Government of Puducherry
Department of Health and Family Welfare Services

Family Welfare Programme

Annual Report 2017-18
In the
U.T of Puducherry

Office of the Deputy Director (FW & MCH)
FAMILY WELFARE PROGRAMME

Family Welfare Programme has focused on reproductive, Maternal, Neonatal, Child and adolescent Health.

The objectives of the Family Welfare Programme are:

Stabilizing the Population at a level consistent with the needs of National development

⇒ Reducing the Maternal Mortality Rate (MMR) and Infant Mortality Rate (IMR)
⇒ Ensuring Safe delivery by SBA and achieving 100% institutional delivery.
⇒ Safe and Comprehensive abortion care
⇒ Maintaining balanced Sex - ratio
⇒ Child Health - Nutrition Diarrhea and pneumonia control and full immunization
⇒ Adolescent Health - Focusing on 7 ‘Cs coverage, Content , Communities, Clinics, Counseling, Communication and Convergence addressing on Nutrition, Sexual and Reproductive Health, Teenage Marriage, Teenage Pregnancy, Unmarried pregnancy, Gender Violence, Mental Health, Substance abuse, Road traffic accidents, Communicable and Non-Communicable disease.

Effective Implementation of the Family Welfare Programme in the U.T. has revealed substantial improvement in health status of the U.T. population constituting with very good health indicators and first few ranking in the country especially reduction in Maternal Mortality rate and Infant Mortality rate. As per the recent SRS bulletin, IMR is 10/1000Live Birth and as per the health data MMR is 62.1/10000Live Birth.

Family Welfare Programmes:- Following health services are provided under this programme

⇒ Providing temporary and permanent family planning services.
⇒ Post partum Intra Uterine Device (PPIUCD) and Interval Intra Uterine Device (IUCD) Services
⇒ Free Supply of contraceptives to the Government and Private Medical Institutions.
⇒ Free supply of Condom, oral Pills, E- Pills and Pregnancy test kits at there doorstep of public.
- Compensation abortion care Services.
- Compensation for Sterilization.
- Compensation for Sterilization failure/ Sterilization Death
- Effective Antenatal Care with early registration and 4 checkup
- 99.98% Institutional Delivery and all deliveries conducted by skilled birth attendant
- Comprehensive and effective new born care through, new born care corner, New Born Stabilization Unit and Sick New Born Care Units.
- Implementation of Janani Suraksha Yojana (JSY)
- Implementation of Janani Sisu Suraksha Karyakaramam (JSSK)
- Effective Post Natal Care and Home based Newborn Care
- Early Initiation of Breast feeding
- Exclusive Breast feeding
- Implementation of Infant and Young child feeding practices
- Child Health - Pneumonia and Diarrhoea control Programme - Intensified Diarrhoea Control Fortnight.
- Adolescent friendly health Clinics at District Hospital, CHC, PHC and Sub centres.
- Free supply of sanitary napkin to adolescent girls under Menstrual Hygiene Scheme
- Adolescent health to combat the prevalence of anemia.
  a) Weekly iron and Folic Acid Programme.
  b) National Iron plus Initiative Programme.
  c) National De-worming Programme are implemented effectively.

Conducting of Laparoscopic Sterilization camp & Non - Scalpel Vasectomy Camp at Karaikal & Yanam District.

**REGION-WISE FAMILY WELFARE PERFORMANCE - 2017-18**

<table>
<thead>
<tr>
<th>Region</th>
<th>ANC</th>
<th>TT2</th>
<th>IFA</th>
<th>Vasectomy</th>
<th>Tubectomy</th>
<th>IUD</th>
<th>OP</th>
<th>Condoms</th>
<th>MTP</th>
</tr>
</thead>
<tbody>
<tr>
<td>Puducherry</td>
<td>50893</td>
<td>10656</td>
<td>37286</td>
<td>8</td>
<td>5622</td>
<td>2663</td>
<td>10983</td>
<td>67404</td>
<td>542</td>
</tr>
<tr>
<td>Karaikal</td>
<td>6244</td>
<td>2123</td>
<td>3351</td>
<td>1</td>
<td>918</td>
<td>251</td>
<td>2994</td>
<td>9423</td>
<td>48</td>
</tr>
<tr>
<td>Mahe</td>
<td>907</td>
<td>498</td>
<td>849</td>
<td>0</td>
<td>177</td>
<td>65</td>
<td>531</td>
<td>4588</td>
<td>59</td>
</tr>
<tr>
<td>Yanam</td>
<td>1366</td>
<td>992</td>
<td>1555</td>
<td>3</td>
<td>223</td>
<td>70</td>
<td>1076</td>
<td>3410</td>
<td>14</td>
</tr>
<tr>
<td>Private Ins.</td>
<td>29255</td>
<td>8932</td>
<td>62300</td>
<td>3</td>
<td>1587</td>
<td>163</td>
<td>632</td>
<td>1439</td>
<td>653</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>88665</strong></td>
<td><strong>23201</strong></td>
<td><strong>105341</strong></td>
<td><strong>15</strong></td>
<td><strong>8527</strong></td>
<td><strong>3212</strong></td>
<td><strong>16216</strong></td>
<td><strong>86264</strong></td>
<td><strong>1316</strong></td>
</tr>
</tbody>
</table>
NATIONAL DE-WORMING DAY (NDD PROGRAMME): Under the direction and guidance of Government of India, National de-worming day is observed nationwide on 10th Feb and 10th August of every year in order to provide a worm-free future for the children of India which in turn reduced the prevalence of malnutrition and anemia in children. Children and adolescent (1-19 years of age) are given with de-worming tablet through the platform of Schools (All the Government, Government-aided, and private Schools) and Anganwadi centres.

Under this programme, coverage of 98.96 % was achieved during 10th August 2017 and 99.04 % was achieved during 9th February 2018.

Mother Absolute Affectionate (MAA): This Programme launched in UT of Puducherry on 20.12.2017 at RGGW&CH. The “MAA” campaign is a comprehensive set of activities encompassing various elements of protection, promotion of breastfeeding at community and facility level.

The key activities under the campaign (MAA) are
A. Awareness generation through mass and mid media
B. Orientation of ANM on Breastfeeding & community dialogue through Mother Meetings;
C. Role re-enforcement regarding lactation support services & Capacity building of ANM/SN/Medical officers – at all Sub-Centres & delivery points;
D. Recognition for best performing baby friendly facilities through team awards.

Intensified Diarrhea Control Fortnight (IDCF):- was launched on 14th July 2014.

Upper Mid-Arm Circumference measurement was done among 0-5 Years population for 90409 children during June 2017, result of which are as follows.

- Stunted growth Survey done --- 8.8 %
- Management of Pneumonia.

PRE-CONCEPTION AND PRE-NATAL DIAGNOSTIC TECHNIQUES ACT

With a view to improve the declining sex ratio (Number of females per thousand males) and to contain the menace of female foeticide, the Pre-Conception And Pre-natal Diagnostic Techniques (Regulation and prevention of Misuse) Act, 1994 (PNDT Act) had been implemented with effect from 1.1.1996. On effective implementation of the act, the female birth sex ratio is 930/1000 live birth in 2016-17 even as the female sex ratio is 940/1000 male births in 2017-18. It shows constant increase in female sex ratio

PC & PNDT Act is being implemented, strictly adhering to the Directions of the Supreme Court. As of 31/03/2018, there are 96 scan centres/ genetic clinic existing in the UTP, details of which are as follows.
## District-Wise Scan Centres as of 31/03/2018

<table>
<thead>
<tr>
<th>Districts</th>
<th>Government</th>
<th>Private</th>
</tr>
</thead>
<tbody>
<tr>
<td>Puducherry</td>
<td>8</td>
<td>75</td>
</tr>
<tr>
<td>Karaikal</td>
<td>1</td>
<td>8</td>
</tr>
<tr>
<td>Mahe</td>
<td>1</td>
<td>1(Co-op)</td>
</tr>
<tr>
<td>Yanam</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>11</strong></td>
<td><strong>85</strong></td>
</tr>
</tbody>
</table>

Under PC&PNDT Act the following statutory bodies have been constituted:
1. State Supervisory Board for Union Territory of Puducherry.
2. State Appropriate Authority
3. State Advisory Committee
4. District Advisory Committee
5. State and District Inspecting & Monitory Committee
6. State Appellate Authority
7. State Vigilance squad.

Deputy Director (FW&MCH) is the Nodal officer for the effective implementation of this Act in the U.T. of Pondicherry. The Nodal Officer and inspecting and monitoring committee is exercising inspection over the scan centres to explore the misuses such as
   I. whether scan centres are indulged in mal practices violating the provisions of the Act.
   II. Whether the registered machines are installed in the scan centres and required registers are maintained properly.

3. Further, the inspecting committee inspects the scan centre’s / Genetic clinic which applied for new registration and renewal. On the basis of inspection, report is submitted to the state Advisory committee for approval. Surprise inspections are frequently exercised by the team

### Training:

The following training Programme are conducted for the Medical Officer, Staff Nurse, Male and Female Health Worker, Anganwadi Worker, School teacher and Family Planning Counselors to update and improve their efficiency.
Skilled Birth attendant training  
PPIUCD training  
Interval IUCD training  
Navjit Sisu Sureksha Kariyakram training  
Home based New Born Care Training  
Facility based New Born Care Training  
IMNCI - Integrated Management of new born and Child illness  
FIMNCI-Facility Based Integrated Management of Newborn and Child Illness  
Maternal care training  
Training on Newer Scheme like WIFS, NDD, NIPI.  
PC&PNDT Training  
Rastriya Kishore swastiya Kariyakram training.  

**FAMILY PLANNING INDEMNITY SCHEME:**

The Quality Assurance Committee constituted under Family planning indemnity scheme (FPIS) recommends for providing compensation to sterilization Failure cases. Accordingly 37 failure cases are recommended during the year 2017-18. Details of Maternal Death occurred in the UTP for the year 2017-18 are as per the below table.

<table>
<thead>
<tr>
<th>PARTICULARS</th>
<th>PONDY</th>
<th>TAMIL NADU</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>No of Maternal Death cases</td>
<td>10</td>
<td>17</td>
<td>27</td>
</tr>
</tbody>
</table>

(Dr. J. ALLIRANI)  
DEPUTY DIRECTOR (FW & MCH)  
PUDUCHERRY