

Vigyan Bhawan Annexe, Maulana Azad Road,
New Delhi - 110011.
Dated: 20th December, 2018

OFFICE MEMORANDUM

Subject: Minutes of the first meeting of the Inter-Ministerial Committee on Health & Nutrition for North Eastern Region held under the Chairmanship of Secretary, DoNER on 7th December, 2018 at Vigyan Bhawan Annexe, New Delhi.

The undersigned is directed to enclose herewith the minutes of the first meeting of the Inter-Ministerial Committee on Health & Nutrition for North Eastern Region held under the Chairmanship of Secretary, DoNER on 7th December, 2018 at Vigyan Bhawan Annexe, New Delhi, for kind information and necessary action please.

Encl: As above.

Kiruthika

(A.Kiruthika)
Assistant Director

To,

1. Dr. Rajesh Kumar, Joint Secretary, MWCD
2. Dr. GS Toteja, Head (Nutrition), ICMR
3. Dr. DC Katoch, Adviser, M/o AYUSH
4. Shri C.H. Kharshiing, Planning Adviser, NEC
5. Shri G. Vijaya Bhaskar, Director, D/o School Education & Literacy
6. Dr. Sila Deb, Deputy Commissioner (Child Health), M/o H&FW
7. Shri Aditya Chopra, MWCD
8. Dr. Anindita Shukla, TSG-MDM, MHRD
9. Dr. Rajeshwari Singh, OSD to Secretary, AYUSH

Copy to:-

1. The Secretary, Ministry of Health & Family Welfare, Nirman Bhavan, Maulana Azad Road, New Delhi - 110011.
2. The Secretary, Department of Health Research, MoHFW, 2nd Floor, IRCS Building 1, Red Cross Road New Delhi -110003.
3. The Secretary, Ministry of AYUSH, AYUSH BHAWAN, B Block, GPO Complex, INA Colony, New Delhi, Delhi 110023.
4. The Secretary, Ministry of Women and Child Development, Shastri Bhawan, Dr Rajendra Prasad Road, New Delhi-110001.
5. The Secretary, Ministry of Drinking Water and Sanitation, Paryavarn Bhawan, CGO Complex, Lodhi Road, New Delhi - 110 003.
6. The Secretary, Department of School Education, Ministry of Human Resource Development, Shastri Bhawan, New Delhi-110001.
7. The Adviser (Health), North Eastern Council, NEC Secretariat, Nongrim Hills, Shillong-793003.
8. PPS to Secretary, DoNER.
9. PS to Secretary, NEC.
10. JS(SNP)/JS(JKS)/JS(SLM)/JS(SE)/EA, DoNER.
11. MD (NERLP), DoNER.
12. MD (NERCORMP), DoNER.

Record of discussions of the first meeting of Inter-Ministerial Committee (IMC) on Health & Nutrition for the North Eastern Region held under the Chairmanship of Secretary, DoNER on 7th December, 2018 at Vigyan Bhawan Annexe, New Delhi

The first meeting of Inter-Ministerial Committee (IMC) on Health & Nutrition for the North Eastern Region was convened under the Chairmanship of Secretary, DoNER on 7th December, 2018 at Vigyan Bhawan Annexe, New Delhi. The list of participants is Annexed.

2. At the outset, Secretary, DoNER welcomed all the participants and deliberations were held to look into the aspects of improving the dimensions of health in NER. Following this, a presentation was made by officers of M/o DoNER highlighting the schematic interventions of the Ministry of DoNER in the health sector along with the status of key health indicators in the North Eastern Region.

3. The participants were apprised of the achievements made under Non-Lapsable Central Pool of Resources (NLCPR) Scheme, North East Special Infrastructure Development Scheme (NESIDS), and Schemes of North Eastern Council (NEC) in the health sector. The concept of 10% Gross Budgetary Support was also put forth to see expenditures of the line Ministries for the last three years. It was observed that expenditure of Department of Health Research towards the NER lay below 10%, Chairman, while referring to the dialogue with Shri Lanka Srinivas, Sr. Advisor, Pharmexcil, opined that traditional medicines may be promoted in the NER in collaboration with National Institute of Pharmaceutical Education and Research (NIPER), Guwahati. Science and Technology Initiative in the North Eastern Region (STINER) may also be involved in the process. Representative from AYUSH informed that AYUSH has two regional institutions in the NER, namely, North Eastern Institute of Ayurveda & Homoeopathy (NEIAH), Shillong, and North Eastern Institute of Folk Medicine (NEIFM), Pasighat. Chairman desired that in the next meeting representatives from NEIFM may be invited. It was also informed that if Ministries are in need of funds in addition to the allocated budget of 10% then the Ministry of DoNER can recommend re-appropriation of funds (at RE stage) from those Ministries which are not spending the entire amount of 10% budget to those Ministries which are in need of additional funds.

4. Prevalence of stunting, wasting, severely wasting and underweight among children under age 5 were discussed. It was observed that Meghalaya is the only State to have the percentage of stunted children (43.8%) above the national average (38.4%) in 2015-16, as per NFHS-4. There has been an increase in the percentage of children who are wasted from 2005-06 to 2015-16 in three States, namely, Arunachal Pradesh (by 2%), Assam (by 3.3%) and Sikkim (by 4.5%). There has also been an increase in the percentage of severely wasted children from 2005-06 to 2015-16 in four States, namely, Arunachal Pradesh (by 1.9%), Assam (by 2.2%),

Manipur (by 0.1%) and Sikkim (by 2.6%). With respect to underweight children, Assam has the highest percentage of underweight children (29.8%) among the NE States followed by Meghalaya (29%) and Tripura (24.1%) against the national average of 35.7% in 2015-16. Shri Rajesh Kumar, Joint Secretary, MWCD informed that tea garden community largely contributes to the high prevalence of underweight children in the State of Assam.

5. As per India TB Report, 2018, Ministry of H&FW, the States of Arunachal Pradesh (203), Mizoram (186), Nagaland (148) and Sikkim (197) have Annual Total Notification Rate (per 1 lakh population) more than the national average of 138. Habits such as Tobacco intake, low hygiene, smoking, alcohol intake, poor ventilation, increase the risk of Tuberculosis. Dr. Sila Deb, Deputy Commissioner, M/o H & FW informed that TB Division of M/o H & FW compiles the TB data and it has been observed that standard system of diagnosis is not followed by private hospitals. Many patients visit private hospitals and these hospitals do not follow standard treatment protocol which leads to high prevalence of TB. It was decided that special screening may be done by the Ministry of Health & Family Welfare in the top 10 districts where prevalence of TB is quite high. Shri Rajesh Kumar, Joint Secretary, MWCD suggested that the Ministry of Health & Family Welfare should also diagnose *Coal Miners' pneumoconiosis (CMP)*, which is caused by long-term exposure to coal dust, if it has not been done so far.

6. Prevalence of cancer, in case of males is highest in Arunachal Pradesh (0.2%) and Mizoram (0.2%) against the national average of 0.3%. In case of females, it is highest in Meghalaya (0.4%) followed by Mizoram (0.3%) against the national average of 0.2%. It was also informed by the Chairman that training is being imparted to doctors and paramedics by state-of-the-art research and development centre established by DAE in cancer and funds for the same are being provided by Ministry of DoNER. It was stated by Dr. Sila Deb, DC, M/o H&FW that under the National Health Mission (NHM), the Health and wellness centres are being established and it is proposed to do screening of cancer such as oral cancer, cervical cancer and breast cancer under the programme. The screening will be done by staff mid-level practitioners.

7. A report on Cancer Burden in North Eastern States of India, 2017 prepared by National Centre for Disease Informatics and Research, ICMR, Bengaluru was shared by Dr. G.S. Toteja, Director, ICMR. The report is based on the analysis of the data from 11 Population Based Cancer Registries (PBCRs). In males, cancer of Oesophagus is the highest followed by cancer of Lung and Stomach. These three cancers contribute one third (33.5%) of all cancers. In females, cancer of Breast is the highest followed by Cervix and Oesophagus. These three cancers contribute one third (33.8%) of all cancers. The Age Adjusted Incidence Rate is highest in Aizawl (270.7 per 1 lakh population) followed by Papumpare (230.4 per 1 lakh population) in case of males whereas in case females, Papumpare has the highest AAR of 249 per 1 lakh population followed by Aizawl (207.7 per 1 lakh population). The Chairman

suggested that the M/o H&FW may focus on the districts of Papumpare and Aizawl where there is high incidence of cancer.

8. The Chairman also suggested that cases of psychological disorder may also be discussed in the next meeting of the IMC.

9. As far as Adult HIV prevalence is concerned, three States, namely, Mizoram (2.04%), Manipur (1.43%) and Nagaland (1.15%) have shown the highest prevalence against the national average of 0.22% among the Indian States, as per India HIV Estimations 2017 Report, NACO. Adviser (Health), NEC informed that the proposed MoU between NEC and NACO in connection with prevention, treatment, care and support services for HIV/AIDS in North Eastern Region will be signed within a fortnight.

10. During the meeting, a presentation was made by Dr. Rajesh Kumar, Joint Secretary, MWCD on POSHAN Abhiyan. Launched by Hon'ble Prime Minister on 8th March 2018, the Scheme strives to reduce the level of stunting, under-nutrition, anaemia and low birth weight in children with focus on pregnant women and lactating mothers. He mentioned about the ICT-RTM of Anganwadi Services driven by Common Application Software (ICDS-CAS), which is one of the key interventions of the POSHAN Abhiyan.

11. It was stated that Executive Committee (EC) meeting for POSHAN Abhiyan will be held after every six weeks. Further, DCs and DMs have been instructed to mandatorily review and focus mainly on sectors like sanitation, health and nutrition. The review meetings will be held on a Quarterly basis, i.e. on 10th of every July, October, January and April.

12. It was suggested that for better implementation of POSHAN Abhiyan, there is a need for strong association between NEC, NERLP and NERCORMP.

13. Joint Secretary, MWCD informed that Department of Food & Public Distribution has submitted an EFC note on rice fortification and to run a pilot study for the same. Rice fortification will involve adding four micro-nutrients, i.e. Vitamin B12, Folic Acid, Iron and Zinc. The Chairman agreed that this scheme may be implemented in the Aspirational Districts of the NER.

14. The Chairman desired that the matter of rice fortification in the State of Meghalaya may be discussed with the Ministry of Food & Public Distribution and Food Corporation of India (FCI) since the State is having the highest percentage of stunted children among NE States. This would help to reduce malnutrition by involving local millers.

15. Another presentation was made by Joint Secretary, MWCD on Pradhan Mantri Matru Vandana Yojana (PMMVY). The Scheme was announced by Hon'ble Prime Minister on 31.12.2016 and implemented on 01.01.2017. Under PMMVY, a cash incentive of Rs.5000/- (in three instalments) is provided directly to the Bank /

Post Office Account of Pregnant Women and Lactating Mothers (PW&LM) for first living child of the family subject to fulfilling specific conditions relating to Maternal and Child Health. First instalment of Rs.1000/- is paid at the time of early registration of pregnancies; second instalment of Rs.2000/- after receiving at least one Ante-Natal Care (ANC) and third instalment is given at the registration of child birth. Further, a Common Application Software (CAS) system has been developed through which disbursements are made.

16. The status of implementation of PMVVY as on 06.12.2018 in respect of NE States was discussed in detail. The State of Mizoram has been performing well with All India Rank of 7 followed by Nagaland (AIR-16). The worst performing States are Meghalaya (AIR-33), Manipur (AIR-31), Arunachal Pradesh (AIR-29) and Assam (AIR-28). Chairman suggested that status of implementation of States may be communicated to MDoNER for follow up. It was also suggested that IEC module of both schemes may be provided to MDoNER so that Self-Help Groups under NERLP and NERCORMP of MDoNER may oversee the magnitude of awareness among people. It was further suggested that NEC may conduct capacity building programmes also and Joint Secretary level officers in the Ministry of DoNER may visit the States to see the implementation of POSHAN Abhiyan and PMMVY.

17. There was discussion about the reproductive and child health portal maintained by the M/o H&FW on the similar target population. Dr. Sila Deb, DC, MoH&FW stated that the Mother Children Tracking System has now been upgraded to Reproductive & Child Health (RCH). She further added that the synchronization between catchment areas of ICDS-CAS and Sub-Centres of M/o H & FW has not yet been done which has resulted in duplication of cases. It was suggested both Ministries may focus on interfacing ICDS-CAS and RCH portals so as to arrive at desired results. It was also suggested NEC may support the expansion of pilot of AAA in the 14 Aspirational Districts.

18. Dr. DC Katoch, Adviser, M/o AYUSH suggested that under Mid Day Meal Scheme, Ayurvedic nutrition such as Amla, Ashvagandha etc. can be provided. The Chairman suggested a concept note on the same may be provided by M/o AYUSH.

19. Joint Secretary, M/o WCD suggested Backyard Poultry & Kitchen Garden in Anganwadi Centres under Anganwadi Services and in the schools under Mid Day Meal Scheme may be promoted. In addition, Bio-fortification of crops through Conventional Plant Breeding in collaboration with ICAR, IRRI etc may also be promoted.

20. After detailed deliberations, the Committee took the following decisions:

- i. Next meeting of the IMC on Health & Nutrition may be held either in Nagaland or Meghalaya. These States may provide insights into social determinants that may affect health outcomes in other States. [Action: MDoNER]

- ii. National AIDS Control Organization (NACO) to be made member of the IMC on Health & Nutrition. [Action: MDoNER]
- iii. More emphasis to be given to Aspirational Districts of the region. [Action: Ministries/ Departments]
- iv. M/o DoNER/NEC to discuss the matter of rice fortification in the State of Meghalaya with D/o Food and Public Distribution and Food Corporation of India (FCI) [Action: MDoNER]
- v. In the next meeting representatives from North Eastern Institute of Folk Medicine (NEIFM), Pasighat to be invited.[Action: MDoNER]
- vi. Any financial support, if required by the Ministries/ Departments, to be communicated to the Ministry of DoNER/NEC. [Action: Ministries/ Departments]
- vii. M/o H&FW may focus on the districts of Papum Pare and Aizawl where there is high incidence of cancer.[Action: MH&FW]
- viii. Status of poor performing North Eastern States with respect to POSHAN Abhiyan and PMMVY to be forwarded to Ministry of DoNER/NEC for follow up. [Action: MWCD]
- ix. Situation of the people living with psychological disorder is to be added as an agenda point in the next meeting. [Action: MDoNER]
- x. NEC, NERLP and NERCORMP to coordinate and work towards better implementation of POSHAN Abhiyan and PMMVY Scheme. [Action: MDoNER/NEC/MWCD]
- xi. Ayurvedic Nutrition may also be provided under Mid-Day Meal Scheme. [Action: M/o AYUSH/ DSE&L]
- xii. For sensitizing more and more people of the NER regarding various Schemes/ Programmes of the Government of India, local medium to be used. In addition, songs in local languages may be composed. [Action: Ministries/ Departments]
- xiii. Field visits may be conducted by Senior Officers of the Ministry of DoNER to the areas where health indicators are alarming in nature. [Action: MDoNER]
- xiv. Backyard Poultry & Kitchen Garden in Anganwadi Centres under Anganwadi Services and in the schools under Mid Day Meal Scheme to be promoted. [Action: MWCD and DSE&L]
- xv. Bio-fortification of crops through Conventional Plant Breeding in collaboration with ICAR, IRRI etc to be promoted. [Action: MDoNER/ MWCD]
- xvi. Scaling up of AAA pilot in 14 Aspirational Districts. [Action: NEC/MWCD]

The meeting ended with vote of thanks to the Chair.

List of participants

1. Dr. Rajesh Kumar, Joint Secretary, MWCD
2. Shri SN Pradhan, Joint Secretary, MDoNER
3. Shri JK Sinha, Joint Secretary, MDoNER
4. Shri Saurabh Endley, Joint Secretary, MDoNER
5. Ms. Mamta Shankar, Economic Adviser
6. Ms. Navanita Gogoi, Statistical Adviser, MDoNER
7. Dr. GS Toteja, Head (Nutrition), ICMR, D/o Health Research
8. Dr. DC Katoch, Adviser, M/o AYUSH
9. Shri C.H. Kharshiing, Planning Adviser, NEC
10. Shri G. Vijaya Bhaskar, Director, D/o School Education & Literacy
11. Shri Atul Basumatary, Director, MDoNER
12. Dr. Sila Deb, Deputy Commissioner (Child Health), M/o H&FW
13. Shri Aditya Chopra, MWCD
14. Dr. Anindita Shukla, TSG-MDM, MHRD
15. Dr. Rajeshwari Singh, OSD to Secretary, AYUSH
16. Ms. A. Kiruthika, Assistant Director, MDoNER