CHAPTER 16

HEALTH & FAMILY WELFARE

Introduction

1. Health is essential for the happiness and well being of the nation. It contributes significantly to economic growth and development as healthy populations live longer and are more productive. It is an important human development indicator and is of great importance for the overall development of the state. The National Capital Territory of Delhi has attached significant importance to health sector and people are an essential component of the condition of good health care health strategy adopted by the capital of the country.

2. Prevention is better than cure; a policy leads to accessible affordable & quality Health Care for all. Good health aims to improve the quality of life through prevention and treatment of diseases. Efforts are being made to ensure the healthcare delivery system accessible and affordable to all through a holistic, humane and patient centric approach. “Ensuring healthy living and promoting well-being for people of all ages” is one of the Sustainable Development Goals and the Government of NCT of Delhi is continuously striving to achieve the goals under the Sustainable Development Goals related to health indicators.

3. Health as a basic, indisputable human right - a right that is obligatory for the state to provide to all citizens regardless of income, social groups, localities or social class. The health system in the largely urban city- state of Delhi is beset with many pressing challenges. Firstly, the state government is responsible for planning and implementing the delivery of health services within the National Capital Territory, its clientele, comprising the entire national capital region (NCR) and its contagious districts in the neighboring states, actually surpasses manifold the domiciled population. Secondly, the existing laws and regulations often lead to overlapping actions by multiple agencies regarding public health aspects viz. the State Government, Urban Local Bodies and Central Government.

4. The National Capital Territory of Delhi has made significant progress in improving the health status of its people. Delhi has made substantial progress in building reliable health infrastructure at various levels. The national capital has been at the forefront of health care development. Basic to tertiary health care services are being provided by the public and private sectors and voluntary organizations.

5. Health & Family Welfare Department of Government of National Capital Territory of Delhi is committed to provide preventive, promotive and curative health care services to the citizens of Delhi. The healthcare delivery system in Delhi is as follows:-
AAMS (Ayushman Arogaya Mandir)
Multi Specialty Clinics (Polyclinics)
Multi Specialty Hospitals (earlier called Secondary Level Hospitals)
Super Specialty Hospitals (earlier called Tertiary Level Hospitals)

6. Government of NCT of Delhi is providing preventive, promotive and curative health care services to the citizens of Delhi through 40 hospitals including Super Specialty and Multispecialty Hospitals,370 Aayushman Arogya Mandir 98 Allopathic Dispensaries, 48 Polyclinics, 64 Seed Primary Urban Health Centers (PUHCs), 57 Ayurvedic, 28 Unani, 121 Homeopathic Dispensaries, 16 Mobile Health Clinics, covering 189 shelters and 36 School Health Clinics providing preventive, promotive and curative health care services to the Citizens of Delhi.

7. Health & Family Welfare Department, GNCTD making all possible efforts for strengthening primary and secondary healthcare infrastructure by setting up new Ayushman Arogya Mandirs and up gradation of dispensaries into Polyclinics besides robust diagnostic facilities. The Government is striving hard to enhance the number of hospital beds by remodeling & expansion of already existing Delhi Government Hospitals. Radiological diagnostic services like MRI, CT, PETCT, TMT Echo etc are being provided free of cost to all residents of Delhi at empanelled DGEHS centers subject to referral from public health facilities of the Delhi Govt. The Government is also running Free Surgery Scheme for surgeries at empanelled private hospitals after referral from Delhi Government Hospitals. Dialysis services are also being provided in selected Delhi Govt. Hospitals through PPP mode.

8. Directorate General of Health Services is the nodal agency under the Health & Family Welfare Department, Government of NCT of Delhi to provide better health care services to the citizens of Delhi with the coordination of other government and non-government organizations. Government of NCT of Delhi itself is a significant contributor in primary health care services having 1067 dispensaries (out of total 1704 dispensaries, approx. 62.68% of total dispensaries). Statement 16.1 presents data with regard to the health infrastructure at all levels available in Delhi from 2015-16 to 2025-26.

STATEMENT 16.1
HEALTH INFRASTRUCTURE FACILITIES IN DELHI DURING THE PERIOD 2015-16 TO 2025-26

S. No.	Health Institutions	2015-16	2016-17	2017-18	2018-19	2019-20	2020-21	2021-22	2022-23	2023-24	2024-25	2025-26
1.	Hospitals*	94	83	88	88	88	88	89	92	92	92	92
2.	Primary Health Centers	5	7	7	7	7	12	48	39	34	34	34
3.	Dispensaries**	1507	1240	1298	1432	1585	1575	1621	1658	1702	1704	1501
4.	Maternity Home & Sub Centers***	265	193	230	251	224	134	128	124	129	129	129
5.	Polyclinics	42	48	54 $	55	56	52$	44	46	46	48	48
6.	Pvt. Hospitals & Nursing Homes#	1057	1057	1160	1172	1151	1119	1050	1040	1188	1181	1181
7.	Special Clinics	27	14	124	167	305	388@	508	405	437	503	503
8.	Medical Colleges	17	17	17	17	17	19##	19	19	19	20	20
9	Aayushman Arogya Mandirs	--	---	---	---	---	---	---	---	---	---	370
	Total	**3014**	**2659**	**2978**	**3189**	**3433**	**3387**	**3507**	**3423**	**3647**	**3711**	**3878**

Source: Directorate of Health Services, GNCTD.

* *Includes all Delhi Govt., MCD, NDMC, CGHS, Railways, ESI, Defence hospitals etc. Government Hospitals (Allopathic, Ayurvedic, Homeopathic and T.B. Clinics) but excludes maternity Homes & Primary Health Centers.*

** *Includes Allopathic, AYUSH Dispensaries, and Mobile Health Clinics of all levels of Government.*

*** *Includes Maternity Homes, Maternity Centers/sub-centers.*

$ *This includes Delhi Government Polyclinics which are converted from Delhi Govt. dispensaries during the year.*

\# *Includes Voluntary Organizations.*

@ *Includes Chest Clinics & VD Clinics.*

Only colleges running under graduate medical courses (MBBS, BHMS, BAMS, BUMS & BDS).

9. It may be seen from above Statement that number of medical institutions in Delhi has increased gradually by 12.96% since 2019-20. As on 31.12.2025, there are 3878 medical institutions in Delhi showing an overall increase of 4.50% completed last year. The reason for this is due to increase in the number of dispensaries, Polyclinics, Special Clinics and Medical Colleges. There is no change in the number of Hospitals. However, there are number of reasons behind slow pace of extension of new health outlets and the first and the foremost is non-availability of land. Multiplicity of agencies and shortage of experienced manpower are the reasons in line for slow extension of health facilities. Moreover all the hospitals especially major hospitals in Delhi attend heavy patient work load.

10. The agency-wise information regarding number of medical institutions and bed capacity in Delhi, 2025-26 is given in the statement 16.2.

STATEMENT 16.2

AGENCY-WISE NUMBER OF MEDICAL INSTITUTIONS AND BED CAPACITY IN DELHI

S.No.	Agencies	2025-26	
		Institutions	Beds sanctioned
1.	Hospitals under H&FW Department, GNCTD	40	15659
2.	Municipal Corporation of Delhi (including Maternity Homes and MCD AYUSH)	47	3606
3.	New Delhi Municipal Council (NDMC) including NDMC AYUSH	2	242
4.	Government of India(DGHS, CGHS, Railway, ESI, Defence)	19	10174
5.	Other Autonomous Bodies {VPCI,IIT Hospital, AIIMS, NITRD, AIIA}	5	3791
6.	Private Nursing Homes including Voluntary Organizations	1178+3 V.O.	30310+20
	Total	**1294**	**63802**

Source: Dte. Of Health Services, GNCTD.

11.Growth of Bed Capacity Since 2015-16: - According to the recommendations of the World Health Organization (WHO), the recommended bed population ratio is 5 beds per a population of 1,000. However, the bed population ratio in Delhi in 2025-26 has remained at 2.84 which is much below the WHO norm. The information regarding growth in number of beds in medical institutions and bed population ratio from 2015-16 onwards is depicted in the Statement 16.3.

STATEMENT 16.3

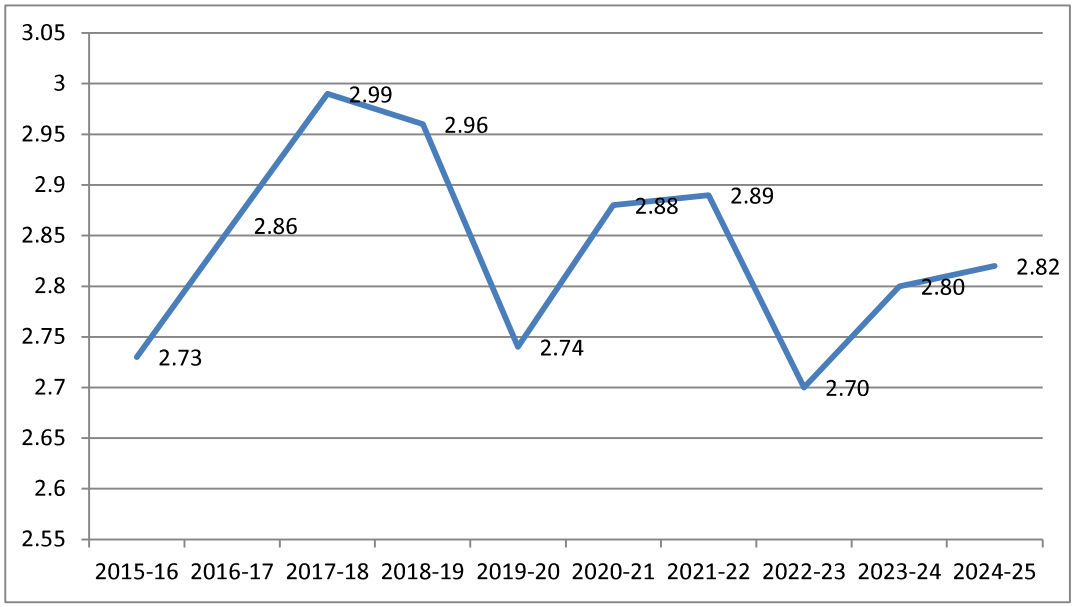
BEDS IN MEDICAL INSTITUTIONS & BED POPULATION RATIO IN DELHI FROM 2015-16 TO 2025-26

S. No.	Year	Number of Hospital beds		
		Population (in '00')	Beds Sanctioned	Beds per 1000 Persons
1.	2015-16	183140	49969	2.73
2.	2016-17	186640	53329	2.86
3.	2017-18	191287	57194	2.99
4.	2018-19	194793	57709	2.96
5.	2019-20	198299	54321	2.74
6.	2020-21	201805	58156	2.88
7.	2021-22	203535	58960	2.89
8.	2022-23	213590	57686	2.70
9.	2023-24	217520	60971	2.80
10.	2024-25	221460	62514	2.82
11.	2025-26	225000	63802	2.84

Source: Dte. of Health Services, GNCTD.

CHART 16.1

BED POPULATION RATIO (BEDS PER 1000 PERSONS) IN DELHI



12. At the end of financial year 2025-26, the total sanctioned bed capacity in Delhi increased to 63802 beds in 1294 Government and private medical institutions & hospitals from 62514 beds available as on 31.12.2025. Sanctioned beds capacity in Delhi increased particularly in Government of India, Other Autonomous Bodies and Private Nursing Homes. There is no change in Municipal Corporation of Delhi and New Delhi Municipal Council compared to last year. At the same time this has increased in Hospitals under H&FW Department, GNCTD from 14380 in 2024-25 to 15659 in 2025-26 (upto 31/12/2025). The percentage of beds in the Medical Institutions operated by Delhi Government, Government of India & Local bodies constituted as 24.54 percent, 15.94 percent, 6.03 percent respectively and beds in private nursing homes/ hospitals/voluntary organizations were recorded at 53.49 percent. In addition to the well-known government hospitals, Delhi has also showed the highest private sector participation in health sector. Besides new projects, Delhi Government has started remodeling/expansion of existing hospitals so as to add up new beds as per available FAR.

STATEMENT 16.3(a)

GOVT. MEDICAL FACILITIES IN DELHI

S. No.	Year	No. of Hospitals	No. of Beds	As on date	Source*
1	2020	40	12464	31-12-2020	DSH 2021
2	2021	40	13880	31-12-2021	DSH 2022
3	2022	40	13064	31-12-2022	DSH 2023
4	2023	40	14330	31-12-2023	DSH 2024
5	2024	40	14380	31-12-2024	DSH 2025
6	2025	40	15659	31-12-2025	H&FW Deptt.

* Delhi Statistical Handbook

It may be seen from statement that the number of beds increased from 14380 in 2024 to 15659 in 2025, reflecting an increase of 1279 beds about 8.89% with the same number of hospitals.

13. **Status of Hospitals being constructed by Govt. of NCT of Delhi –** At present, 11 hospitals are under construction. A list of projects showing details of number of beds, physical progress, target date of completion project, etc. are placed at Statement 16.4.

STATEMENT 16.4

DETAILS OF HOSPITALS WHICH ARE UNDER CONSTRUCTION

S. No.	Name of Hospital/ Projects	Details of ongoing Projects
1.	Hospital Project at Madipur	• Total bed strength is 691 beds. • Finishing work under progress. Decision about use of +2 additional floors is still pending so the work is held up since Feb-23. E&M services finalization is still unfrozen due to pending decision about these 2 floors. • Revised Preliminary Estimate (RPE) for Rs.472 Cr. submitted due to increase in scope of work resulting from incorrect estimation, +2 floors,

S. No.	Name of Hospital/ Projects	Details of ongoing Projects
		increase in GST rate, non-exclusion of cost escalation, some additional demand etc. as on 24.01.2023. A/A & E/S of RPE is still awaited. • MLCP Estimate submitted for Rs. 41.56 Cr. on 28.02.2024 for 2B+G+1 (Truncated capacity), for which sanction is still awaited. • Final approval for Furniture despite presentation is still awaited. Some dispute relating to Medical equipments supply has surfaced which is being ironed out. • Target date of completion is T0+12 months from sanction of the RPE & decision about the 2 top floors. Physical Progress: 82%
2.	Hospital Project at Siraspur	• Total bed strength is 1164 beds. • Finishing & Facade works are under progress. • Non Medical furniture estimate for Rs. 10 Cr. is under preparation to be submitted to DGHS, for sanction. • The work was held up since April-24 to Dec-24 due to Negligible (Rs. 1 cr.) budget. Fund received in Jan-25, work restarted. • Target date of completion: 30.06.2026 • Physical Progress: 77%.
3.	Hospital Project at Vikaspuri (Hastsal)	• Total bed strength is 691 beds. • Structure work completed E&M work under progress along with finishing items. Reorganization of hospital to accommodate laundry kitchen etc. is pending for finalization. • Furniture estimate not finalized due to non finalization of scope. • MLCP Estimate is under preparation likely to cost Rs. 55 Cr. The work was held up due to NIL

S. No.	Name of Hospital/ Projects	Details of ongoing Projects
		budget allotted since April-24 to Dec-24, in Jan-25 budget received, work restarted. • Target date of completion: 28.02.2026. • Physical progress 55%.
4.	Hospital Project at Jwalapuri (Nangloi)	• Total bed strength is 691 beds. • Finishing work under progress. Decision about use of +2 additional floors is still pending so the work is held up since Feb-23. E&M services finalization is still unfrozen due to pending decision about these 2 floors. • RPE for Rs.472 Cr. submitted due to increase in scope of work resulting from incorrect estimation, +2 floors, increase in GST rate, non-exclusion of cost escalation, some additional demand etc. as on 24.01.2023. A/A & E/S of RPE is still awaited. • MLCP Estimate submitted for Rs. 41.56 Cr. on 28.02.2024 for 2B+G+1 (Truncated capacity) for which sanction is awaited. Final approval for Furniture despite presentation is still awaited. • Some dispute relating to Medical equipments supply has surfaced which is being ironed out. • Target date of completion is T0+12 months from sanction of the RPE & decision about the 2 top floors. • Physical Progress: 80%
5.	Shalimar Bagh	• No. of beds: 1430 • The structural work of main building completed. Fire paint, internal partition walls, external facade, toilet work, electrical services & finishing works etc. are substantially complete. • Target date of completion: Work in standstill position since July-2023. Completion depends on sanction of revised estimate, i.e. 6 months time. • Physical progress: 63%
6.	Kirari	• No. of beds : 458

S. No.	Name of Hospital/ Projects	Details of ongoing Projects
		• The original foundation planned needed change to pile foundation due to liquefaction of soil during earthquake. • Moreover the DGHS has decided to change ICU Hospital into General Hospital for which the comprehensive requirements of General Hospital are still awaited. • Target date of completion: Work in stand-still position since July-2023. Completion depends on sanction of revised estimate, i.e. 6 months time and also finalization of the details of the hospital.
7.	Sultanpuri	• No. of beds: 525 • The Structural work of main building completed. Fire paint, internal dry partition wall, external facade, toilet work etc. are substantially complete. • Target date of completion: Work in standstill position since July-2023. Completion depends on sanction of revised estimate, i.e. 6 months time. • Physical progress : 63%
8.	Chacha Nehru Bal Chikitsalaya	• No. of beds: 610 • Main structural and other work largely complete. • Target date of completion: Work in standstill position since July-2023. Completion depends on sanction of revised estimate, i.e. 6 months time. • Physical progress : 52%
9.	GTB Hospital	• No. of beds: 1912 • Structure work 50% complete and work in part structure nearly complete. • Target date of completion: Work in standstill position since July-2023. Completion depends on sanction of revised estimate, i.e. 6 months time • Physical progress : 52%

S. No.	Name of Hospital/ Projects	Details of ongoing Projects
10.	Sarita Vihar	• No. of beds: 336 (Mother & Child Hospital, earlier Sarita Vihar Hospital was envisaged as 336 bedded ICU Hospital. • The Structural work of main building completed. The internal partition, fire paint, external facade, electrical services and finishing works almost completed. • The work in Ground Floor is on hold. • Target date of completion: Work in standstill position since July-2023. Completion depends on sanction of revised estimate, i.e. 6 months time. • Physical progress : 58%
11.	Raghubir Nagar	• No. of beds: 1565 • Erection of steel structure in Block-A, B, C & D completed. RCC slab in block-A completed / stand still in B & D-Block. • The work was delayed due to Covid-19 tree transplantation and cutting permission etc. • Target date of completion: Work in standstill position since July-2023. Completion depends on sanction of revised estimate, i.e. 6 months time. • Physical progress : 40%

Source: H&FW Department & DGHS, GNCTD

14. Besides above, Delhi Govt. has decided to remodel 13 existing Hospitals so as to enhance number of existing beds as per FAR norms. Around 5452 new beds will be added after completion of re-modeling of the hospitals. The status of 13 projects of remodeling is as follows:

STATEMENT 16.5

STATUS OF HOSPITALS TO BE RE-MODELED / EXPANDED

S. No	Name Of Hospital	P.E./ Cost (₹ In Crore)	Bed In Existence	Proposed New Beds	Total Beds After Remodeling / Expansion	Physical Progress (%)
1	LN Hospital (New Block)	533.91	0	1570	1570	65
2	SRHC (Cancer & Maternity Block)	244.35	200	565	765	24 (Phase-1 completed and work for phase-2 already started)
3	Dr. Baba Sahib Ambedkar	194.91	500	463	963	88
4	Bhagwan Mahavir	172.79	360	400	760	**Completed and Inaugurated on 17/09/2025**
5	Guru Govind Singh	172.03	100	472	572	**Completed and Inaugurated on 17/09/2025**
6	LBS – New Mother and Child Block	143.73	100	460	560	92
7	Sanjay Gandhi Memorial Hospital	117.78	300	362	662	**Completed and Inaugurated on 17/09/2025**

S. No	Name Of Hospital	P.E./ Cost (₹ In Crore)	Bed In Existence	Proposed New Beds	Total Beds After Remodeling / Expansion	Physical Progress (%)
8	Acharya Shree Bhikshu	94.38	100	270	370	**Completed and Inaugurated on 17/09/2025**
9	RTRM	86.31	100	270	370	95
10	Deep Chand Bandhu	69.36	284	200	484	1st Phase-Work completed on 02.12.24, 2nd phase uncertain
11	Aruna Asaf Ali	55.36	100	51	151	39 (work foreclosed, after completion of only OPD block)
12	Shree Dada Dev Shishu Maitri	53.44	106	175	281	**Completed and Inaugurated on 17/09/2025**
13	Lok Nayak Hospital (Causality Block)	58.71	190	194	384	44

Source: H&FW Department & DGHS, GNCTD.

15. **Medical Colleges of All Systems of Medicines Systems Delhi –** 20 medical colleges provide different under graduate courses of all systems (Allopathic, Ayurvedic, Unani & Homeopathy) in Delhi. Details of annual intake, year of establishment, course offered etc in respect of these colleges are placed at Statement 16.6

STATEMENT 16.6

LIST OF MEDICAL COLLEGES AND INTAKE CAPACITY

S. No.	Name of the Medical College/University	Course	Annual Intake
1.	Lady Harding Medical College & Associated Hospitals, New Delhi, (Delhi University)	UG (MBBS/B.Sc.) PG(MD/MS/MDS/DNB/FNB) SS (DM/M.Ch) B.Sc. MT (Radiography) DNB/FNB	240 179 10 10 4
2.	Ayurvedic & Unani Tibbia College & Hospital, Karol Bagh, New Delhi-110005 (University of Delhi)	BAMS BUMS MD (Unani) MD (Ayurveda)	75 75 13 18
3.	All India Institute of Medical Sciences (AIIMS), New Delhi, (Autonomous)	MBBS MD/MS Fellowship courses DM/M.Ch B.Sc (H) Nursing Course B.Sc (Post Basic) Nursing M.Sc./M. Biotech/ M.Sc Nursing course Allied and Health Care Courses	125+7 (Foreign National) Open=1106+107 (FN /Spons) Fellow=87(Gen)+40(Spons) DM=397 (Gen)+97(Spons) M.Ch =188(Gen)+42(Spons) 96+5 (FN) 30(open)+20(in service)+1(FN/Spons) 107(open)+10(Spons)+4(FN/Spons) B.Sc optometry=24+1(FN/Spons) B.Sc MTR = 11+1 (FN) B.Sc Dental Room Asstt.=2 per session B.Sc Dental Hygiene=2 per session B.Sc Operation Theatre Tech. =20

S. No.	Name of the Medical College/University	Course	Annual Intake
4.	Maulana Azad Medical College, University of Delhi	MBBS PG/FNB/DM/M.Ch Diploma in Derma, Ven and Lep	250 245 1
5.	Nehru Homeopathic Medical College & Hospital, Defence Colony, N. Delhi (University of Delhi)	BHMS MD (Homeopathic)	125 09
6.	Hamdard Institute of Medical Sciences & Research, (Jamia Hamdard University)	MBBS MD/MS M.Sc.	150 49 44
7.	University College of Medical Sciences, Dilshad Garden, Delhi (Attached to GTB, Delhi University)	MBBS B.Sc.(MT)Radiology M.Sc (R & MIT) MD/MS/MDS/DM Bachelor's in Medical Laboratory Science (course start from the session 2025-26)	170 30 06 216 30
8.	Maulana Azad Institute of Dental Sciences	BDS/ MDS	50 22
9.	Dr. B.R.Sur Homeopathic Medical College &Hospital, Moti Bagh, (IP University)	BHMS MD (Homeopathy)	63 06
10.	Vardhman Mahavir Medical College & Safdarjang Hospital, New Delhi (IP University)	MBBS MD/MS DM/M.Ch FNB/DNB B.Sc. MLT B.Sc MIT BPO Course	170 313 53 17 25 12 16
11.	Army College of Medical Science (IP University)	MBBS	100
12.	Faculty of Dentistry, Jamia Millia Islamia, Jamia Nagar, New	BDS	50

S. No.	Name of the Medical College/University	Course	Annual Intake
	Delhi —(Jamia Millia Islamia University)		
13.	ESIC Dental College & Hospital, Rohini, (IP University)	BDS	62
14.	Chaudhary Braham Prakas AyurvedicCharak Sansthan,Najafgarh,(IP University)	BAMS MD	125 51
15.	North Delhi Municipal Corporation Medical College & Hospital, (IP University)	MBBS	60
16.	School of Unani Medical Education & Research and Associated Majeeda Unani Hospital, (Jamia Hamdard University)	BUMS MD (Unani)	50 09
17.	Dr. BSA Medical College, Rohini (IP Universtiy)	MBBS	125
18.	ESI-PGMISR, Basaidarapur, (IP University)	MD/MS/DM (Pulmonary Medicine)	31
19.	ABVIMS and Dr. RML Hospital (IP University)	MBBS MD, DM, MS, MCh, DNB	100 241
20.	Chacha Nehru Bal Chikitsalaya (IP University)	MD Pediatrics M.Ch. pediatric surgery Pediatric Fellowship infectious disease Pediatric Anesthesia Fellowship Pediatric orthopedic Fellowship Pediatric Nephrology FNB	12 02 One candidate joined in Jan 2025 & left in June 2025 IAPA-02 & FNB 03 One candidate per year One candidate per year. Currently 02 fellows are working

Source: DGHS, GNCTD

16. The information regarding expenditure share of Medical & Public Health Sector (Schemes / Programmes) is presented in the Statement 16.7

STATEMENT 16.7

SCHEME/ PROGRAMME/PROJECT EXPENDITURE UNDER HEALTH AND FAMILY WELFARE BY DELHI GOVT.

(₹ in Crore)

S. No.	Year	Total Expenditure on all Schemes / Programmes / Projects	Expenditure on Health Schemes / Programmes/ Projects	% Expenditure
1.	2015-16	14960.54	1999.63	13.37
2.	2016-17	14355.03	2074.26	14.45
3.	2017-18	14400.99	1906.65	13.24
4.	2018-19	15672.03	2325.08	14.84
5.	2019-20	20307.02	2357.68	11.61
6.	2020-21	19258.65	3000.12	15.58
7.	2021-22	30530.77	4938.01	16.17
8.	2022-23	32647.60	4158.11	12.74
9.	2023-24	32913.86	3236.49	9.83
10.	2024-25	26989.60	2594.45	9.61

Source: Schemes/Programmes/Projects wise expenditure document.

17. It is apparent from above Statement that the expenditure on all Scheme/Programme/Projects of Delhi Government increased from ₹14960.54 Crore in 2015–16 to ₹26989.60 Crore in 2024–25, reflecting an overall increase of 76.39% during the period. However, expenditure on Health schemes\Programmed \Projects has increased by 29.75% from Rs. 1999.63 Crore in 2015-16 to Rs. 2594.45 Crore in 2024-25.

STATEMENT 16.7 (a)

PER CAPITA EXPENDITURE ON HEALTH BY GNCTD

(in ₹)

Year	Per Capita expenditure on Health
2015-16	1962.36
2016-17	2133.03
2017-18	2455.37
2018-19	2795.83
2019-20	2867.25
2020-21	3133.46
2021-22	4361.87
2022-23	3892.22
2023-24	3499.75

Source: Annual Financial Statements of GNCTD and Population projections by MoSPI as on 01.08.2023.

18. It is apparent from the above statement that per capita expenditure by Delhi Government on Health has increased from ₹1962.36 in 2015–16 to ₹3499.75 in 2023–24, reflecting an overall increase of 78.3% during the period.

19. Expenditure on Health with reference to GSDP - The expenditure on Health taking in to account expenditure incurred under Establishment & Scheme/ Programmes of Govt. of Delhi with reference to GSDP has decreased to 0.68 % in 2023-24 from 0.83% in 2022-23.

STATEMENT 16.7 (b)

EXPENDITURE ON HEALTH WITH REFERENCE TO GSDP

Year	GSDP at current prices (₹ in crore)	Total Exp. On Medical & Public Health (₹ in crore)	% of GSDP on Health
2015-16	550803.70	3634.28	0.66
2016-17	616085.06	4031.01	0.65
2017-18	677900.04	4733.21	0.70
2018-19	738389.43	5495.48	0.74
2019-20	792911.27	5744.54	0.72
2020-21	744277.00	6396.65	0.86
2021-22 (3rd RE)	870627.04	9073.13	1.04
2022-23 (2nd RE)	999749.39	8249.55	0.83
2023-24 (1st RE)	1112904.82	7555.27	0.68

Source: Annual Financial Statements of GNCTD and SDP 2024-25, DES, GNCTD.

Child & Maternal Health

20. Various significant indicators i.e. Vital Statistics on Birth Rate, Death Rate, Infant Mortality Rate (Neo-natal & Post-natal), U5MR and Fertility Rates etc are released by O/o Registrar General of India, Govt. of India based on findings through Civil Registration System and Sample Registration System. Following are Statement 16.8 - 16.11 reflecting statistics on vital events –

STATEMENT 16.8

SELECTED VITAL RATES OF DELHI

Year	Birth Rate (CRS)	Death Rate (CRS)	Average no. of events per day		Infant Mortality Rate				
			Births	Deaths	Neonatal Mortality Rate		Post - natal Mortality Rate	Infant Mortality Rate	
					(CRS)	(SRS)))	(CRS)	(CRS)	(SRS)
2015	20.30	6.76	1025	341	16	14	7	23	18
2016	20.16	7.53	1036	387	13	12	8	21	18
2017	19.13	7.10	1006	373	14	14	7	21	16
2018	18.55	7.44	994	399	15	10	8	24	13
2019	18.35	7.29	1002	398	16	8	8	24	11
2020	14.85	7.03	824	390	14	9	7	20	12
2021	13.13	8.28	745	470	15	8	8	24	12
2022	14.24	6.07	823	351	16	8	8	24	12
2023	14.66	6.16	863	363	14	9	9	24	14
2024	14.00	6.37	837	381	14	NA	8	22	14

Source: Annual Report on Registrations of Births and Deaths, DES, Delhi and Sample Registration System Statistical Report 2023, GoI.

STATEMENT 16.9

UNDER FIVE MORTALITY RATE IN DELHI AND INDIA

S. No.	Year	Delhi	India
1.	2015	20	43
2.	2016	22	39
3.	2017	21	37
4.	2018	19	36
5.	2019	13	35
6.	2020	14	32
7	2021	14	31
8	2022	15	30
9	2023	16	29
10	2024	NA	NA

Source: SRS 2023, O/o RGI, Govt. of India

STATEMENT 16.10

FERTILITY INDICATORS

Indicator	Age Group Year	2015	2016	2017	2018	2019	2020	2023
Age specific fertility rates	15-19	3.5	3.4	3.2	3.2	3.9	2.6	3.1
	20-24	139.6	81.5	84	74.1	52.4	64.8	59.2
	25-29	114.7	131.2	125.2	114.7	94.1	99.0	94.9
	30-34	52.9	71.6	63.2	65.7	80.6	69.8	55.6
	35-39	17.6	21.3	21.2	24.6	39.1	23.9	21.5
	40-44	4.7	8.9	6.2	8.0	17.7	11.2	8.1
	45-49	2.4	2.3	1.8	1.7	4.6	1.8	2.9
Total Fertility Rate		1.7	1.6	1.5	1.5	1.5	1.4	1.2

Source: SRS 2023, O/o RGI, Govt. of India.

STATEMENT 16.11

BIRTHS ATTENDED BY SKILLED HEALTH PERSONNEL & INSTITUTIONAL DELIVERY

Year	Proportion of births attended by skilled health personnel	Institutional Delivery (%)
2015	87.06	84.41
2016	87.98	86.74
2017	89.2	89.10
2018	90.37	90.28
2019	91.20	91.15
2020	92.84	91.94
2021	92.42	91.21
2022	94.83	94.02
2023	99.98	95.58
2024	96.74	96.09

Source: Annual Report on Registrations of Births and Deaths, DES, Delhi

21. Fertility Rate is on declining trend. Steady fall in this rate over the years certainly establishes that Delhi Government is working hard to achieve optimal levels as

far as maternal health is concerned. Sustainable Developmental Goals (SDG) 2030 of NMR as low as 12/1000 live births and U5MR as low as 25/1000 live births was achieved for Delhi in 2018 and is being sustained. Efforts to achieve single digit Infant Mortality Rate (IMR) are ongoing.

It is apparent from statement 16.11 that share of institutional deliveries and proportion of birth attended by skilled health personnel are at 96.09 and 96.74 per cent respectively in the year 2024.

22. Implementation of various activities for reduction of Maternal Mortality

- **Janani Suraksha Yojana (JSY):** The scheme aims to promote institutional delivery amongst Pregnant women (PW) belonging to Scheduled Caste, Scheduled Tribe and BPL families. PW are incentivized for undergoing institutional delivery in urban and rural area @₹600/- and ₹700/- respectively. BPL women are also incentivized with ₹500/- in case of home delivery. All the health facilities enroll the eligible JSY beneficiaries i.e. PW belonging to SC/ST/BPL families during antenatal visits and then register them on reproductive and Child Health (RCH) portal and fetch the Aadhaar linked bank account details of the client and necessary documents and she is given the JSY payment after delivery. The mode of payment is Direct Benefit Transfer (DBT) into the account of beneficiary. A total of 5200 beneficiaries were provided benefits under this scheme during 2024-25.

- **Janani Shishu Suraksha Karyakarm (JSSK)**: It aims to provide free and cashless services to all pregnant women reporting in all Public Health institutions irrespective of any caste or economic status for normal deliveries and caesarean operations, for antenatal & postnatal complications and to sick infants (from birth to 1 year of age). The scheme aims to mitigate the burden of out of pocket expenses incurred by families of pregnant women and sick infants. Under the scheme no cash benefit is directly provided to beneficiary. Delivery points are provided fund under JSSK to enable them to provide free services to pregnant women and sick infants to fill the service/logistic gap i.e. Diet, Drugs and Consumables, Diagnostics, Blood Transfusion, Transport & User Charges levied by the facility, if any. A total number of 216584 (198918- Pregnant women + 17666 sick infants) were provided benefits under this scheme during 2024-25.

- **Pradhan Mantri Surakshit Matritva Abhiyan (PMSMA):** Under this Abhiyan, quality antenatal care with full package of investigations is provided to pregnant woman on 9th of every month at all the Govt. health facilities. This aims to improve antenatal care, identifying high risk pregnant women so that appropriate treatment is initiated without delay and IMR and Maternal mortality

Ratio is reduced. Due list of all missed out/dropped out pregnant woman in 2nd & 3rd trimester from the community is prepared by ASHAs before 9th of every month so that checkup at govt. health facilities is ensured.

- **Kilkari Implementation**- Time appropriate voice messages on various topics like- antenatal checkup, nutrition, personal hygiene and vaccination etc. are being sent to PW beneficiaries on their Mobile phones once they are enrolled in RCH portal on registration so as to motivate them to utilize services. Messages are sent from 4th month of pregnancy onwards to till 1 year of age of the baby. A total unique beneficiary registered under Kilkari till the end of FY 2024-25: 2,81,634, where as total 1,49,296 beneficiaries completed the Listenership during FY 2024-25.

- **Laqshya Implementation** (Labour Room & Quality Improvement Initiative)- Ministry of Health & Family Welfare, Government of India launched an ambitious program LaQshya on 11th December 2017 with following objectives:

  (i) Reduce maternal and newborn morbidity and mortality.
  (ii) Improve quality of care during delivery and immediate post-partum period.
  (iii) Enhance satisfaction of beneficiaries, positive birthing experience and provide Respectful Maternity Care (RMC) to all pregnant women attending public health facilities.

  Under this programme following activities are included:

  - Standardization of Labor Rooms and maternity OTs.
  - Upgrading of knowledge and skills of labor room staff on strategies on Care around Birth (CAB).
  - DAKSH/ DAKSHTA trainings at National Skill Labs are being carried out to enhance the skill of staff working in maternity services.
  - Focus on Respectful maternal care and allowing Birth Companion at delivery points is another initiative being carried out.
  - In Delhi Eleven Public Health facilities (Pt. Madan Mohan Malviya, Sanjay Gandhi Memorial, Guru Gobind Singh Govt. Hospital, Lal Bahadur Shastri, Acharya Shree Bhikshu, Shri Dada Dev MatriAvumShishuChikitsalya, DeenDayal Upadhyay Hospitals) are LaQshya certified as of now (2024-25).

- **Maternal Death Surveillance and Response:** All maternal deaths occurring in state are reviewed at facility, district and State level so that gaps are identified and corrective actions are undertaken to avoid preventable maternal deaths. Deaths are reported on a Maternal and Perinatal, Child Death Surveillance and Response (MPCDSR) portal and facility and

community level reviews are conducted. A total of 557 maternal deaths were reviewed (90%) out of 621 maternal deaths reports during 2024-25.

23. Essential Immunization:

Universal Immunization Programme (UIP) is one of the largest public health interventions, providing protection to beneficiaries which primarily includes 0-5 years' children and pregnant women against 13 Vaccine Preventable Diseases (VPDs), thereby contributing towards marked reduction in morbidity and mortality. The annual cohort of about 3 lakh infants and 3.25 lakh pregnant women are expected to be benefitted by the program. The services are provided in about 600 public health facilities with Govt. dispensaries providing it bi-weekly and govt. hospitals on all working days. In addition, about 60-70% of immunization coverage is achieved through outreach session sites. The programme aims to achieve 100% Full Immunization Coverage of eligible children.

To achieve and maintain 100% vaccination coverage and protection, campaigns like Special Immunization Campaigns etc. are observed with the intent to reach all unvaccinated and partially vaccinated beneficiaries and complete their due vaccinations, through augmented Immunization Services in fixed and outreach sessions.

100% of eligible children received Full Immunization coverage (all due vaccines given by the age of 1 year). In absolute numbers 302962 children have been fully immunized during 2024-25.

The State is also working aggressively towards Measles-Rubella (MR) Elimination Goal. MCV 1 & MCV 2 coverage is around 100% and 90% respectively as per HMIS data till October 2025.

The process of digitalization of immunization services has been completed by up scaling of U-WIN portal, a portal created by MoHFW on lines of CoWIN with the aim to digitalize the vaccination records of all catered beneficiaries. The portal has now been universalized in all the 11 districts.

Further, vaccines and logistics management, along with electronic monitoring of the Temperature of all cold chain equipment via Temperature Loggers is also being routinely done under the e-VIN Initiative. E-VIN offers innovative use of technology for temperature monitoring (via temperature loggers in cold chain equipment), system strengthening, improving program Governance and real time visibility of stock status of vaccines and logistics.

In addition to implementation of UIP, the section is also implementing Adverse Events following Immunization (AEFI) Surveillance and Causality Assessment

and VPD Surveillance. Regular review of the surveillance is being done at state and district level. Quality management in AEFI Surveillance has been rolled out in New Delhi & North East Districts. All the districts are reporting AEFI cases. 'Fever with rash' surveillance has been strengthened with all the districts reporting more than two Non-MeaslesNon-Rubella Discard rates, a crucial indicator to be followed for having a sensitive Measles Rubella Surveillance.

24. Child Health Services/Programme:

a. **Strengthening of Facility Based Newborn Care (FBNC) –** To cater to sick neonates (from birth to 28 days of life), Delhi has 34 FBNCs (SNCU/ NICUs) in public hospitals providing intensive & resuscitative care to the new born babies who are sick.

b. **New Born Care Corners (NBCCs**) at all 60 delivery points within the labor room and OTs in the State ensuring essential New born care at all the delivery points.

c. **Kangaroo Mother Care (KMC):-** Kangaroo mother care has been started in 34 Units in the first instance and will further be extended to all delivery points.

d. **Nutritional Rehabilitation Center (NRC) –**Nutritional Rehabilitation Centres (NRC) are functional in 05 hospitals to take care of severely malnourished children (SAM).1363 SAM patients were treated in NRCs of Delhi in the FY 2024-25.

e. **Stop Diarrhoea Campaign- 2025** (previously known as Intensified Diarrhoea Control Fortnight (IDCF) campaign which was renamed in year 2024).Intensified Diarrhoea Control Fortnight (IDCF) campaign was initiated in 2014, with an aim of achieving improved coverage of essential life- saving commodity of ORS, ZINC dispersible tablets and practice of appropriate child feeding practices during diarrhoea. Delhi observed "**Stop Diarrhoea Campaign 2025"** in June & July 2025. Activities were carried out from 2nd June to 31st July 2025, to sensitize and bring awareness among the care givers, children & masses to identify and initiate timely treatment in case of diarrhoea to prevent severe dehydration and fatality. Convergence activities for various stakeholders/ departments like WCD, Education, DJB etc. across the State were done. Delhi also carried out the activities like ORS preparation Demonstration in UHNDs and focused group discussions in all districts. ASHAs & AWW meetings were done. Health Talks were given in the facilities and communities during this campaign. Hand wash activities were done in schools.

No. of Districts conducted childhood diarrhea prevention and management activities in 2024/ Total No. of Districts	13/13
No. of children provided with ORS (ORS prepositioning)	1250346
No. of children reported with diarrhea during the activity	27825
No. of children with diarrhea provided with ORS	27825
No. of children with diarrhea provided Zinc for 14 days	27789
No. of children detected with danger signs and referred by ASHA to the facilities	278

f. **Mother Absolute Affection Programme (MAA) –**MAA Programme focuses on building an enabling environment for breastfeeding through awareness generation activities, targeting pregnant and lactating mothers, family members, and society in order to promote optimal breastfeeding practices as an important intervention for child survival and development. To reinforce lactation support services at public health facilities through trained healthcare providers and through skilled community health workers. In Delhi, MAA was implemented at 60 public health delivery points. Total of 567077 mothers (including 263242 pregnant women and 309438 lactating mothers) participated in 65336 mothers' meetings conducted by ASHAs in the community, in F.Y. 2024-25. (Source: Annual MAA report 2024-25). The key deliverable under Early initiation of breastfeeding (within an hour of birth) rate was 80% in F.Y. 2024-25. (Source: HMIS Portal).

g. **SAANS (Social Awareness & Action to Neutralize Pneumonia Successfully):**

Childhood pneumonia continues to be the topmost infectious killer among under-five children, contributing to 16.3 per cent of under-five deaths in India. (SAANS 2025-26- Guidance Note). The **SAANS initiative** was institutionalized to bring visibility and sustainability to the Pneumonia program, with the goal to intensify action for reducing mortality due to childhood Pneumonia in India. With an aim to reduce child morbidity and mortality due to pneumonia the programme runs in campaign mode from 12th November' till 28th February.

- The programme enables care givers to identify and recognize the early signs and symptoms, and seek care immediately for on-time referral and treatment of Pneumonia. It also ensures availability of essential drug sat the facility and FLW level.

- Sensitization on SAANS has also been done for all district officers. SAANS was implemented successfully for treatment and timely referral of Pneumonia cases to health care facilities along with IEC done at District / facility / community level.

- Guidelines of treatment algorithm disseminated to all health facilities for Display and implementation of the same are available with all facilities.

- A total of **534157** homes were visited where counseling was done using MCP cards, **416737** under five children were assessed by ASHAs for signs and symptoms, **80925** under five children with Pneumonia were treated in OPDs and **5261** under five children with Severe Pneumonia were treated by admission during the three and a half months long SAANS campaign in F.Y. 2024-25.

h. **Child Death Review -** CDR has been launched in Delhi in all Districts to find out the gaps in child health delivery mechanisms and taking corrective actions. Delhi has a relatively low Child mortality. The aim is to decrease it to minimum possible. District level Task Force for Child Death Review has been notified and meetings are being held. State level task force (STLF) meeting for Child Death Review under chairmanship of Secretary (H&FW) was conducted on 04/07/2025. A total of 6984 deaths were reported were during 2024-25. (Source: State CDR report 2024-25).

i. **Newborn Screening- Mission NEEV Project:** Comprehensive Newborn Screening Programme (Mission NEEV) is aimed at holistic evaluation of all newborns at various institutions in the Delhi State as part of activities under Rashtriya Bal Suraksha Karyakram (RBSK). Total 137539 newborns were screened under NEEV, out of 150045 live births as per Mission NEEV Report in F.Y. 2024-25.

j. **District Early Interventions Centers (DEIC):**

- Developmental impairment is a common problem in children that occurs in approximately 10% of the childhood population and represents a rapidly growing segment in India.
- The importance of early detection, intervention and rehabilitation can never be over-emphasized and require an interdisciplinary approach of a multi-disciplinary team.

- With this objective in mind of DEIC are being setup to provide referral support to children detected with health conditions during health screening, primarily for children upto 6 years of age where trained professionals from different disciplines working in the intervention setting are available under one roof.

- To reduce 4Ds (Defects, Deficiencies, Diseases, Developmental Delays

including Disabilities) DEICs are functional in 3 centers at Swami Dayanand Hospital, Guru Gobind Singh Govt. Hospital and Chacha Nehru Bal Chikitsalya, with the aim of early detection, minimizing disability and providing social and vocational rehabilitation with a family central approached at the community level.

- **Center of Excellence- Early Intervention Center- Lok Nayak Hospital (COE-EIC-LNH): -** COE-EIC at LN Hospital is operational since October 2021, taking care of children identified to be suffering from 4Ds (Defects, Deficiencies, Diseases, Developmental Delays & Disabilities) to facilitate intervention at DEIC. A total of 14153 children were managed in COE-EIC-LNH in F.Y. 2024-25.

- Total 26519 children were managed in 2 DEICs at SDNH, GGSGH and one COE-EIC-LNH in F.Y.2024-25.

k. Lactation Management Unit (LMUs):

- Exclusive breastfeeding has the potential to prevent 13 percent of under-five deaths.

- In the second instance, when the baby is unable to suck the breast directly due to prematurity, weakness, sickness or any other reason, the mother's own milk can be expressed, collected, stored and then fed to the baby as per requirement.

- Taking cognizance of all these evidences, 04 LMUs were functional in F.Y. 2024-25 at Dr. Baba Saheb Ambedkar, CNBC, Swami Dayanand and Lok Nayak Hospitals. 29368 mothers received Lactation Counseling; 7775 mothers used LMU facility for Expression of breastmilk; 10244 newborns/ infants received expressed breastmilk from own mothers using LMU facility at 4 LMUs in Delhi in F.Y. 2024-25.One new LMU at Bhagwan Mahavir Hospital has been made operational in June 2025.

l. Musqan Certification of Pediatric OPD, Ward, SNCU/NICU & NRC:-

Quality Assurance Certification under MusQan initiative for Pediatric OPD/Ward SNCU/NICU & NRC. 10 Hospitals in Delhi have achieved National Certification under MusQan (as on 13/11/2025) viz. Dr. Baba Saheb Ambedkar Hospital, Sanjay Gandhi Memorial Hospital, Lal Bahadur Shastri Hospital, Chacha Nehru Bal Chikitsalya, Guru Gobind Singh Govt. Hospital, Acharya Shree Bhikshu Hospital, DeenDayal Upadhyay Hospital, Satyawadi Raja Harish Chandra Hospital, BabuJagjivan Ram Memorial Hospital and Bhagwan Mahavir Hospital. 3 Hospitals are State Certified- Pt.

Madan Mohan Malviya Hospital, Lok Nayak Hospital and Swami Dayanand Hospital. (Source: DSHM Website).

25. Adolescent Health Services:

Adolescent Health Programming in the State of Delhi.

The Directorate of Family Welfare (DFW), Government of N.C.T of Delhi implemented the MoHFW,GoI flagship Program- Rashtriya Kishor Karyakram (RKSY) in the year 2014.The programme aims to ensure holistic development of adolescents, envisions enabling all adolscents to realize their full potential by making informed and responsible decisions related to their health and well-being.

DFW in joint collaboration with Department of Education (DoE) also implemented another flagship programme- Ayushman Bharat School Health and Wellness Programme(SHWP) in the year 2020. The programme envisage to facilitate an integrated approach to health programming and more effective learning at school to strength the preventive and promotive aspects through health promotion activities for school going children. The Program components, implemented under National Health mission are described below:

Ayushman Bharat School Health & Wellness Program (SHWP)

The flagship program- Ayushman Bharat School Health & Wellness Program (SHWP) was jointly implemented by Directorate of Family Welfare and Directorate of Education and, GNCTD in the year 2020 to foster growth, development and educational achievement of school going children. Two teachers in each Govt. and Govt-Aided Schools (DoE), preferably one male and one female, have been selected as “Health and Wellness Ambassadors” (HWAs), who after receiving the initial four-day modular training covering eleven thematic areas, transact health promotion and disease prevention information in the form of weekly interactive sessions. The SHWP is currently being implemented in 11 out of 16 districts (as per DoE bifurcation) of the state.

Weekly Iron and Folic Acid Supplementation (WIFS)

Weekly Iron Folic Acid Supplementation is carried out in Govt & Govt-Aided Schools and in Anganwadi Centers (AWCs) for out of school adolescent girls to meet the challenge of high prevalence and severity of anaemia amongst adolescent boys and girls (10-19 years). These school going adolescent boys and girls in class 6th to 12th and out of school adolescent girls in AWCs are

provided supervised weekly iron and folic acid supplements. 2,26,403 was the average monthly coverage of IFA Blue tablets in Govt. and Govt. aided schools among class 6th to 12th girls,1,82,930 among class 6th to 12th boys for F.Y. 2024-25(source HMIS portal).

AFHC /DISHA Clinics –Delhi Initiative for Safeguarding Health of Adolescents

Adolescent Friendly Health Clinics/Delhi Initiative for Safeguarding Health of Adolescents (DISHA) are established in DGDs, Polyclinics, Seed PUHCs, Maternity Homes and Hospital across 11 district of the state. The objective of establishing DISHA clinics is to provide education, clinical and counseling services to the adolescents aged 10-19 years in a friendly environmental, adopting a non-judgmental approach. A total of 108 DISHA clinics have been operationalized in the state till March, 2025. As regard to the progress, a total of 280585 adolescents were registered, 258015 received clinical services,149758 received counseling services during 2024-25(Source: HMIS Portal).

Adolescent Health & Wellness Day (AHWD)

Adolescent Health & Wellness Day (AHWDs) are organized every quarter in school and community setting of adolescent boys and girls aged 10-19 years. The objective of organized AHWDs is to sensitize adolescents on various health issues and address the associated myths and misconceptions. Various activities organized under the quarterly AHWDs are health check-up, interactive sessions/ health talks, essay writing competition, slogan writing competition, quiz competition, nukkadnatak etc. **In FY 2024-25, 473 AH&WDs were celebrated.**

“Udaan” – Menstrual Hygiene Scheme (MHS)

“UDAAN” scheme has been rolled out with an aim to improve accessibility of adolescent girls (non-school going) to sanitary napkins and make them more aware of Menstrual Hygiene Management. Under the scheme a pack of 10 sanitary napkins is provided every month completely “Free of Cost” to Out of School Adolescent Girls (OOSAG) and 10- 19 years age group girls of MCD schools.78 lacs sanitary napkins (pieces) were procured in December 2024 and 43 lacs sanitary napkins have been distributed till March, 2025.

A study to understand the menstrual hygiene practices among adolescent girls in rural and urban resettlement areas of Delhi was conducted by Maulana Azad

Medical College (supported under National Health Mission). The report has been disseminated and the recommendations have been adopted by the State.

National Deworming Day (NDD)

Deworming is a scientifically proven method of mitigation of intestinal worms and is a key intervention to curb the issue of under-nutrition and anaemia. Following World Health Organization (WHO) guidelines of Page 1 of 16 preventive chemotherapy against Soil Transmitted Helminthes (STH), DFW consistently implemented the bi annual Ntional Deworming Day (NDD) campaign under NHM across all 11 districts of the state since 2017. Under the campaign, children and adolescents in the age group of 1-19 years are administered age appropriate dose of chewable Tab Albendazole, implemented in a fixed approach through all Govt. and Govt Aided Schools, Private Schools and Anganwadi Centres. In FY 2024-25, DFW organized NDD campaigns in all govt. and govt-aided schools, private schools and Anganwadi Centres across the state during April 2024, followed by a one-day Mop-up round held on Jul 15, 2024 for the left-out children, administering Tab Albendazole to approx. 41.02 lakhs children. A total of 39.49 lakh children were covered during December, 2024 NDD round (Against a target of 48 lakh i.e. coverage of 82.2%).

26. Anemia Mukt Bharat (AMB) Program

Prophylactic IFA Supplementation in all six age groups viz. Children (6 months-5 years), Children (5-9 years), Adolescents (10-19 years), pregnant women, lactating women and women of reproductive age group through ASHA workers, ANMs, Anganwadi centers and schools.

Prophylactic IFA Supplementation in Children

a) In Community

- **The prevalence of anemia among under five children as per NFHS-5 is 69.2%.** To address this, IFA supplementation initiative for children in 6-59 months age group has been rolled out as part of anemia Mukt Bharat program of Govt. of India through ASHA workers.
- For out of school children in 5-9 years age group, IFA Supplementation is provided in the community through Anganwadi centers.

b) In Schools

- Weekly IFA supplements program for all children (6 months to 9 years) has been rolled out in the schools & the same is being strengthened with an aim to achieve universal coverage.
- IFA supplementation initiative for children in 5-9 years age group has also been rolled out through MCW centers in MCD primary schools & through Directorate of Education primary & Govt. aided schools. Tablet IFA pink is provided to children once a week on Wednesday.
- Further In schools, syrup IFA is provided to children (6-59 months) 1 ml biweekly.

T4 Anemia Camps:

- Districts are conducting T4 (Test, Treat, Talk & Track) anemia camps as per guidelines.
- Point of care treatment & testing by digital hemoglobinometers.

T4 Anemia Rooms:

- To cater pregnant females, T4 anemia rooms are operational in all govt. hospitals & maternity homes in Delhi & T4 anemia corners in dispensaries.

Training under AMB:

- For capacity building of health functionaries, state level ToT for AMB was conducted on 29th& 30thAugust, 2024.
- Cascading of AMB training at the district level.
- Promoting e-training & optimum use of AMB dashboard portal.
- Time to time orientation and sensitization training of all the service providers including AWWs and teachers for strengthening of the AMB programme and utilizing all the available resources.

Other measure to reduce prevalence of anemia:

- Promoting iron fortified diets.
- All the preventable causes contributing to anemia apart from iron deficiency are monitored.
- Availability of lab facilities for thalassemia diagnosis and complete anemia profile in government hospitals.
- All mild and moderate anemic cases are treated diligently so as not to land up in severe anemias.
- Timely referral to designated facilities for severe and refractory anemias.
- Ensuring proper reporting in HMIS formats.
- Robust demand and supply chain maintenance of IFA (Syp., tabs, injectable) for WIFS and therapeutic doses.

27. Family Welfare Programmes

Family Planning Programme – Delhi

The Family Planning Programme aims to ensure that all individuals and couples in Delhi are able to anticipate and achieve their desired number of children through healthy spacing and timing of births. This is enabled by ensuring informed choice and access to a full range of contraceptive methods as a matter of right. The programme ultimately seeks to improve the health and well-being of mothers and children through comprehensive, multi-pronged interventions.

Multiple schemes are implemented under the Family Planning Programme throughout the year. In addition, two major campaigns are observed annually:

- **World Population Day Campaign**: 27th June to 24th July.
- **Vasectomy Fortnight**: 21st November to 4th December.

Self-Care Kit (SCK)

The Self-Care Kit is an innovative initiative aimed at strengthening self-care and ensuring continuity of family planning services. The kit is provided in a pick-away mode and includes:

- Condoms
- Emergency Contraceptive Pills (ECPs)
- Pregnancy Test Kits (PTKs)

NayiPehl Kit (NPK)

The NayiPehl Kit is provided to newly married couples to promote awareness about delaying the first pregnancy. The kit includes:

- Samples of contraceptives
- IEC handbills
- Utility items for couples

Introduction of New Contraceptive Methods

The State rolled out two new contraceptive methods—**Sub-dermal Single Rod Implants (SDI)** and **Subcutaneous MPA (S/C-MPA)** under the Antara Programme in six districts. These methods were included in the national contraceptive basket by the Government of India in 2023.

At present, all **11 districts** are providing SDI insertion services, and S/C-MPA is available at **Medical Colleges, District Hospitals, and Sub-District**

Hospitals. Most recently, in **November 2025**, **Maternity Homes** were also included for SDI insertion following the training of service providers.

An overview of the data related to Family Planning programme being implemented in Delhi is given in below table 16.12.

STATEMENT 16.12

FAMILY WELFARE PROGRAMMES

S. No.	Details	2015-16	2016-17	2017-18	2018-19	2019-20	2020-21	2021-22	2022-23	2023-24	2024-25
1.	Family Welfare Centers including PP units	FP centers are now in function in hospitals		NR	41	41	41	41	44	44	44
2.	Insertion of Intrauterine Contraceptive Device	80293	84370	78459	75403	94572	64685	80818	100895	105250	100137
3.	Sterilizations	17383	18869	17004	17531	18392	7884	11655	11412	15400	14536
	a. Males	901	1323	491	499	740	78	314	375	339	303
	b. Females	16482	17546	16513	17032	17652	7806	11341	11037	15061	14243
4.	Oral Pills(Mala-N)	185499	199092	189107	173691	162564	134613	167867	185279	178720	158811
5.	Condoms ('000)	5709	6880	5726	5625	5388	4206	5467	6055	5360	5030
6	Inj MPA			5088	20709	34192	19483	22595	40925	46333	43682
7	Centchroman			6808	28209	62597	75488	97273	117404	118148	126673
8.	Sub Dermal Implant	-	-	-	-	-	-	-	-	558	1810

Source: HMIS Portal, MoHFW, GoI.

28. Vector Borne diseases like Dengue, Malaria & Chikungunya

28.1 Status of Chikungunya:

- During the current year, 168 Chikungunya cases were reported in Delhi till 06.12.2025.
- No death has been reported due to Chikungunya in 2025.

28.2 Status of Dengue:

- During the current year, 1399 Dengue cases reported in Delhi till 06.12.2025.
- Total 02 Dengue deaths have been reported till 06.12.2025 during current year.

28.3 **Status of Malaria:**

- During the current year, 719 Malaria cases were reported in Delhi till 06.12.2025.
- No death has been reported due to Malaria in 2025.

STATEMENT 16.13

DETAILS OF VECTOR BORNE DISEASES

Year	Chikungunya cases	Chikungunya deaths	Dengue cases	Dengue deaths	Malaria cases	Malaria deaths
2018	165	0	2798	4	473	0
2019	293	0	2036	2	713	0
2020	111	0	1072	1	228	1
2021	89	0	9613	23	167	0
2022	48	0	4469	9	263	1
2023	65	0	9266	19	426	0
2024	267	0	6391	11	792	0
2025*	168	0	1399	2	719	0

*Source: *AAs per MCD (Nodal agency for reporting of Vector Borne Diseases) report as on 06.12.2025.*

28.4. It is evident from above statement that since 2018 no deaths have reported due to Chikungunya and only two deaths have been reported due to Malaria in 2020 and 2022. This has been happened due to number of initiatives taken by Local Bodies and Govt. of NCT of Delhi under State Health Mission. There is variation in the Dengue cases and deaths year to year since 2018.

IEC (Publicity) campaign for prevention and control of Dengue & other VBDs through radio and print advertisements was undertaken during October & November 2025, In this context:-

- 4 Half page coloured advertisements were issued at fortnightly interval during October & November in 10 different leading newspapers (4 Hindi, 2 English, 2 Urdu & 2 Punjabi).
- Displaying banners and IEC material in government hospitals and other health facilities.
- Broadcasting of recorded Audio messages through the public address systems of DMRC at Metro Stations.
- IEC activities at district level to create awareness in the community during transmission season:-

- Improved surveillance of VBD's resulted in better reporting from Govt. & Pvt. health facilities.
- Daily reporting and monitoring of VBD cases on IHIP(Integrated Health Information Platform) an IT enabled near real time portal from Govt. and Private health facilities.

29. HIV / AIDS

29.1 The Delhi State AIDS Control Society, an autonomous society of Delhi Government is implementing the National AIDS Control Programme in Delhi with the aim to prevent and control HIV transmission and to strengthen state capacity to respond to the long term challenge posed by epidemic. Estimated adult HIV prevalence (15-49 yr) is 0.30% with 59079 persons living with HIV, 2590 New HIV Infections per year and about 927 HIV related deaths in Delhi in 2024-25.

29.2 **826275** clients (**197900** pregnant women and **628375** general clients) were screened for HIV infection during 1st April 2025 to 31st October 2025 at different facilities/centres under Delhi State AIDS Control Society. Altogether **3274** HIV infections were detected whereas **3034** general clients (Non-pregnant) and **240** infections amongst pregnant women (**113** New and **127** Known HIV positive) were detected.

29.3 43035 persons living with HIV (PLHIV) are under active care at 12 ART Centres in Delhi as on 31st October, 2025, out of which 2934 were newly registered during FY 2025-26.

29.4 Govt. of NCT of Delhi provides Financial Assistance to PLHIVS/CLHIVS to improve treatment adherence for eligible persons receiving Anti Retroviral Treatment at ART centres in Delhi. The scheme is being implemented through Delhi State AIDS Control Society since 2012. A total of 7670 beneficiaries have been enrolled in the scheme cumulatively and out of them 6878 beneficiaries are active on PFMS and getting benefits of the financial assistance scheme as on 31st October 2025.

30. Performance of Delhi State RNTCP/NTEP

30.1 Tuberculosis is the most pressing health problem in our country as it traps people in a vicious cycle of poverty and disease, inhibiting the economic and social growth of the community at large. Tuberculosis still remains a major public health problem in Delhi. 40% of our population in Delhi is infected with TB germs and is vulnerable to the disease in case their body resistance is weakened.

30.2 Delhi has been implementing the Revised National TB Control Programme with Directly Observed Therapy Short course DOTS strategy since 1997. Delhi State RNTCP has been merged with NRHM (DSHM) w.e.f. 01.04.2013. The Delhi State NTEP is being implemented through a decentralized flexible mode through 24 Chest Clinics equivalent to District Tuberculosis Centre (DTC). Out of 24 Chest Clinics, MCD are running 12, GNCTD-10, NDMC -1, GoI-1 chest clinics respectively. The NGOs and Private Medical Practitioners are participating in the implementation of the RNTCP in a big way.

30.3 NTEP Delhi integration with Urban Health Mission involving multiple stakeholders (NDMC, MCD, NGO, GOI and Delhi Govt.). Delhi Government dispensary DEO, MOs/ESIC MOs & ASHA workers have been trained in RNTCP at State level.

30.4 Framework of integration of National Tuberculosis Elimination Programme (NTEP) services with Mohalla Committees in the State is in place.

30.5 The diagnosis and treatment for drug sensitive TB & drug resistance TB is provided free to the patients by all the partners under the NTEP.

30.6 TB Control Services for the homeless population in 200 Night Shelters. The night shelters staff is trained as Community DOT Provider, and for collection and transportation of sputum samples.

30.7 Mobile TB Clinic for pavement dwellers/homeless by NGO DTBA. Diabetic screening for all TB patients initiated at all the Chest Clinics in Delhi from January 2015. Counselling services by NGO's to promote adherence to Multidrug-Resistant Tuberculosis (MDR-TB).

30.8 Quality TB diagnosis for pediatric cases by upfront testing of presumptive TB cases among the homeless in 'Asha kiran'. NTEP Services in Tihar Jail is being done by NTEP TB Health Visitor (TBHV) and Lab Technicians (LT's).

30.9 Intensified TB screening among the floating population – Truck Drivers, slums/unauthorized colonies along with night shelters, pavement dwellers, prisons etc.

30.10 Nutrition support & Counselling services to MDR TB patients by NGOs like The UNION, RK Mission, DFIT, TB Alert, GLRA.

30.11 The NTCP has 190 diagnostic centres and 551 treatment centres located all over Delhi. LPA, Liquid Culture & Solid Culture facilities are available at 3 Culture and Drug sensitivity Testing (C&DST) Labs to diagnose Drug Resistance TB. Implementation of Programmatic Management of Drug-Resistance Tuberculosis (PMDT) services for Drug-resistant TB (DRTB) Patients is done through 4 Nodal DRTB Centres& 24 District DRTB Centres. 49 Cartridge- Based Nucleic Acid Amplification Test (CBNAAT) Machines (GenXpert) and 87 TrueNat Machines in 24 Chest Clinics/Medical Colleges for Rapid TB Diagnosis are in place. The Rapid TB Diagnostic Services through CBNAAT/TrueNat are available free to the all the patients (Specially for pediatric group, HIV Positive patients & to diagnose Drug Resistance TB) besides Universal Drug sensitivity Testing (DST) for all TB patients for initiation of therapy.Almost all NAAT sites (CBNAAT 49 and TrueNat 87) in Delhi started working in Double-shifts since 01.06.25, enhancing the testing capacity of Delhi state.

- 12 Pathodetect machines are already in place (4 by Delhi Govt and 8 by ICMR) and 4 more will be provided by GoI, enhancing DRTB diagnostic capacity.
- 34 Hand Held X Ray Machines are available across 11 Revenue District for Chest X ray screening.

30.12 Roll out of daily regimen across the State w.e.f. 1st Nov. 2017.

30.13 Delhi has been the first State in the country to have full coverage with DOTS (WHO recommended treatment strategy for TB) since 1997 and with DOTS–PLUS (treatment schedule for Drug resistant TB) since 2008. Roll out of Baseline SLDST across the State w.e.f. Q2 2014. Expanded DST for 2nd Line drugs across the State w.e.f April, 2016. Pan State Roll out of Bedaquiline -new drug in MDR TB treatment in 2016.

30.14 Shorter Regimen BPaLM for DRTB Patients is being implemented in Delhi since Dec 2024.

30.15 NIKSHAY is an online web based system for live reporting of TB patients for surveillance and monitoring under public & private sector.

30.16 A Vision for TB Free Nation by 2025 with the goal of zero death and end the Global TB Epidemic.

30.17 Govt. of India has changed the name of the programme from Revised National Tuberculosis Control Programme (RNTCP) to National Tuberculosis Elimination Programme (NTEP) w.e.f 1st Jan 2020.

30.18 Every year World TB day is celebrated on 24th March. Accordingly, TB awareness activities like community Meetings, Nukad Nataks, School Health awareness activities like Painting competition on TB/Essay competition/ speech competition on TB etc, Street Plays, Road, Rallies to create awareness among the Public, IEC material distribution in OPDs of Hospitals/Dispensaries/Mohalla Clinics, CMEs involving Hospital Doctors, Private Care Providers, Nursing Staff, Paintings on Wall depicting Health messages, awareness campaigns in Metro Stations etc. were conducted across the Delhi State starting one week before and one week after the World TB day.

30.19 21 Days TB Mukt Bharat Campaign @ AB-HWCs were conducted across the Delhi State where Active Case Finding activities were conducted in Dispensaries, Mohalla Clinics amongst Vulnerable groups.

30.20 Ayushman Bhavah Campaign was organised in Delhi in September & October 2023. During this campaign, Ayushman Bhavah Health Mela was organized where TB related activities were included among communicable diseases. During this Health Mela, Presumptive TB mobilisation from the vulnerable population for screening & testing was done, For current TB patients clearing all pending DBT payments, contact tracing and screening for ruling out active TB and initiation of TPT for eligible individuals, awareness Generation, IEC activities, TB Patient support group meetings, Family Caregiver trainings was done. Ayushman Sabha was conducted on 2nd October 2023, which involved organizing special health talks to raise awareness about TB, Sensitizing the stakeholders at Panchayat / Ward levels on the key indicators. Ni-kshay Mitras were also felicitated during the Campaign.

30.21 **100 Days TB Campaign-** This is Nation–wide campaign to accelerate TB case detection, reduce morality and prevent new cases through focused intervention in districts with highest TB burden in a stratified approach i.e. Find new cases (among vulnerable groups-Symptomatic & Asymptomatic Vulnerable Population (> 60 year, Malnourished , Diabetes, HIV , Smokers , Alcoholic, Household Contacts) – Screening with X-ray and upfront NAAT, Ensure successful management of identified TB cases (existing & new) – saturate services (Bank Seeding, NPY Payment, HIV, Diabetes, nutrition support-PMTBMBA) and implement differentiated care including TB death audit.,

Prevent occurrence of new cases (TPT among household contacts & among vulnerable groups). In Delhi, 100 Days TB campaign was launched on 7th December, 2024 at RBIPMT in the presence of Mission Director, Delhi State Health Mission, Addl. Commissioner MCD, DGHS GNCTD. The Campaign has been going on in all 11 Revenue Districts. Mobile Medical Vans & 5 portable Hand Held X-Rays are being utilized on rotation for doing X-Rays in Field and also for creating awareness activities.

30.22 TB Mukt Bharat Abhiyan is being implemented across 11 Districts of Delhi where 100 Days TB Campaign activities are continued. In Delhi. Chest X-Ray has been done in 41% of enrolled of vulnerable population. NAAT testing has been done in 78% of all Microbiology tests done in vulnerable population. 49% of Beneficiaries have been paid all benefits of DBT-NPY (Nikshay Poshan Yojna).

STATEMENT 16.14

PERFORMANCE OF DELHI STATE RNTCP

Indicator	2017	2018	2019
TB Patients Notified from Public Sector	60772	76182	79828
Annual TB Notification Rate (Public)	332 per lakh	414 per lakh	434 per lakh
TB Patients Notified from Private Sector	5121	15561	28088
Annual TB Notification Rate (Private)	28 per lakh	84 per lakh	153 per lakh
% of Pulmonary TB Patients	58%	56%	58%
% of Extra Pulmonary TB Patients	42%	44%	42%
% of New TB Patients	86%	84%	86%
% of Previously Treated TB Patients	14%	16%	14%
% of Microbiologically Confirmed Cases	43%	45%	52%
% of Clinically diagnosed cases	57%	55%	48%
Success Rate of Microbiologically Confirmed New TB Patients	85%	86%	86%
Success Rate of Microbiologically Confirmed Previously Treated TB Patients	71%	72%	73%
Success Rate of Clinically diagnosed New TB Patients	94%	94%	95%
Success Rate of Clinically diagnosed Previously Treated TB Patients	88%	88%	89%

Source: Directorate of Health Services (DHS), GNCTD

STATEMENT 16.14 (1)

PERFORMANCE OF DELHI STATE NTEP AS PER NEW INDICATORS BY GOVT. OF INDIA TO MONITOR PROGRAMME PERFORMANCE

Indicator	2020	2021	2022	2023	2024	2025 (Till 30.11.2025)
TB Patients Notified from Public Sector	59746	68236	76831	70734	76560	75150
% of Target achieved in TB Notification (Public)	75%	85%	110%	88%	96%	103%
TB Patients Notified from Private Sector	27291	35589	29719	27711	28299	30106
% of Target achieved in TB Notification (Private)	91%	119%	99%	92%	94%	94%
% TB Notified Patients with known HIV Status (Public)	81%	88%	89%	92%	94.5%	90.5%
% TB Notified Patients with known HIV Status (Private)	66%	65%	62%	65%	78%	82%
% TB Notified patients with UDST Done (Public)	64%	39%	41%	50%	48%	51%
% TB Notified patients with UDST Done (Private)	49%	40%	20%	23%	24%	28%
Treatment Success Rate (Public)	73%	75%	79%	83%	85%	82%
Treatment Success Rate (Private)	54%	63%	61%	66%	65%	69%
% of Eligible Beneficiaries paid under Nikshay Poshan Yojna	58%	61%	68%	69%	69%	66%
% of Diagnosed MDR patients initiated on treatment	86.5%	89%	87%	90%	88%	86%

Source: Directorate of Health Services (DHS), GNCTD

31. Pradhan Mantri TB Mukt Bharat Abhiyaan

The President of India launched the Pradhan Mantri TB Mukt Bharat Abhiyaan on September 9, 2022. India has a little less than 20 percent of the world's population, but has more than 25 percent of the total TB patients of the world. Most of the people affected by TB come from the poor section of society.

According to the United Nations Sustainable Development Goals, all nations have set the goal of eradicating TB by the year 2030. But the Government of India has set the target of eradicating TB by the year 2025 and efforts are being made at every level to fulfill this resolution. The Pradhan Mantri TB Mukt Bharat Abhiyaan has been envisioned to bring together all community stakeholders to support those on TB treatment and accelerate the country's progress towards TB elimination.

The objective of Pradhan Mantri TB Mukt Bharat Abhiyan is to provide additional patient support to improve treatment outcome of TB patients, to augment community involvement in meeting India's commitment to end TB by 2025 and to leverage Corporate Social Responsibility (CSR) opportunities.

NI-KSHAY- (Ni=End, Kshay=TB) is the web enabled patient management system for TB control under the National Tuberculosis Elimination Programme (NTEP). Ni-kshay Mitra can be Co-operative societies, Corporate, Elected Representatives, Institutions, NGOs, Political Parties and Individuals etc.

Expected Outcome of NI-KSHAY 2.0:-

- Increased active involvement of society in the fight against tuberculosis.
- Involvement of the community in supporting the treatment cascade shall help in the reduction of stigma.
- Increased awareness among the public regarding tuberculosis.
- Improved nutrition for the TB patient shall result in better treatment outcomes.
- Additional diagnostics support to the patients with co-morbidities.
- Reduction of the out-of-pocket expenditure for the family of the TB patient.

Status of Pradhan Mantri TB Mukt Bharat Abhiyaan in Delhi:

- No. of Ni-kshay Mitras- 4313.
- No. of Ni-kshya Mitras agreed upon/linked with patients- 3434.
- No. of patients already received Nutritional support- 2,23,457

32. DIRECTORATE OF AYUSH

32.1 To encourage use of alternative systems of medicines in healthcare delivery and to ensure propagation of healthcare research and education in these systems, a separate Department of Indian System of Medicine was established by Delhi Government as a part of Health and family welfare Department in May, 1996. In 2013, it was renamed as Directorate of AYUSH where AYUSH stands for Ayurvedic, Yoga and Naturopathy, Unani, Siddha and SOWA-Rigpa and Homoeopathy systems of medicines. Following are the major functions of the Directorate of AYUSH:

- Provides best Healthcare facilities through a network of 206 dispensaries (Ayurvedic - 57, Unani - 28 and Homoeopathic - 121) spread across Delhi providing Ayurveda, Unani and Homoeopathy treatment to the public.

- Quality and value based education in Ayurveda, Unani and Homoeopathy through undergraduate and postgraduate courses at four educational institutes

- Licensing and regulation under Drugs & Cosmetics Act and Drugs & Magic Remedies (Objectionable advertisement) Act of Ayurveda and Unani Medicines.

- Registration of practitioners of Ayurveda, Unani and Homoeopathy

- To create awareness among masses about strengths of AYUSH systems through school education programmes, media campaigns and participation in various health programmes.

32.2 **Important steps taken by Govt. of NCT of Delhi in respect of functioning of AYUSH are as follows**

- After creation of separate Deptt/ Directorate of Indian Systems of Medicine & Homeopathy by the Govt. of NCT of Delhi in 1996, the Drugs Control Cell of Ayurvedic and Unani Medicine has been transferred to this Directorate from the Drugs Control department in 1997. Assistant Drugs Controller (Ayurveda) and Assistant Drugs Controller (Unani) have been notified as the Licensing Authority for Ayurveda & Unani Drugs respectively. Total 108 regular AYUSH manufacturing units are there out of which 82 Ayurvedic units, 26 regular Unani units. In 2024-25 total 201 inspections have been conducted. The Delhi state AYUSH Society has been registered on 01.08.2025 under NAM.

- The Government had taken over Dr. B. R. Sur Homeopathic College where degree course in Homoeopathy is offered with an intake of 57 students in UG 57 & 06 students in PG course. 50 beds for indoor patients have also been commissioned in this hospital. The government of Delhi took over the college in 1998. Besides OPD services, facilities of x-ray, laboratory services and ultrasound are also available. In part time guest faculty Yoga instructor has been appointed & PG in Practice of Medicine & Materia medics with intake of 3 students in each subject. Physiotherapist and Dietician are also appointed as part time. Part time eye specialist, ENT specialist and Pediatrician for teaching & clinical exposure for both UG and PG students. Fully functional Eye OPD is also running. Polysomnography machine & Spirometer is also available in IPD.

- The Government had also taken over the management of the Ayurvedic and Unani Tibbia College & Hospital in 1998 under Delhi Tibbia College (Takeover) Act 1998. This college is affiliated to Delhi University and is imparting BAMS and BUMS degree with intake capacity of 60 (25 EWS) seats for BAMS degree. This is 75 for BUMS including EWS students per year. This institute is also running post graduate courses in Ayurveda with 18 students strength 4 each in the subject Kayachikitsa, Sharir Kriya & Panchkarma & 6 students in Draya Guna. In Unani PG course are running in 04 department with 13 seats (Munafenl Aze, Qabalat wa Amraz-e-Niswan and Moalajat 03 seats in each course and Ilmul Saidla 04 seats) along with 240 beds indoor facility (120 for Ayurveda and 120 for Unani).

- Examining Body for Paramedical Training for Bharatiya Chikitsa has been set up as an autonomous body for prescribing curriculum for paramedical training courses of study for such exams as nursing care, panchkarma etc.

- Nehru Homeopathic Medical College and hospital is imparting BHMS Degree and has intake of 125 seats and Post Graduate course with student intake of 09 seats. This institute has an out patient department catering to 500 patients/day and a 100 beds IPD. No. of functional beds are 60 for the homoeopathic treatment of patients. On NHMC 13 OPD services, 11 Specialty Clinic OPD, and 8 IPD Services has been provided to the patients including Pathology laboratory, Physiotherapy, Ultrasound, X-Ray and yoga facilities are made available for IPD and OPD patients.

- Ch. Brahm Prakash Ayurvedic Charak Sansthan at Khera Dabur is an autonomous Ayurvedic Medical College and Hospital under the GNCTD was established in 2010. Total sanctioned capacity of 75 BAMS seats (including EWS) and 51 MD/MS seats (including EWS). 210 bedded

hospital attached to the Sansthan is providing health care facilities through its experienced and qualified Doctors. The hospital was recognized by Delhi Govt. in March 2025 for compliance with Biomedical Waste (BMW) Management. CBPACS achieved NABH certification at the entry level.

33. DELHI STATE HEALTH MISSION

Delhi has one of the best health infrastructures in India, which is providing primary, secondary & tertiary care. Delhi offers most sophisticated & state of the art technology for treatment and people from across the states pour in to get quality treatment. In spite of this, there are certain constraints & challenges faced by the state. There is inequitable distribution of health facilities as a result some areas are underserved & some are un-served. Thereby, Delhi Govt. is making efforts to expand the network of health delivery by opening Seed PUHCs in un-served areas & enforcing structural reforms in the health delivery system.

Delhi State Health Mission implements the following National Health Programs:-

1. Reproductive, Maternal, Newborn, Child and Adolescent Health:-
   - Maternal Health
   - PNDT
   - Child Health
   - Immunization
   - Adolscent Health
   - Family Planning
   - Nutrition

2. Communicable Disease Program:-
   - Integrated Disease Surveillance Project (IDSP)
   - National Vector Borne Disease Control Program (NVBDCP)
   - National Leprosy Eradication Program (NLEP)
   - National Tuberculosis Elimination Program (NTEP)
   - National Viral Hepatitis Control Program (NVHCP)
   - National Rabies Control Program (NRCP)

3. Non-Communicable Disease Program:-
   - National Program for Non Communicable Diseases (NP-NCD)
   - National Program for Control of Blindness (NPCB)
   - National Mental Health Program (NMHP)
   - National Program for Health Care of the Elderly (NPHCE)

- National Program for Prevention and Control of Deafness (NPCCD)
- National Tobacco Control Program (NTCP)
- National Oral Health Program (NOHP)
- National Program for Palliative Care (NPPC)
- National Porgram for Climate Change and Human Health (NPCCHH)
- Pradhan Mantri National Dialysis Porgram (PMNDP)

4. Health System Strengthening (Urban and Rural):-
   - Comprehensive Primary Health Care (Ayushman Arogya Mandirs)
   - Human Resource gap filling and management structures
   - Engaging with Communities through ASHA / Rogi Kalyan Samitis/Mahilla Arogya Samitis)
   - HMIS and IT initiatives
   - National Quality Assurance Program
   - Mobile Medical Units
   - Blood Services and Disorders

State Program Management Unit and 11 District Program Management Units implement these programs as per approval of the State Program Implementation Plan received from Govt. of India.

Some key achievements:

Implementation of Pradhan Mantri Bharat Health Infrastructure Mission- An MoU for implementation of PM ABHIM scheme was signed with MoHFW in March 2025. 1139 Ayushman Arogya Mandirs, 11 Integrated Public health labs and 9 Critical Care Blocks are approved under the scheme. Implementation is under process.

Ayushman Arogya Mandir (PHCs) - 123 Ayushman Arogya Mandir (PHCs) were approved for Delhi for the F.Y 2025-26 and same are being operationalized.

Coverage of un-served / underserved areas: Almost all the un-served / underserved areas have been identified across the State. 64 Seed Primary Urban health Centres (PUHCs) have been set up under this initiative.

Mobile Dental Clinics: Operationalization of 6 Mobile Dental Vans is being done under Mobile Dental Clinic Project with support of Delhi State Health Mission.

Health Management Information System (HMIS): Dedicated web portal for capturing all Public health / indicator based information from the end source

and generate reports /trends to assist in planning and monitoring activities. Data generated at facility level is captured on this web based portal on monthly basis. At present, the Delhi Government, MCD, CGHS & ESI, NDMC, Autonomous, NGO & other health facilities (dispensaries & hospitals) are reporting on HMIS on monthly basis. In addition some private hospitals and nursing homes are also reporting on HMIS Portal. The performance of health care services is being utilized by various departments of State and GOI for monitoring and planning health policies and strategies.

Community Processes: The health care delivery system is linked to the community with the help of Accredited Social Health Activists (ASHAs). These are motivated women volunteers who are selected as per defined guidelines in a decentralized manner. One ASHA is selected for every 2000 population (500 households). In F.Y 2025-26, State has 6774 ASHAs in place across eleven districts in the vulnerable areas (Slums, JJ Clusters, unauthorized colonies and resettlement colonies).

These ASHAs have been trained in knowledge and skills required for mobilizing and facilitating the community members to avail health care services. They also provide the home based care for mothers, newborns and young children. They identify and help the sick individuals for prompt access of the available health services. They also help in field level implementation of National Health Programs, facilitate checkup of senior citizens and NCDs and other expanded range of services under CPHC like mental health, ENT, Oral care, palliatie care, elderly care etc. along with Ayushman Card creation, These ASHAs are paid incentives as per their performance. They are monitored and paid with the help of a web based IT Platform created by the State. Delhi is the first State which had operationlised such a comprehensive IT Platform for ASHA Scheme. Their contribution has helped in betterment of health indicators, especially the maternal and family planning indicators. Also the activities like cataract surgeries have also picked up.

In order to ensure quality in trainings, they are undergoing an accreditation process through written exams being conducted by NIOS as the guidelines of Government of India.

Quality Assurance Program: Under DSHM, hospitals and PUHCs are provided funds to fill up gaps identified in the process of quality assurance. The process of assessment of compliance with the National Quality Assurance standards is being undertaken for identified hospitals. Twelve (12) hospitals have achieved National level NQAS certification and 2 hospitals are State Certified. Eleven (11) hospitals are National level LaQshya certified. Ten (10) hospitals are National Level MusQan certified and Five (5) hospitals are State

level MusQan Certified. Twenty Seven (27) PUHCs are National certified and Thirty Three (33) PUHCs are State Certified.

Kayakalp program, a subset of NQAS under the Swatch Bharat Mission is being implemented in all GNCTD and MCD hospitals and PUHCs and MCW centers. Under the program, best performing health facilities are recognized and given monitory incentives. This has improved the level of cleanliness, infection control practices, hygiene and the patient experience.

In 2025-26, out of 43 hospitals 40 hospitals have scored more than 70% in the Kayakalp assessment and 82 UPHCs have scored more than 70%. External assessment has been completed in 6 districts and is under process in 5 districts.

34. Delhi Arogya Kosh

Delhi Arogya Kosh (DAK) was constituted as separate society by the Govt. of NCT of Delhi in the year 2011 to provide financial assistance for health care services to poor patients suffering from life threatening diseases, minor surgeries, imaging and diagnostics test, Dialysis & undergoing treatment in any Govt. Hospital run by Delhi Govt. or Central Govt. or Local Bodies or Autonomous Hospital under State Govt. In the year 2017-18, the Govt. started services of high-end diagnostics, surgeries and treatment of medico legal victims of road accident, acid attack & thermal burn injury through DAK with the provision of referral of patients to empanelled private health centers and reimbursement of bills of medical treatment of such patients by the Govt. through DAK. A total of 64112 eligible patients availed the benefit of free high-end Radiological diagnostics test during 2025-26 (upto December, 2025). Similarly, 1732 eligible patients availed free/cashless dialysis and 1389 eligible patient's availed scheme of specified surgeries of different types during this period. Further, around 2081 victims of road accident /acid attack availed cashless treatment in this period.

35. Centralized Accident & Trauma Services (CATS)

Centralized Accident & Trauma Services (CATS) is a 100% funded Autonomous Body of Govt. of NCT of Delhi, providing 24x7x365 ambulance service in Delhi since 1991. CATS provides free ambulance service in Delhi for accident & trauma victims, transportation of pregnant women for delivery and post delivery, rape victims, Heart Attack, vitriolic cases, inter hospital transfer,

etc. CATS ambulance service can be availed by dialing “102” Toll Free Number. The main objective of CATS is to provide timely medical help to the accident and trauma victims and save lives of those who die for lack of timely medical aid and also to improve overall availability of ambulances on road, better response time, quality manpower, better management and supervision of resources.

Presently CATS is operating total 330Ambulances (Type of Ambulance-62-ALS +11 Neo-Natal+249 BLS +8PTA). Out of 330 ambulances, 137 are CATS owned which are being operated through outsourced agency and 193 ambulances have been hired through GeM after following tender process. With the available fleet of 330 ambulances, CATS is able to attend all the calls received in CATS Control Room without any refusal by maintaining response time below 15 minutes.

The existing CATS control room was setup in the year of 2016 and as per requirement of CATS, it required to upgrade/ establishment with provision of integration of 1000 ambulances. The Finance Department has also allocated the fund for the said purpose and CATS has started the process for up gradation/establishment. The tender process for up-gradation of CATS Control Room is under process.

KEY PERFORMANCE INDICATOR

Call & Statistics Year Wise:

Year	Total Calls	Patients Shifted	% Patient Shifting
2017	230095	164296	71.4
2018	365021	232614	63.7
2019	277612	172698	62.2
2020	403818	262867	65.0
2021	558701	394001	70.5
2022	611076	461472	75.5
2023	672917	497358	73.9
2024	564941	429188	75.9
2025 (Upto 30.11.2025)	504317	425466	84.3

36. Drug Control Department

Drugs Control Department of Delhi is a Regulatory Department under Health & Family Welfare Department, Govt. of NCT of Delhi. It regulates manufacture for sale of allopathic drugs, homoeopathic medicines, medical devices & cosmetics. Besides these, the Department also regulates regulation of Blood

Banks, Testing Laboratory for drugs & cosmetics and repacking of drugs. It also regulates retail and wholesale of drugs including homoeopathic medicines & medical devices. The department also conducts inspections and raids with a view to detect offences specially movement and sale of spurious and Not of Standard Quality (NSQ) drugs/cosmetics/medical devices.

In order to make the system more convenient and user friendly to public, with lesser interaction of public with the officials and to have greater transparency, Drugs Control Department, Govt. of NCT Delhi has adopted the new online system i.e. National Drugs Licensing System developed by Centre for Development of Advance Computing, Govt. of India in coordination with the Central Drugs Standard Control Organization, Government of India for making services online related to grant / renewal of sales/manufacturing licenses for drugs/cosmetics and approval of testing laboratory. The Department has taken steps to strengthen and modernize the Drug Testing Laboratory located at Lawrence Road, Delhi to conform to the international standards and NABL accreditation.

Drugs Control Department, Govt. of NCT of Delhi has adopted zero tolerance towards pharmaceutical drug abuse and taking stringent action against defaulters. The Department had cancelled licenses of 31 Medical Stores during the period of 01.04.2025 to 31.10.2025, who were found contravening various provisions of the Act. The Department is regularly keeping a watch on the quality of drugs & cosmetics moving in the market by way of regularly collecting samples of medicines from various manufacturers and sales outlets of drugs and cosmetics. From 01.04.2025 to 31.10.2025, the department had collected 397 samples of drugs/cosmetics. Out of which, 15 samples were declared as not of standard quality by Govt. Analyst, Moreover, the Department filed prosecutions in 06 cases during the period of 01.04.2025 to 31.10.2025 where the nature of contraventions was serious.

The Department is also keeping a watch on the activities of various wholesale/retail outlets by regularly conducting surprise checks. During the period of 01.04.2025 to 31.10.2025 the Department has observed contraventions in 596 cases out of 2405 firms for which action has been initiated against erring firms by way of suspension/cancellation of their licenses.

The department is also working in close coordination with Narcotics Control Bureau to jointly unearth the miscreants who are indulged in the Illegal sale of Narcotic Drugs. Besides this the department has also been conducting Public Awareness Programs regularly along with the officials of Narcotic Control Bureau to spread the message related to the hazards related with the use of Habit Forming Drugs.

Further, this department has been keeping a watch on the activities of various traders who are indulged in the sale of such drugs falling under Schedule H & H1 category (especially Habit forming and dual use drugs). The Department also conducts special drives to check compliance of Drugs Rules, 1945 for the sale of prescription drugs (Schedule H & H1) especially falling under the category of Narcotic Drugs and Psychotropic Substances. Actions are also being taken under Drugs Rules, 1945 against those firms/offenders who violate the provisions of Drugs Rules, 1945. During the period of 01.04.2025 to 31.10.2025, the Department has taken action against 196 firms by way of suspension/cancellation of their licences and 6 FIRs have been launched under NCORD.

37. The Way Forward

Delhi's health power lies in its strong public health care system, especially at the core level i.e. primary health (Ayushman Arogya Mandir and primary health centres). It needs to be expanded to cover all marginalized communities in the national capital. Health facilities need to be continuously upgraded to meet the new and existing challenges. The gains made in health care need to be strengthened and sustained. Recognizing the importance of a resilient health sector and improved health outcomes for the national capital, in the years to come. The government will continue to fight major diseases and invest in healthcare infrastructure, services and staff to ensure high quality healthcare to all individuals.

CHAPTER AT A GLANCE

➢	**There are 40 Multispecialty and Super Specialty Hospitals, 98 Allopathic Dispensaries, 64 Seed Primary Urban Health Centres, 370 Ayushman Arogya Mandir, 48 Polyclinics, 57 Ayurvedic Dispensaries, 28 Unani Dispensaries, 121 Homeopathic Dispensaries, 16 Mobile Health Dispensaries, 06 Mobile Dental Vans and 36 School Health Clinics for providing preventive, promotive and curative health care services to the citizens of Delhi.**
➢	No. of medical institutions in Delhi has increased from 3711 in 2024-25 to 3878 in 2025-26 (upto 31/12/2025).
➢	Bed population ratio in Delhi in 2025-26 (upto 31/12/2025) has increased at 2.84.
➢	1253 Private health facilities are registered on ABDM and 102,06,962 citizens have been enrolled and their ABHA IDs have been created. On the ABDM portal 24118 Doctors and Nursing staff have been enrolled under HPR.
➢	745631 Ayushman Cards created under PMJAY, including 279765 PMVVY cards. 208 Hospitals empanelled under PMJAY (155 Private, 53 Government) as of 20.03.2026. 29120 patients treated successfully under PMJAY in empanelled hospitals and 22,817 claims payments initiated.
➢	Health Department has operationalised the **MedLEaPR portal**, which has been integrated with the **Crime and Criminal Tracking Network & Systems (CCTNS)** platform. At present, **519 hospitals (public and private)** have been onboarded on the portal.
➢	**53 new ambulances were added under the Centralized Accident and Trauma Services (CATS)**
➢	**926 Nursing Officers, 141 Paramedical staff and 127 Non-Teaching Specialists** have been recruited.
➢	**4478 posts have been created in respect of Medical, Nursing and Paramedical for the Hospitals**
➢	**29 Jan Aushadhi Kendras are operational** in Delhi.
➢	NIC Next Gen e-Hospital software started running with OPD Registration Service in Delhi Govt. Hospitals from 30.06.2025.
➢	In case of Delhi, both IMR & U5MR have been continuously decreasing and remained at around 14 & 16 respectively as per SRS.
➢	In Delhi Share of institutional deliveries are slightly increased in Delhi to 96.09% whereas proportion of birth attended by skilled health personnel are decreased to 96.74% in the year 2024.
➢	A total of 5200 beneficiaries were provided benefits under Janani Suraksha Yojana during 2024-25.
➢	A total of 216584 (198918 pregnant women and 17666 sick infants) were provided benefits under Janani Shishu Suraksha Karyakarm during 2024-25.
➢	100% of eligible children received Full Immunization coverage (all due vaccines given by the age of 1 year) in 2024-25. In absolute numbers 3,02,962 children have been fully immunized.
➢	43035 persons living with HIV (PLHIV) are under active care at 12 ART Centres in Delhi, out of which 2934 were newly registered during FY 2025-26.

➢	Estimated adult HIV prevalence (15-49 yr) is 0.30% with 59079 persons living with HIV, 2590 New HIV Infections per year and about 927 HIV related deaths in Delhi in 2024-25.
➢	A total of 7670 beneficiaries have been enrolled in the scheme cumulatively and out of them 6878 beneficiaries are active on PFMS and getting financial assistant to PLHIV/CLHIV.
➢	During the year 2025 (upto Nov, 2025) against the total calls of 504317, 425466 patients have been shifted by CATS.
➢	Govt. of NCT of Delhi has adopted zero tolerance towards pharmaceutical drug abuse and taking stringent action against defaulters. The department had collected 397 samples of drugs/cosmetics. Out of which, 15 samples were declared as not of standard quality by Govt. Analyst.