

**GOVERNMENT OF INDIA  
MINISTRY OF HEALTH AND FAMILY WELFARE  
DEPARTMENT OF HEALTH AND FAMILY WELFARE**

**LOK SABHA  
UNSTARRED QUESTION NO. 914  
TO BE ANSWERED ON 23<sup>RD</sup> JULY, 2021**

**IMPACT ON ESSENTIAL HEALTH SERVICES DUE TO COVID-19**

**914. SHRI RAM MOHAN NAIDU KINJARAPU:**

Will the Minister of **HEALTH AND FAMILY WELFARE** be pleased to state:

(a) whether essential health services relating to maternal health, infant & child health, immunisation, family planning or hospital treatment for major diseases have been adversely impacted since the first case of covid was reported in the country and if so, the details thereof;

(b) the details of the provision made for such essential health services since 2018-19, State/UTwise;

(c) whether the decline in such services is worse in rural areas and if so, the details of percentage change over previous year in extending such services since 2018-19, State/UT-wise; and

(d) whether any steps have been taken by the Government to ensure that amidst the crisis, access to such services remains uninterrupted and if so, the details thereof?

**ANSWER  
THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND  
FAMILY WELFARE  
(DR. BHARATI PRAVIN PAWAR)**

(a) & (d): All essential health services relating to maternal health, infant & child health, immunisation, family planning or hospital treatment for major diseases continued to be provided during the COVID pandemic period. Public health and hospitals being a State subject, the primary responsibility to ensure provision of health services lies with the respective State/UT. However, MoHFW is continuously monitoring the implementation of essential health services & provides required guidance and need-based technical and financial assistance to States/ UTs from time to time.

The Government of India has taken the following steps in order to ensure the uninterrupted access to such services:

I. Issuing guidelines and advisories:

- (i) Guidance Note on “Enabling Delivery of Essential Health Services (including maternal, newborn, children, nutrition, immunization, abortion care and Adolescent Health and hospital treatment for major diseases) during the COVID-19 Outbreak” was released on 14.04.20 to all States and UTs.

- (ii) National guidelines to safely continue immunisation services during the COVID-19 pandemic as released on 21.05.20, wherein birth dose vaccination is to be continued at all health facilities with delivery points and immunization services are to be provided to beneficiaries who reach the immunization sessions sites in containment zones, while ensuring adherence to COVID appropriate behaviour like physical distancing, use of mask, hand sanitizer etc.
- (iii) Guidance Note on Provision of RMNCAH+N Services with special focus on pregnant women and children during and post COVID-19 Pandemic issued to states/UTs dated 24.05.2020.
- (iv) An advisory dated 16.06.20 issued by MoHFW to all States/UTs stating that ensuring access to safe delivery and antenatal and postnatal care is a non-negotiable agenda and emphasized the directives at all levels in the states to prevent and pre-empt unfortunate adverse incidents.
- (v) Appropriate communication material has been developed and shared with the States and UTs for addressing vaccine hesitancy and strengthening routine immunization with due precautions, during COVID-19 pandemic.
- (vi) In June 2021, MoHFW issued "Guideline on Operationalization of COVID care services for children and adolescents" with focus on strengthening Paediatric COVID Care services in the country and also on continuing all essential child and adolescent health services.

## II. Regular review with the States/UTs:

- (i) Regular virtual meetings by Hon'ble Union Minister for Health and Family Welfare with the State Health Ministers to impress upon them on the importance and continuation of the essential services including RMNCH+A services and with special focus on Pregnant women and children during COVID-19 pandemic.
- (ii) Rounds of virtual meetings by Secretary, Health and Family Welfare with the Principal Health Secretaries and Mission Directors of National Health Mission including sharing of best practices.
- (iii) In addition to these, various webinars/ meetings are organized by Ministry of Health and Family Welfare, with States/ UTs to review and guide for continuation of all essential services during CoVID-19 pandemic. Series of webinars were organised by AIIMS, New Delhi on treatment and management aspects of health service provision.

## III. Rolled out National Telemedicine Service – eSanjeevani

- (i) On 13th April 2020, MoHFW rolled out National Telemedicine Service- eSanjeevani comprising of two variants of eSanjeevani namely - doctor to doctor (eSanjeevani AB-HWC) telemedicine platform and patient to doctor telemedicine platform (eSanjeevaniOPD) which provides outpatient services to the citizens in the confines of their homes. Currently the eSanjeevani application is operational in 35 States/UTs and has rendered around 78 lakh consultations.

- (ii) To ensure safe and secure implementation of telemedicine services across the country, the National Medical Commission has issued Telemedicine Practice Guidelines in March 2020.
  - (iii) eSanjeevani application has also been integrated with country's 3.74 lakh Common Service Centers (CSC) to enable telemedicine services to the remotest area of the country.
- IV. In addition to above, Government of India has made provision of unique helpline No. 1921 in the Aarogya Setu App and 1075 as centralized Covid-19 helpline. Moreover, for quick transport of pregnant women and infants to the hospitals, 102, 108 and 104 numbers are also operational.
- V. Supply chain of vaccines and other logistics has been ensured during COVID-19 pandemic.
- VI. Government of India also carried out Intensified Mission Indradhanush 3.0 (Intensified Immunisation Drive) from February 2021 to March 2021.

(b): Provisions relating to maternal health, infant & child health, immunisation, family planning are included within the ambit of RMNCH+A services, which are deemed essential and continue to be essential during the Covid-19 pandemic.

Furthermore, during the period of COVID-19 pandemic, a series of guidelines were developed and disseminated for carrying out these services, while maintaining COVID appropriate behaviour

(c): As per data reported by states/UTs on the Health Management Information System (HMIS), the trend of key RMNCH+A services has remained stable in rural areas for 2018-19, 2019-20 & 2020-21. Details are placed at Annexure.

<b>Health Management Information System</b>					
	<b>% Institutional Deliveries against total reported deliveries</b>	<b>% Pregnant Woman received 4 ANC check-ups to Total ANC Registrations</b>	<b>% Newborns breast fed within 1 hour of birth against total reported live births</b>	<b>% Total reported live births against total reported deliveries</b>	<b>No. of children fully immunized in rural areas</b>
	<b>Rural</b>	<b>Rural</b>	<b>Rural</b>	<b>Rural</b>	<b>Rural</b>
2018-19	92%	75%	92%	99%	18614068
2019-20	93%	82%	93%	99%	19763849
2020-21	92%	80%	93%	100%	18401787

Source: HMIS data as on 20.7.21. HMIS data on no. of children fully immunized in rural areas is as on 21.7.21