

GOVERNMENT OF INDIA
MINISTRY OF WOMEN AND CHILD DEVELOPMENT

LOK SABHA
UNSTARRED QUESTION No.169
TO BE ANSWERED ON 21.06.2019

Anganwadis

169. SHRIMATI RAMYA HARIDAS:
SHRI BALASHOWRY VALLABHANENI:

Will the Minister of WOMEN AND CHILD DEVELOPMENT be pleased to state:

- (a) whether there is a consistent demand from Anganwadi workers for hike in their honorariums and if so, the details thereof along with the details of honorarium being paid to Anganwadi workers and ASHAs in the country, State/UT-wise;
- (b) whether the Ministry has decided to increase the wages of such workers and if so, the details thereof;
- (c) whether some of the States are paying Rs. 10,000 as honorarium to said workers;
- (d) if so, the details thereof along with the challenges faced by the Government to provide Rs. 10,000 as honorarium to such workers;
- (e) the schemes/programmes being implemented through Anganwadis; and
- (f) the details of AWCs functioning and the total number of Anganwadi workers/helpers/employees, State/UT-wise?

ANSWER

MINISTER OF WOMEN AND CHILD DEVELOPMENT
(SHRIMATI SMRITI ZUBIN IRANI)

- (a) & (b) The Government of India has recently enhanced the honorarium of Anganwadi Workers (AWWs) at main-Anganwadi Centres (AWCs) from ₹ 3,000/- to ₹ 4,500/- per month; AWWs at mini-AWCs from ₹ 2,250/- to ₹ 3,500/- per month; Anganwadi Helpers (AWHs) from ₹ 1,500/- to ₹ 2,250/- per month; and introduced performance linked incentive of ₹ 250/- per month to AWHs, with effect from 1st October, 2018.

Under the National Health Mission (NHM), ASHAs are envisaged to be community health volunteers and are entitled to task/activity based incentives. List of various activities for which incentives are provided to ASHAs is at **Annexure-I**. Apart from incentives approved for ASHAs at national level, States have the flexibility to design their own ASHA incentives. The incentives to ASHAs for different tasks are regularly reviewed from time to time. Accordingly, Government of India has recently approved increase in the amount of routine and recurring incentives under National Health Mission for ASHAs that will enable ASHAs to get at least Rs 2000/- per month subject to carrying out assigned tasks.

- (c) & (d) The statement of the additional honorarium paid by the States/UTs to AWWs/AWHs is at **ANNEXURE-II**. Information regarding amount of incentives/honorarium for different activities being paid to ASHAs by different States/UTs is not maintained centrally at MoHFW level.
- (e) The platform of Anganwadi Centres is used for the implementation of the Schemes under Umbrella Integrated Child Development Services (ICDS) Scheme comprising of Anganwadi Services, Scheme for Adolescent Girls, Pradhan Mantri Matru Vandana Yojana (PMMVY) and POSHAN Abhiyaan.
- (f) States/UTs-wise details of AWCs functioning and the total number of Anganwadi workers/helpers/employees are at **ANNEXURE-III & IV** respectively.

Statement Referred in Reply to part (a to b) of Lok Sabha Un-Starred Q.No. 169 for 21.06.2019 asked by Shrimati Ramya Haridas & Shri Balashowry Vallabhaneni regarding 'Anganwadis'.

Updated list of ASHA Incentives			
	Activities	Amount in Rs/case	Source of Fund and Fund Linkages
I	Maternal Health		
1	JSY financial package		
a.	For ensuring antenatal care for the woman	Rs.300 for Rural areas and Rs. 200 for Urban areas	Maternal Health- NRHM-RCH Flexi pool
b.	For facilitating institutional delivery	Rs. 300 for Rural areas and Rs. 200 for Urban areas	
2	Reporting Death of women (15-49 years age group) by ASHA to PHC Medical Officer	Rs. 200 for reporting within 24 hours of occurrence of death by phone	HSC/ U-PHC- Un-tied Fund
II	Child Health		
1	Undertaking Home Visit for the care of the New Born and Post Partum mother ¹ -Six Visits in Case of Institutional Delivery (Days 3 rd , 7 th , 14 th , 21 st , 28 th & 42 nd) -Seven visits in case of Home Deliveries (Days 1 st , 3 rd , 7 th , 14 th , 21 st , 28 th & 42 nd)	Rs. 250	Child Health- NHM-RCH Flexi pool
2	Undertaking Home Visits of Young Child for Strengthening of Health & Nutrition of young child through Home Visits-(recommended schedule- 3 rd , 6 th , 9 th , 12 th and 15 th months) - (Rs.50 x 5 visits) -in 1st phase the programme is proposed to implement only in 235 POSHAN Abhiyan and Aspirational districts	Rs. 50/visit with total Rs. 250/per child for making 05 visits	

¹This incentive is provided only on completion of 45days after birth of the child and should meet the following criteria- birth registration, weight-record in the MCP Card, immunization with BCG, first dose of OPV and DPT complete with due entries in the MCP card and both mother and new born are safe until 42nd day of delivery.

3	For follow up visits to a child discharged from facility or Severe Acute Malnutrition (SAM) management centre	Rs. 150 only after MUAC is equal to or more than 125mm	
4	Ensuring quarterly follow up of low birth weight babies and newborns discharged after treatment from Specialized New born Care Units ²	Rs. 50/ Quarter- from the 3 rd month until 1 year of age	
5	Child Death Review for reporting child death of children under 5 years of age	Rs. 50	
6	For mobilizing and ensuring every eligible child (1-19 years out-of-school and non-enrolled) is administered Albendazole.	Rs. 100/ ASHA/Bi-Annual	
7	Week-1-ASHA incentive for prophylactic distribution of ORS to families with under-five children	Rs. 1 per ORS packet for 100 under five children	
8	Week-2- ASHA incentive for facilitating growth monitoring of all children in village; screening and referral of undernourished children to Health centre; IYCF counselling to under-five children household	Rs. 100 per ASHA for completing at least 80% of household	
9	MAA (Mother's Absolute Affection) Programme Promotion of Breastfeeding- Quarterly mother meeting	Rs. 100/ASHA/ Quarterly meeting	
III	Immunization		
1	Full immunization for a child under one year	Rs. 100	Routine Immunization Pool
2	Complete immunization per child up-to two years age (all vaccination received between 1st and second year of age after completing full immunization after one year		

² This incentive will be subsumed with the HBYC incentive subsequently

		Rs. 75 ³	
3	Mobilizing children for OPV immunization under Pulse polio Programme	Rs. 100/day ⁴	IPPI funds
4	DPT Booster at 5-6years of age	Rs.50	
IV	Family Planning		
1	Ensuring spacing of 2 years after marriage ⁵	Rs. 500	Family planning – NHM RCH Flexi Pool
2	Ensuring spacing of 3 years after birth of 1 st child ⁵	Rs. 500	
3	Ensuring a couple to opt for permanent limiting method after 2 children ⁶	Rs. 1000	
4	Counselling, motivating and follow up of the cases for Tubectomy	Rs. 200 in 11 states with high fertility rates (UP, Bihar, MP, Rajasthan, Chhattisgarh, Jharkhand, Odisha, Uttarakhand, Assam, Haryana and Gujarat) Rs.300 in 146 MPV districts Rs. 150 in remaining states	
5	Counselling, motivating and follow up of the cases for Vasectomy/ NSV	Rs. 300 in 11 states with high fertility rates (UP, Bihar, MP, Rajasthan, Chhattisgarh, Jharkhand, Odisha, Uttarakhand, Assam,	

³ Revised from Rs. 50 to Rs, 75

⁴ Revised from Rs 75/day to Rs 100/day

⁵Bihar, Chhattisgarh, Jharkhand, Madhya Pradesh, Odisha, Rajasthan, Uttar Pradesh, Uttarakhand, Arunachal Pradesh, Assam, Manipur, Meghalaya, Mizoram, Nagaland, Sikkim, Tripura, Gujarat, Haryana, Karnataka, Maharashtra, Andhra Pradesh, Telangana, West Bengal & Daman and Diu

⁶Bihar, Chhattisgarh, Jharkhand, Madhya Pradesh, Odisha, Rajasthan, Uttar Pradesh, Uttarakhand, Arunachal Pradesh, Assam, Manipur, Meghalaya, Mizoram, Nagaland, Sikkim, Tripura, Gujarat, Haryana and Dadar& Nagar Haveli

		Haryana and Gujarat) and 400 in 146 MPV districts and Rs. 200 in remaining states	
6	Female Postpartum sterilization	Rs. 300 in 11 states with high fertility rates (UP, Bihar, MP, Rajasthan, Chhattisgarh, Jharkhand, Odisha, Uttarakhand, Assam, Haryana and Gujarat) and 400 in 146 MPV districts	
7	Social marketing of contraceptives- as home delivery through ASHAs	Rs. 1 for a pack of 03 condoms, Rs. 1 for a cycle of OCP, Rs. 2 for a pack of ECPs	
8	Escorting or facilitating beneficiary to the health facility for the PPIUCD insertion	Rs. 150/per case	
9	Escorting or facilitating beneficiary to the health facility for the PAIUCD insertion	Rs. 150/case	
Mission Parivar Vikas- In selected 146 districts in seven states- (57 in UP, 37 in Bihar, 14 RJS, 9 in Jharkhand, 02 in Chhattisgarh, Madhya Pradesh 25 and 2 in Assam)			
10	Injectable Contraceptive MPA (Antara Program) and a non-hormonal weekly centchroman pill (Chhaya) - Incentive to ASHA	Rs. 100 per dose	Family planning- RCH- NHM Flexi Pool
11	Mission ParivarVikas Campaigns Block level activities- ASHA to be oriented on eligible couple survey for estimation of beneficiaries and will be expected to conducted	Rs. 150/ ASHA/round	

	eligible couple survey- maximum four rounds		
12	NayiPahel- an FP kit for newly weds- a FP kit would be given to the newly wed couple by ASHA (In initial phase ASHA may be given 2 kits/ ASHA)	Rs. 100/ASHA/NayiPahel kit distribution	
13	SaasBahuSammelan- mobilize SaasBahu for the Sammelan- maximum four rounds	Rs. 100/ per meeting	
14	Updating of EC survey before each MPV campaign- Note-updating of EC survey register incentive is already part of routine and recurring incentive	Rs.150/ASHA/Quarterly round	
V	Adolescent Health		
1	Distributing sanitary napkins to adolescent girls	Rs. 1/ pack of 6 sanitary napkins	Menstrual hygiene Scheme-RCH – NHM Flexi pool
2	Organizing monthly meeting with adolescent girls pertaining to Menstrual Hygiene	Rs. 50/meeting	VHSNC Funds
3	Incentive for support to Peer Educator (for facilitating selection process of peer educators)	Rs. 100/ Per PE	RKSK- NHM Flexi pool
4	Incentive for mobilizing adolescents for Adolescent Health day	Rs. 200/ Per AHD	
VI	Incentive for Routine Recurrent Activities		
1	Mobilizing and attending VHND or (outreach session/Urban Health and Nutrition Days)	Rs. 2000 ⁷	NHM- Flexi Pool
2	Convening and guiding monthly meeting of VHSNC/MAS		
3	Attending monthly meeting at Block PHC/5U-PHC		

⁷ Increased from Rs 1000 to Rs 2000

4	<p>a) Line listing of households done at beginning of the year and updated every six months</p> <p>b) Maintaining records as per the desired norms like – village health register</p> <p>c) Preparation of due list of children to be immunized updated on monthly basis</p> <p>d) Preparation of due list of ANC beneficiaries to be updated on monthly basis</p> <p>e) Preparation of list of eligible couples updated on monthly basis</p>		
VII	Participatory Learning and Action- (In selected 10 states that have low RMNCH+A indicators – Assam, Bihar, Chhattisgarh, Jharkhand, MP, Meghalaya, Odisha, Rajasthan, Uttarakhand and UP)		
1	<p>Conducting PLA meetings- 2 meetings per month-</p> <p>Note-Incentive is also applicable for AFs @Rs.100/- per meeting for 10 meetings in a month</p>	Rs. 100/ASHA/per meeting for 02 meetings in a month	
VIII	Revised National Tuberculosis Control Programme⁸		
	Honorarium and counselling charges for being a DOTS provider		RNTCP Funds
1	For Category I of TB patients (New cases of Tuberculosis)	Rs. 1000 for 42 contacts over six or seven months of treatment	
2	For Category II of TB patients (previously treated TB cases)	Rs. 1500 for 57 contacts over eight to nine months of treatment including 24-36 injections in intensive phase	
3	For treatment and support to drug resistant TB patients	Rs. 5000 for completed course of treatment (Rs. 2000 should be given at the end on intensive phase and Rs. 3000 at the end of consolidation phase)	

⁸ Initially ASHAs were eligible to an incentive of Rs 250 for being DOTS provider to both new and previously treated TB cases. Incentive to ASHA for providing treatment and support Drug resistant TB patients have now been revised from Rs 2500 to Rs 5000 for completed course of treatment

4	For notification if suspect referred is diagnosed to be TB patient by MO/Lab ⁹	Rs.100	
IX	National Leprosy Eradication Programme¹⁰		
1	Referral and ensuring compliance for complete treatment in pauci-bacillary cases of Leprosy - for 33 states (except Goa, Chandigarh & Puducherry).	Rs. 250 (for facilitating diagnosis of leprosy case)+ Rs. 400 (for follow up on completion of treatment)	NLEP Funds
2	Referral and ensuring compliance for complete treatment in multi-bacillary cases of Leprosy- for 33 states (except Goa, Chandigarh & Puducherry).	Rs. 250 (for facilitating diagnosis of leprosy case)+ Rs. 600 (for follow up on completion of treatment)	
X	National Vector Borne Disease Control Programme		
A)	Malaria¹¹		
1	Preparing blood slides or testing through RDT	Rs. 15/slide or test	NVBDCP Funds for Malaria control
2	Providing complete treatment for RDT positive Pf cases	Rs. 75/- per positive cases	
3	Providing complete radical treatment to positive Pf and Pv case detected by blood slide, as per drug regime		
4	For referring a case and ensuring complete treatment	Rs. 300 (not in their updated list)	

⁹Provision for Rs100 notification incentive for all care providers including ASHA/Urban ASHA /AWW/ unqualified practitioners etc if suspect referred is diagnosed to be TB patient by MO/Lab.

¹⁰Incentives under NLEP for facilitating diagnosis and follow up for completion of treatment for pauci bacillary cases was Rs 300 before and has now been revised to-Rs 250 and Rs 400 now.
For facilitating diagnosis and follow up for completion of treatment for multi-bacillary cases were Rs 500 incentive was given to ASHA before and has now been revised to-Rs 250 and Rs 600.

¹¹ Incentive for slide preparation was Rs 5 and has been revised to Rs 15. Incentive for providing treatment for RDT positive Pf cases was Rs 20 before and has been revised to Rs 75. Incentive for providing complete radical treatment to positive Pf and Pv case detected by blood slide, as per drug regimen was Rs 50 before. Similarly incentive for referring a case of malaria and ensuring complete treatment was Rs 200/case and has been revised to Rs 300 now.

B)	Lymphatic Filariasis		
1	For one time line listing of lymphoedema and hydrocele cases in all areas of non-endemic and endemic districts	Rs. 200	NVBDCP funds for control of Lymphatic Filariasis
2	For annual Mass Drug Administration for cases of Lymphatic Filariasis ¹²	Rs. 200/day for maximum three days to cover 50 houses and 250 persons	
C)	Acute Encephalitis Syndrome/Japanese Encephalitis		
1	Referral of AES/JE cases to the nearest CHC/DH/Medical College	Rs. 300 per case	NVBDCP funds
D)	Kala Azar elimination		
1	Involvement of ASHAs during the spray rounds (IRS) for sensitizing the community to accept indoor spraying ¹³	Rs. 100/- per round during Indoor Residual Spray i.e. Rs 200 in total for two rounds	NVBDCP funds
2	ASHA Incentive for referring a suspected case and ensuring complete treatment.	Rs. 500/per notified case	NVBDCP funds
E)	Dengue and Chikungunya		
1	Incentive for source reduction & IEC activities for prevention and control of Dengue and Chikungunya in 12 High endemic States (Andhra Pradesh, Assam, Gujarat, Karnataka, Kerala, Maharashtra, Odisha, Punjab, Rajasthan, Tamil Nadu, Telangana and West Bengal)	Rs. 200/- (1 Rupee /House for maximum 200 houses PM for 05 months- during peak transmission season). The incentive should not be exceed Rs. 1000/ASHA/Year	NVBDCP funds

¹²Incentive has been revised from Rs 100 to Rs 200 per day for maximum three days to cover 50 houses or 250 persons

¹³ In order to ensure vector control, the role of the ASHA is to mobilize the family for IRS. She does not carry out the DDT spray. During the spray rounds her involvement would be for sensitizing the community to accept indoor spraying and cover 100% houses and help Kala Azar elimination. She may be incentivized of total Rs 200/- (Rs.100 for each round) for the two rounds of insecticide spray in the affected districts of Uttar Pradesh, Bihar, Jharkhand and West Bengal.

F)	National Iodine Deficiency Disorders Control Programme		
1	ASHA incentive for salt testing	Rs.25 a month for testing 50 salt samples	NIDDCP Funds
XI	Incentives under Comprehensive Primary Health Care (CPHC) and Universal NCDs Screening		
1	Maintaining data validation and collection of additional information- per completed form/family for NHPM – under Ayushman Bharat	Rs. 5/form/family	NHM funds
2	Filling up of CBAC forms of every individual –onetime activity for enumeration of all individuals, filling CBAC for all individuals 30 or > 30 years of age	Rs. 10/per form/per individual as one time incentive	NPCDCS Funds
3	Follow up of patients diagnosed with Hypertension/Diabetes and three common cancer for ignition of treatment and ensuring compliance	Rs. 50/per case/Bi-Annual	
4	Delivery of new service packages under CPHC component	Rs.1000/ASHA/PM (linked with activities)	NHM funds
XII	<i>Drinking water and sanitation</i>		
1	Motivating Households to construct toilet and promote the use of toilets.	Rs. 75 per household	Ministry of Drinking Water and Sanitation
2	Motivating Households to take individual tap connections	Rs. 75 per household	

ANNEXURE-II

Statement Referred in Reply to part (c) &(d) of Lok Sabha Un-Starred Q.No. 169 for 21.06.2019 asked by Shrimati Ramya Haridas & Shri Balashowry Vallabhaneni regarding 'Anganwadis'.

Statement indicating additional honorarium given by the States/UTs to AWWs/AWHs from their own resources (As on 14.06.2019)

*** Depending on the qualification and/or number of years of service**

S. No.	States/UTs	Additional honorarium given by States/UTs (In Rs.)	
		Anganwadi Workers (AWW)	Anganwadi Helpers (AWHs)
1.	Andaman & Nicobar	3000	2500
2.	Andhra Pradesh	1200	700
3.	Arunachal Pradesh	Nil	Nil
4.	Assam	2000	1000
5.	Bihar	750	375
6.	Chandigarh	2000	1000
7.	Chhattisgarh	2000	1000
8.	Dadra Nagar Haveli	1000	600
9.	Daman & Diu	1000	600
10.	Delhi	6678	3339
11.	Goa	3062-11937*	3000-6000*
12.	Gujarat	3300	1700
13.	Haryana	7286-8429*	4215
14.	Himachal Pradesh	1750	900
15.	Jammu & Kashmir	600	340
16.	Jharkhand	1400	700
17.	Karnataka	5000	2500
18.	Kerala	2000	2000
19.	Lakshadweep	3000	2000
20.	Madhya Pradesh	7000	3500
21.	Maharashtra	2000	1000
22.	Manipur	100	50
23.	Meghalaya	Nil	Nil
24.	Odisha	1000	500
25.	Puducherry	600	300
26.	Punjab	2600	1300
27.	Rajasthan	1724-1736*	1065
28.	Sikkim	2225	1500
29.	Uttarakhand	3000	1500
30.	West Bengal	1300	1300
31.	Uttar Pradesh	1000	500
32.	Nagaland	Nil	Nil
33.	Mizoram	294-306*	150
34.	Tamil Nadu	6750 (that includes pay-2500, GP-500, & DA-3750)	4275 (that includes pay-1500, GP-400, & DA-2375)
35.	Telangana	10500	6000
36.	Tripura	2865	1924

Statement Referred in Reply to part (f) of Lok Sabha Un-Starred Q.No. 169 for 21.06.2019 asked by Shrimati Ramya Haridas & Shri Balashowry Vallabhaneni regarding 'Anganwadis'. Status report of Anganwadi Centres Sanctioned,Operational and Non Operational under Anganwadi Services Scheme Quarter Ending 31.03.2019			
SI.No	State/Uts	No. of Anganwadi Centres	
		Sanctioned	Operational
1	Andhra Pradesh	55607	55607
2	Telangana	35700	35634
3	Arunachal Pradesh	6225	6225
4	Assam	62153	62153
5	Bihar	115009	99583
6	Chhattisgarh	52474	51215
7	Goa	1262	1262
8	Gujarat	53029	53029
9	Haryana	25962	25962
10	Himachal Pradesh	18925	18925
11	Jammu & Kashmir	31938	29599
12	Jharkhand	38432	38432
13	Karnataka	65911	65911
14	Kerala	33318	33244
15	Madhya Pradesh	97135	97135
16	Maharashtra	110486	110219
17	Manipur	11510	11510
18	Meghalaya	5896	5896
19	Mizoram	2244	2244
20	Nagaland	3980	3980
21	Odisha	74154	72587
22	Punjab	27314	27279
23	Rajasthan	62010	61974
24	Sikkim	1308	1308
25	Tamil Nadu	54439	54439
26	Tripura	10145	9911
27	Uttar Pradesh	190145	187997
28	Uttrakhand	20067	20067
29	West Bengal	119481	116107
30	A & N Islands	720	720
31	Chandigarh**	450	450
32	Delhi*	10897	10897
33	Dadra & N Haveli	302	302
34	Daman & Diu	107	107
35	Lakshadweep	107	107
36	Puducherry	855	855
	All India	1399697	[1400000 earlier sanctioned by GOI]
			1372872

Based on State/UTs level consolidated report.

*253 AWCs surrendered by NCT of Delhi accepted in MWCD vide order no11-33/2015-CD-I

Dated 16 November 2018.

** 50 AWCs surrendered by Chandigarh Administration accepted in MWCD vide order no.11-33/2015-CD 00dated 21 Dec., 2018

Statement Referred in Reply to part (f) of Lok Sabha Un-Starred Q.No. 169 for 21.06.2019 asked by Shrimati Ramya Haridas & Shri Balashowry Vallabhaneni regarding 'Anganwadis'. (ANNEXURE-III)

STATUS REPORT OF THE UNDER ANGANWADI SERVICES SCHEME Quarter Ending 31.03. 2019 (SANCTIONED, IN-POSITION AND VACANT POSTS)

Sl. No.	State/UT	No. OF CDPOs			No. OF SUPERVISORS			No. of AWWs			No. of AWHs		
		Sanctioned	In-position	Vacant	Sanctioned	In-position	Vacant	Sanctioned	In-position	Vacant	Sanctioned	In-position	Vacant
1	Andhra Pradesh	257	257	0	1951	1450	501	55607	54101	1506	48768	45650	3118
2	Telangana	149	149	0	1268	1045	223	35700	30781	4919	31711	29400	2311
3	Arunachal Pradesh	98	98	0	249	249	0	6225	6225	0	6225	6225	0
4	Assam	231	156	75	2269	2203	66	62153	61038	1115	56728	55949	779
5	Bihar	544	380	164	4316	2237	2079	115009	95395	19614	107894	87168	20726
6	Chhattisgarh	220	187	33	1866	1548	318	52474	49968	2506	46660	43590	3070
7	Goa	11	11	0	50	50	0	1262	1235	27	1262	1239	23
8	Gujarat	336	209	127	2049	1692	357	53029	51595	1434	51229	48710	2519
9	Haryana	148	111	37	1018	864	154	25962	25250	712	25450	24725	725
10	Himachal Pradesh	78	53	25	735	662	73	18925	18770	155	18386	18175	211
11	Jammu & Kashmir	141	135	6	1278	1256	22	31938	29599	2339	31938	29599	2339
12	Jharkhand	224	125	99	1435	1004	431	38432	37577	855	35881	34999	882
13	Karnataka	204	103	101	2503	1713	790	65911	64610	1301	62580	59819	2761
14	Kerala	258	250	8	1328	1327	1	33318	33115	203	33189	32986	203
15	Madhya Pradesh	453	453	0	3379	3379	0	97135	96028	1107	84465	83183	1282
16	Maharashtra	553	248	305	3899	3025	874	110486	94455	16031	97475	90197	7278
17	Manipur	43	41	2	398	362	36	11510	10274	1236	9958	9497	461
18	Meghalaya	41	41	0	185	185	0	5896	5896	0	4630	4630	0
19	Mizoram	27	27	0	90	86	4	2244	2244	0	2244	2157	87
20	Nagaland	60	60	0	159	159	0	3980	3980	0	3980	3980	0
21	Odisha	338	317	21	2550	2550	0	74154	71424	2730	63738	61623	2115
22	Punjab	155	143	12	1043	920	123	27314	26824	490	26074	25093	981
23	Rajasthan	304	108	196	2232	1418	814	62010	59451	2559	55806	53243	2563
24	Sikkim	13	13	0	52	52	0	1308	1308	0	1308	1308	0
25	Tamil Nadu	434	351	83	1980	1109	871	54439	49109	5330	49499	43954	5545
26	Tripura	56	37	19	406	234	172	10145	9911	234	10145	9911	234
27	Uttar Pradesh	897	453	444	6718	3832	2886	190145	173518	16627	167855	149409	18446
28	Uttarakhand	105	86	19	598	492	106	20067	19347	720	14947	14186	761
29	West Bengal	576	277	299	4779	1577	3202	119481	107603	11878	119481	101196	18285
30	A & N Islands	5	5	0	28	25	3	720	719	1	689	689	0
31	Chandigarh**	3	3	0	18	18	0	450	450	0	450	450	0
32	Delhi*	95	51	44	432	387	45	10897	9451	1446	10897	10728	169
33	Dadra & N Haveli	2	1	1	9	7	2	302	302	0	247	233	14
34	Daman & Diu	2	1	1	4	2	2	107	102	5	107	102	5
35	Lakshadweep	9	0	9	4	0	4	107	107	0	96	96	0
36	Puducherry	5	4	1	34	5	29	855	855	0	855	855	0
	Total	7075	4944	2131	51312	37124	14188	1399697	1302617	97080	1282847	1184954	97893

i) Sanctioned strength of CDPO posts (as per norms 1 CDPO per project).

ii) Sanctioned strength of Supervisor Posts (as per norms 1 for 25 Main AWCs).

iii) Vacancies of AWWs and AWHs shown against the sanctioned posts.

