOMOEOPATHY (ISM&H)

Government of Orissa is taking active steps to improve the health standards of the people in the State by providing facilities under the India Systems of Medicines and Homoeopathy. The Indian Systems of Medicine and Homoeopathy have attracted attention the world over. Chronic and complicated diseases like paralysis, arthritis, liver diseases, Diabetics, spondilosis, asthma, tuberculosis, piles, fistula, skin diseases, various kinds of fever and again disorders etc. have been successfully treated at comparatively cheaper cost through I.S.M & H, treatment.

By the end of tenth Five year Plan, governments have established 619 Ayurvedic, 560 Homoeopathic and 9 Unani dispensaries in the state to provide primary health care service to the people. Apart from these, 5 Ayurvedic Hospitals with 258 beds and 4 Homoeopathic Hospitals with 125 beds having 418 indoor beds in Ayurvedic Hospitals and 125 beds in Homoeopathic Hospitals have been functioning in urban areas for catering health carfe services. Specialized Panchakarma treatment under Ayurveda has been provided in Government Ayurvedic Hospitals at Bhubaneswar, and Gopabandu Ayurvedic Mahavidyalaya Hospital, Puri for providing specialized treatment for Ayurveda to Foreign Tourists.

Three Government Ayurvedic Colleges and 4 Homoeopathic Colleges have been imparting degree courses and producing 90 Ayurvedic and 100 Homoeopathic graduate doctors every year. Post graduate courses in five Ayurvedic and five Homoeopathic disciplines are available in the State. Central assistance of Rs.325,00 lakhs have been availed to upgrade the status of Gopabandhu Ayurvedic Mohavidyalaya, Puri and Dr Abhinachandra Homoeopathic Medical College & Hospital, Bhubaneswar as the state Model Institutes.

Government Ayurvedic pharmacy at Bolangir and Bhubaneswar have been materialized with assistance of Government of India. Government have been taking steps for quality control of ISM drugs and fictionalized the State Drug testing laboratory for ISM, Bhubaneswar. During the year 2006-07, Central assistance of Rs.188.00 lakhs has been availed for strengthening the Homoeopathic pharmacy of Dr Abhina Chandra Homoeopathic Medical College and Hospital, Bhubaneswar.

During the year 2007-08 budget provision of Rs.4309.56 lakhs under Non-Plan and Rs.36.76 lakh under State plan and Rs.356.76 lakhs under Central Plan has been provided for continuance and development of institutions, hospitals, dispensaries, pharmacies and supply of essential medicines under Indian system of medicine & Homoeopathy.