

# Sustainable Development Goals -3

## 8.1 Introduction

The Sustainable Development Goals (SDGs) were adopted in September 2015 to set out a vision for a world free of poverty, hunger, disease and want. The 2030 Agenda for Sustainable Development consists of 17 various SDGs. NITI Aayog has been entrusted with the responsibility for coordinating and overseeing the implementation of the 2030 Agenda in India. Out of these 17 SDGs, SDG-3 relates to “Good Health and Well Being”.

Government of Telangana decided to implement the SDGs in the State (January 2016) and launched an initiative titled “Telangana 2030 in the light of SDGs”. A Committee was constituted (December 2018) under the Chairmanship of the Chief Secretary to Government. The Planning Department was the nodal agency for ensuring the implementation of the SDGs in the State and coordinating on SDGs. All line Departments were made responsible for implementing the programmes as mapped with the SDGs.

To achieve the SDG-3 targets, in addition to the Health Department, other Departments viz., Women and Child Development Department, Municipal Administration & Urban Development Department were also mapped.

Sustainable Development Goal -3 seeks to ensure good health and well-being for all, at every stage of life. Sustainable Development Goal -3 addresses all major health priorities, including reproductive, maternal and child health; communicable, non-communicable and environmental diseases; universal health coverage; and access for all to safe, effective, quality and affordable medicines and vaccines. It also calls for more research and development, increased health financing and strengthened capacity of all countries in health risk reduction and management.

## 8.2 Policy and Framework for implementation of SDGs

### 8.2.1 Institutional Framework

A Draft State Indicator Framework had been developed by the Planning Department (March 2019) and distributed to all the Departments for their inter Departmental convergence and coordination. When Planning Department was addressed regarding the specific Targets, Plans, State Indicators Frame Work prepared Department-wise and formation of District Level Committees for inter Departmental convergence and coordination for achieving these targets, it was replied (February 2023) that the Draft Vision Document had been prepared (March 2019) by the Planning Department which had also identified additional indicators. However, copy of the Vision Document prepared by the Planning Department and other related information called for was not provided to Audit.

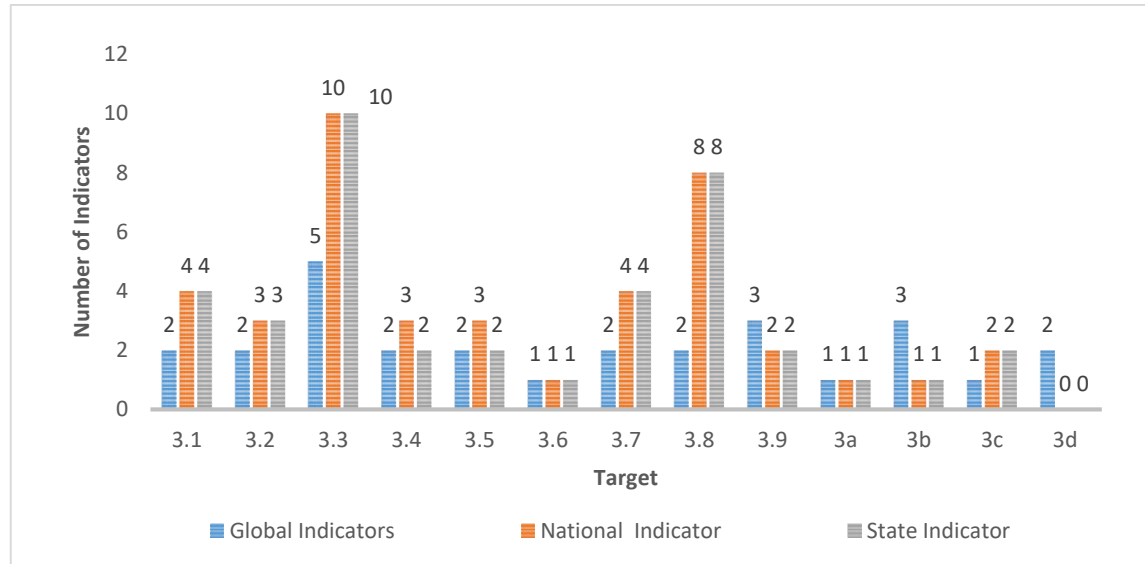
## 8.2.2 Status of SDG-3 Health Indicators in Telangana

Table 8.1 – Status of SDG-3 health indicators in Telangana

Sl. No	Target	Indicators	Target 2030	India	State	Source
1	3.1	3.1.1 Maternal Mortality Rate (per 1,00,000 live births)	70	97	43	SRS 2018-20
2		3.1.2 Percentage of Home deliveries attended by Still Birth Attendance (SBA) (Doctor/ Nurse/ ANM)	100	89.4	93.6	NFHS-5
3		3.1.3 Percentage of women aged 15–49 years with a live birth, for last birth, who received Antenatal care, four times or more (in percentage)	100	58.1	70.4	NFHS-5
4		3.1.4 Percentage of Institutional deliveries conducted (including C-sections)	100	88.6	97	NFHS-5
5	3.2	3.2.1 Under 5 mortality rate (per 1,000 live births)	25	41.9	29.4	NFHS-5
6		3.2.2 Neonatal mortality rate, (per 1,000 live births)	12	24.9	16.8	NFHS-5
7		3.2.3 Percentage of children in the age group 12-23 months fully immunised	100	76.4	79.1	NFHS-5
8		3.2.4 Infant Mortality rate		35.2	26.4	NFHS-5
9	3.3	3.3.1 Number of new HIV infections per 1,000 uninfected population	0	0.05	0.05	India HIV estimates 2021 fact sheet
10		3.3.2 Tuberculosis incidence per 1,00,000 population	0	188	160	TB statistics and information furnished by State
11		3.3.3 Malaria incidence per 1000 population	0	0.34	NA	
12		3.3.10 HIV Prevalence Rate (in <i>per cent</i> )	0	0.21	0.47	India HIV estimates 2021 fact sheet
13	3.4	3.4.2 Suicide mortality rate	3.5	10.4	20.6	SDG Niti Aayog Index 2021
14	3.6	3.6.1 Death rate due to road traffic injuries	5.81	11.56	18.68	SDG Niti Aayog Index 2021
15	3.7	3.7.1 Percentage of currently married women (15–49 years) who use any modern family planning methods (like indicator 3.8.1 and 5.6.1)	100	66.7	68.1	NFHS-5
16	3.8	3.8.2 Percentage of TB cases successfully treated (cured plus treatment completed) among TB cases notified to the national health authorities during a specified period	100	83	89	TB annual report 2022 p.179
17		3.8.3 Percentage of people living with HIV, currently receiving ART among the detected number of adults and children living with HIV	100	85	77	India HIV estimates 2021

Details of the indicators are given in **Appendix 8.1**. Status of indicators adopted by the State of Telangana in respect of the SDG-3 (Global, National and adopted by State) are given in the chart below:

**Chart 8.1 - Status of indicators formulated/adopted by Telangana for targets of SDG-3**



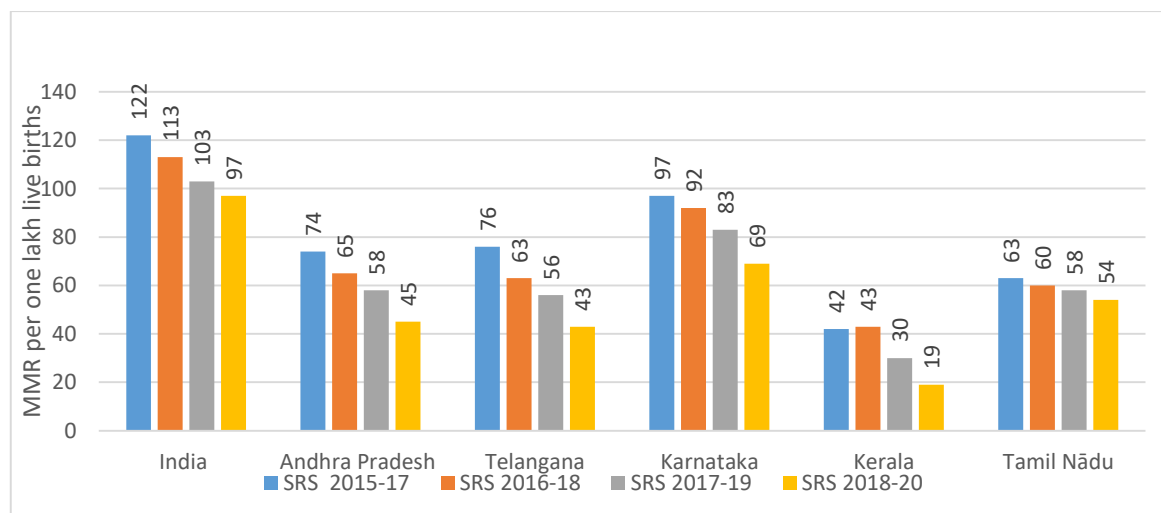
Source: Information furnished by the Department

### 8.3 Sustainable Development Goals Index Reports

#### 8.3.1 Maternal Mortality Rate (MMR)

SDG Target 3.1 aims at reducing the global MMR to less than 70 per 1,00,000 live births by 2030. MMR in respect of the State and other neighbouring Southern States in the India as per Sample Registration System (SRS) was as follows:

**Chart 8.2 - Comparison of MMR of Telangana with MMR of India and other neighbouring Southern States**



Source: Sample Registration System

As evident from the chart, Telangana had already achieved the required target of Maternal Mortality Rate (MMR) less than 70.

### 8.3.2 KCR Kit Scheme to address MMR

Year-wise details of the Budget released and Expenditure incurred in respect of Aarogya Lakshmi and KCR Kit programme which are aimed at addressing the MMR and IMR are given in the table 8.2.

**Table 8.2 – Details of Budget released and expenditure incurred**

Year	Aarogya Lakshmi (₹ in crore)		KCR Kit (₹ in crore)	
	Budget Received	Expenditure	Budget Received	Expenditure
2016-17	451.85	180.99		
2017-18	429.00	176.32	605.00	271.78
2018-19	297.79	99.23	420.50	303.92
2019-20	171.96	117.38	490.50	490.50
2020-21	184.68	140.67	443.00	221.50
2021-22	299.30	289.91	443.00	164.92

Source: VLC data

### 8.3.3 Immunisation

Immunisation is one of the most important and cost-effective strategies for the prevention of childhood sicknesses and disabilities and is thus a basic need for all children. India's Universal Immunisation Programme provide free vaccines against 11 life threatening diseases - Tuberculosis, Diphtheria, Pertussis, Tetanus, Polio, Hepatitis B etc. The Ministry of Health, GoI prescribes a schedule for the immunisation programme.

**Table 8.3 - Immunisation data in respect of India, State and other Southern States**

State	2015-16 ( NFHS – 4)		2019-20 ( NFHS-5 )	
	Rural (% of achievement)	Urban (% of achievement)	Rural (% of achievement)	Urban (% of achievement)
India	61.3	63.9	76.8	75.5
Andhra Pradesh	67.2	60.4	74.7	69.3
Telangana	68.3	66.7	81.5	74.7
Karnataka	64.8	59.8	86.5	80.0
Kerala	82.0	82.2	78.0	77.6
Tamil Nādu	66.8	73.3	91.7	86.4

Source: NFHS 4 and NFHS 5

### 8.3.4 Infant Mortality Rate (IMR)

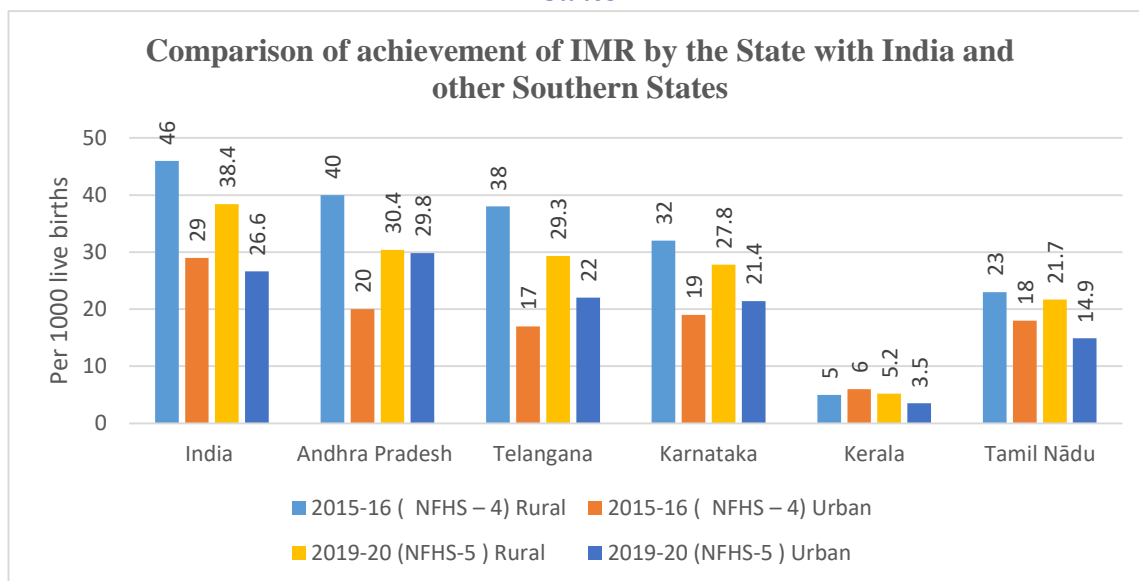
As there was no specific target for IMR in the SDG, Audit compared IMR with the targets specified in NHP 2017. As per NHP, Infant Mortality Rate was to be reduced to 28 per 1000 live births by 2019.

**Table 8.4 - IMR in respect of India, State and other Southern States**

State	2015-16 ( NFHS – 4)		2019-20 (NFHS-5 )	
	Rural	Urban	Rural	Urban
India	46.0	29.0	38.4	26.6
Andhra Pradesh	40.0	20.0	30.4	29.8
Telangana	38.0	17.0	29.3	22.0
Karnataka	32.0	19.0	27.8	21.4
Kerala	5.0	6.0	5.2	3.5
Tamil Nādu	23.0	18.0	21.7	14.9

Source: NFHS 4 and NFHS 5

**Chart 8.3 - Comparison of achievement of IMR by the State with India and other Southern States**



NFHS 4: National Family Health Survey – 4; NFHS 5: National Family Health Survey – 5

Source: NFHS

Although Telangana had achieved the required target of Infant Mortality Rate (IMR) to 28 in urban areas, the same was not achieved in the rural areas as of 2019-20.

Government in its response stated (August 2023) that, there was no set target for IMR by GoI and that the State was constantly working to improve health systems and healthcare delivery mechanism to reduce IMR which resulted in IMR reducing from 40 per 1000 live births (2014) to 21 per 1000 live births (2019-20).

### 8.3.5 Under -5 Mortality Rate (U5MR)

SDG Target 3.2 aims to reduce mortality rate of children under age of 5 years (U5MR) to as low as 25 per 1000 live births by 2030. U5MR in respect of the State and other Southern States in India as per NFHS was as follows:

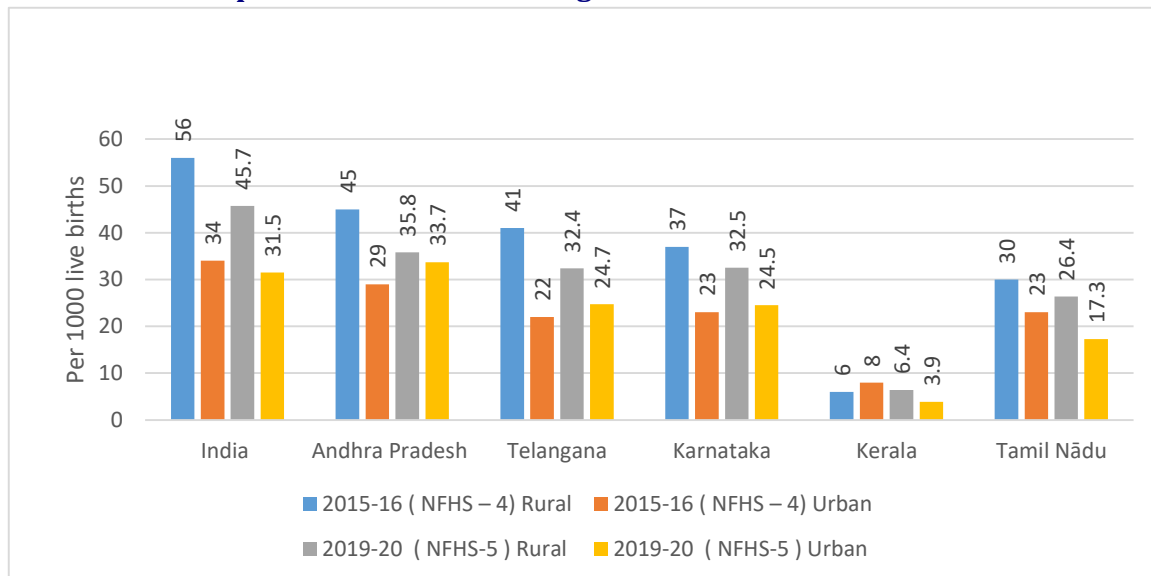
**Table 8.5 - Comparison of U5MR of Telangana with India and other Southern States**

State	2015-16 (NFHS – 4)		2019-20 (NFHS-5)	
	Rural	Urban	Rural	Urban
India	56.0	34.0	45.7	31.5
Andhra Pradesh	45.0	29.0	35.8	33.7
Telangana	41.0	22.0	32.4	24.7
Karnataka	37.0	23.0	32.5	24.5
Kerala	6.0	8.0	6.4	3.9
Tamil Nādu	30.0	23.0	26.4	17.3

NFHS 4: National Family Health Survey – 4; NFHS 5: National Family Health Survey – 5

Source: NFHS

**Chart 8.4 - Comparison of U5MR of Telangana with India and other Southern States**



**Source:** NFHS 4: National Family Health Survey-4; NFHS 5: National Family Health Survey-5

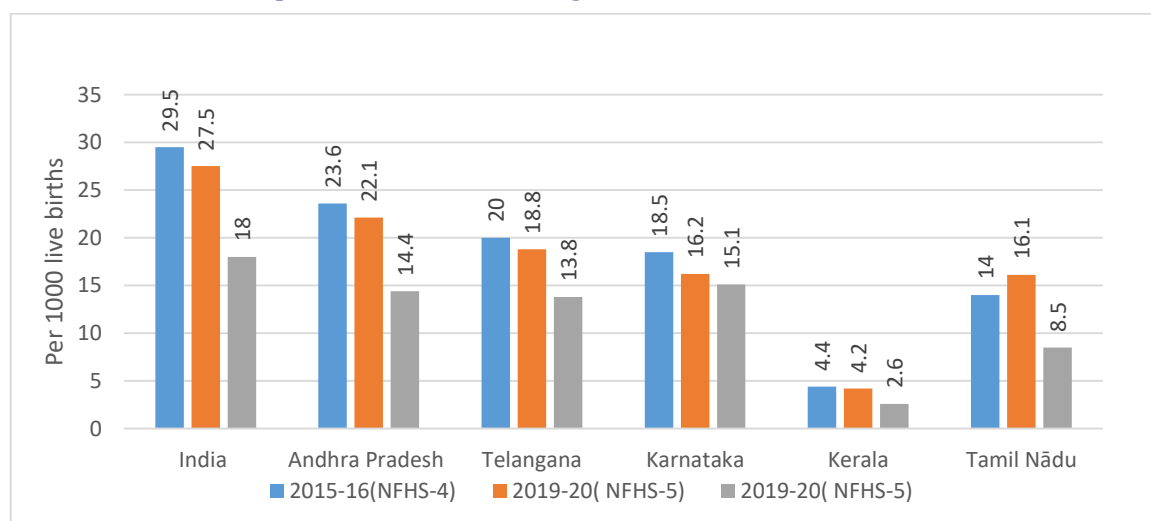
Although Telangana had achieved the required target of Under 5 Mortality Rate (U5MR) of 25 per 1000 live births in urban areas, the same was not achieved in the rural areas.

Government in its response stated (August 2023) that, although the SDG target for U5MR of 25 per 1000 live births was to be achieved by 2030, it had already achieved it and U5MR of Telangana was only 23 per 1000 live births which was less than the national achievement of 32 per 1000 live births.

### 8.3.6 Neonatal Mortality Rate (NMR)

Target 3.2 also aims to reduce NMR to as low as 12 per 1000 live births by 2030. NMR in respect of the State, India and other Southern States in the India as per National Family Health Survey (NFHS) is as follows:

**Chart 8.5 - Comparison of NMR of Telangana with India and other Southern States**

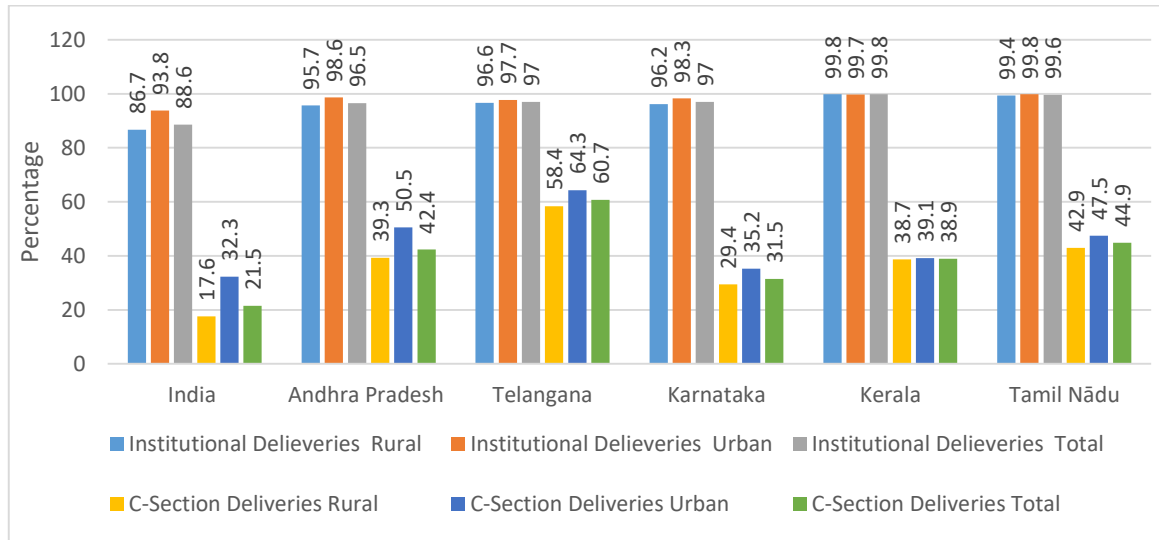


**Source:** NFHS

### 8.3.7 Institutional Deliveries

Target 3.1.4 aims 100 per cent Institutional deliveries conducted (including C-sections) by 2030. Institutional deliveries and caesarean deliveries in respect of rural and urban in respect of Telangana as per NFHS is as follows.

**Chart 8.6 - Comparison of Institutional Deliveries of Telangana with India and other Southern States**



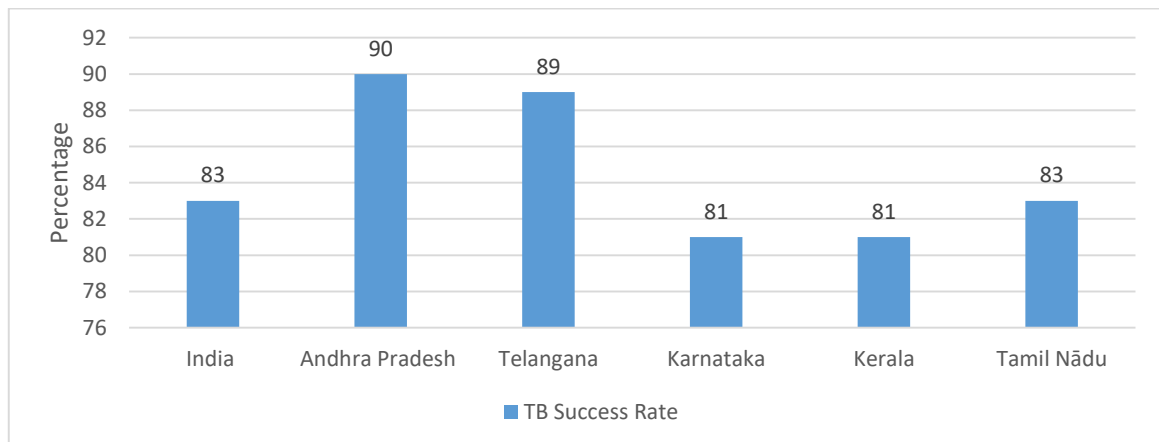
Source : NFHS -5

### 8.3.8 Tuberculosis Success Rate

As per Target 3.8.2, Percentage of TB cases successfully treated (cured plus treatment completed) among TB cases notified to the National Health authorities during a specified period is to be 100 per cent by 2030. Further, as per the National Tuberculosis Elimination Programme 2017, TB should be eliminated by 2025. In line with this objective, a target was set to achieve a Tuberculosis (TB) Incidence Rate of 77 per 100,000 population by 2023.

As per the TB Statistics in India 2022 Report, the TB Incidence Rate in respect of India, Telangana and other Southern States are given in the chart below:

**Chart 8.7 - Comparison of Tuberculosis Success Rate of Telangana with India and other Southern States**

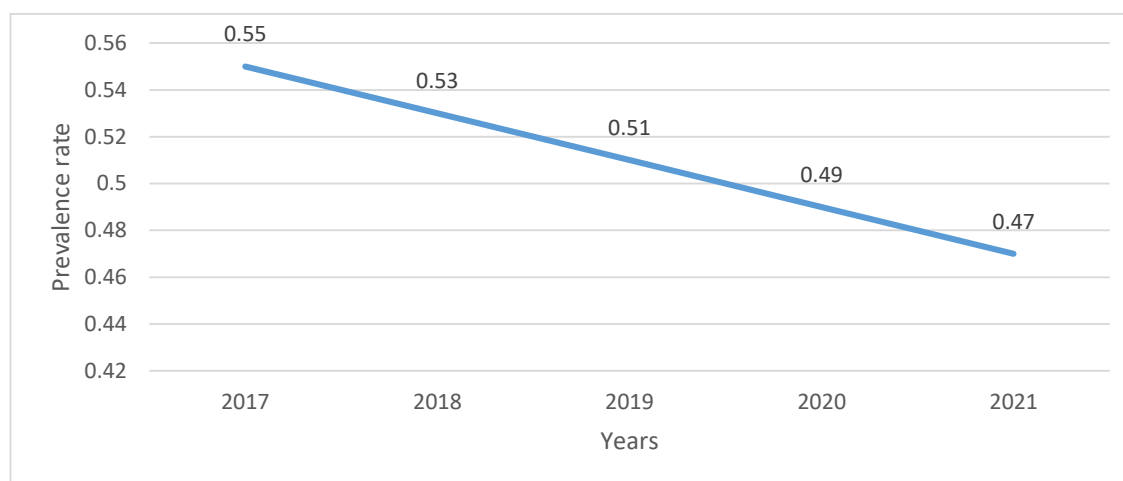


Source: TB statistics India 2022

### 8.3.9 HIV Prevalence Rate

Target 3.3.10 sets the target that, HIV Prevalence Rate (in *per cent*) should be zero by 2030.

**Chart 8.8 – HIV Prevalence Rate (in *per cent*)**



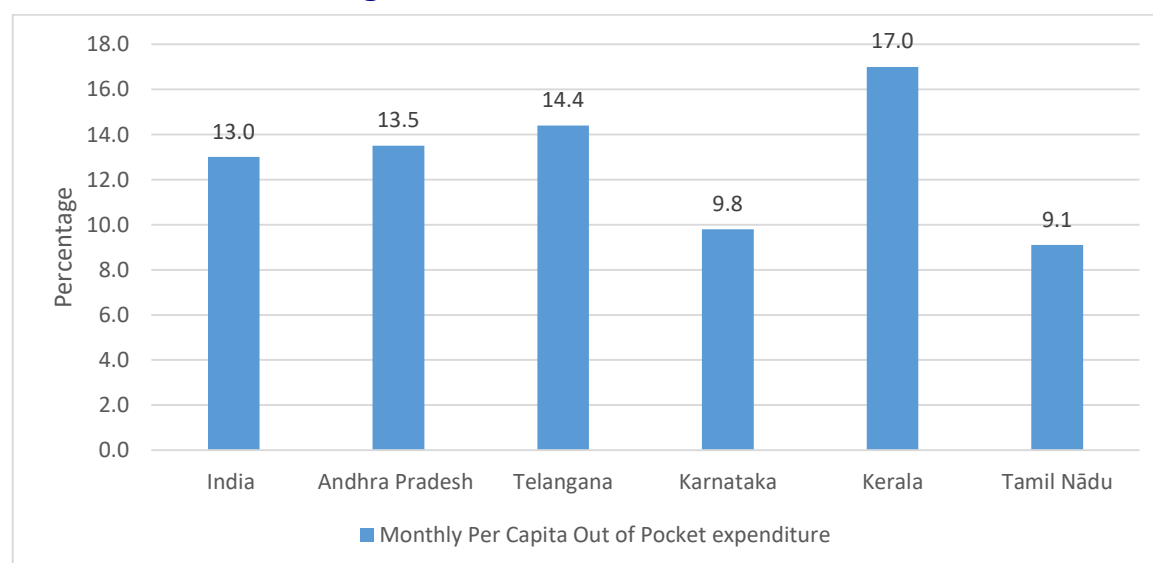
Source: - HIV fact sheet 2021

The HIV prevalence rate of Telangana showed a declining trend during the period 2017 to 2021 as indicated in Chart 8.8.

### 8.3.10 Monthly per capita Out-Of-Pocket Expenditure on health

By 2030, the target of Monthly per capita out-of-pocket expenditure on health as a share of Monthly Per capita Consumption Expenditure (MPCE) is 7.83 *per cent*. This target corresponds to the global SDG target 3.8 which aims to achieve universal health coverage, including financial risk protection and access to affordable essential medicines and vaccines for all.

**Chart 8.9 - Comparison of Monthly per capita Out of Pocket Expenditure of Telangana with India and other Southern States**



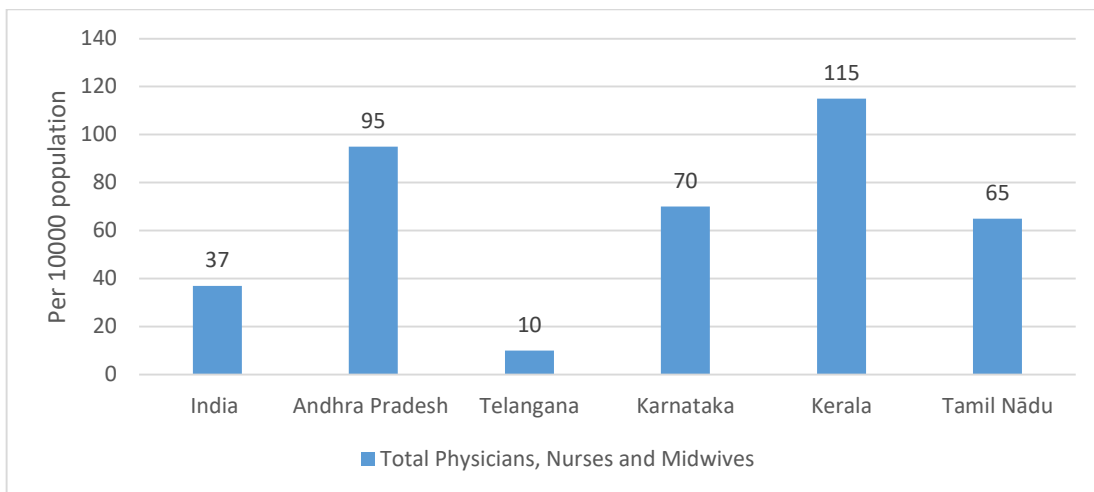
Source: NITI Aayog SDG Index 2021



### 8.3.11 Total Physicians, Nurses and Midwives per 10,000 population

Global SDG Target 3c aims to substantially increase health financing and the recruitment, development, training and retention of the health workforce. The target fixed for skilled health professionals' density (Physicians/Nurses/Midwives per 10,000 population) is 45 by 2030.

**Chart 8.10 - Comparison of Total Physicians, Nurses and Midwives per 10,000 population of Telangana with India and other Southern States**

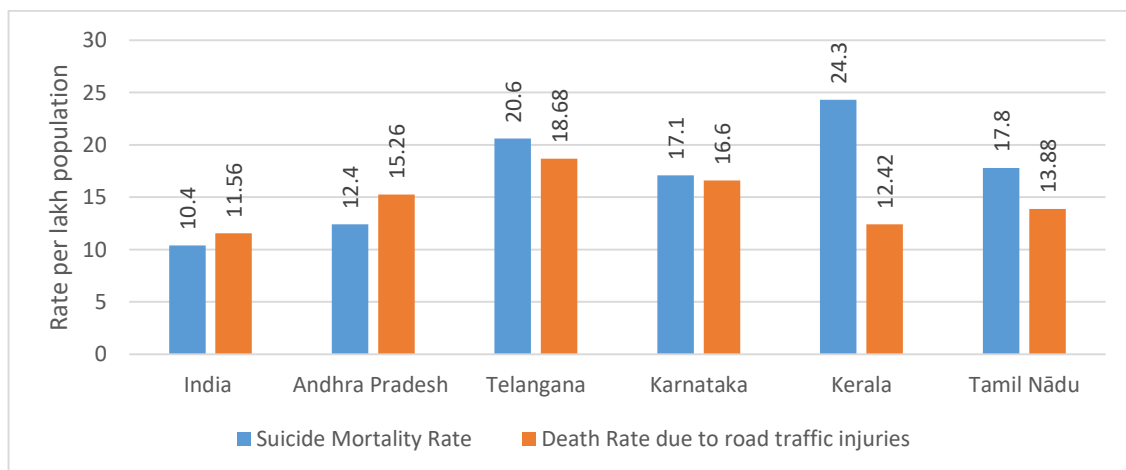


Source: NITI Aayog SDG Index 2021

### 8.3.12 Suicide Mortality Rate and Death Rate due to Road Traffic Injuries/Accidents

Global SDG target 3.4 aims to reduce by one-third premature mortality from non-communicable diseases through prevention, treatment and to promote mental health and well-being, by 2030. The target fixed for reducing the Suicide rate (per 1,00,000 population) is 3.5. Target 3.6 of SDG aims to have the number of global deaths and injuries from road traffic accidents reduced and under this, the target fixed for the Death rate due to road traffic accident/injuries is 5.81 per lakh.

**Chart 8.11 - Comparison of Suicide Mortality Rate and Death Rate due to Road Traffic Injuries/Accidents of Telangana with India and other Southern States**

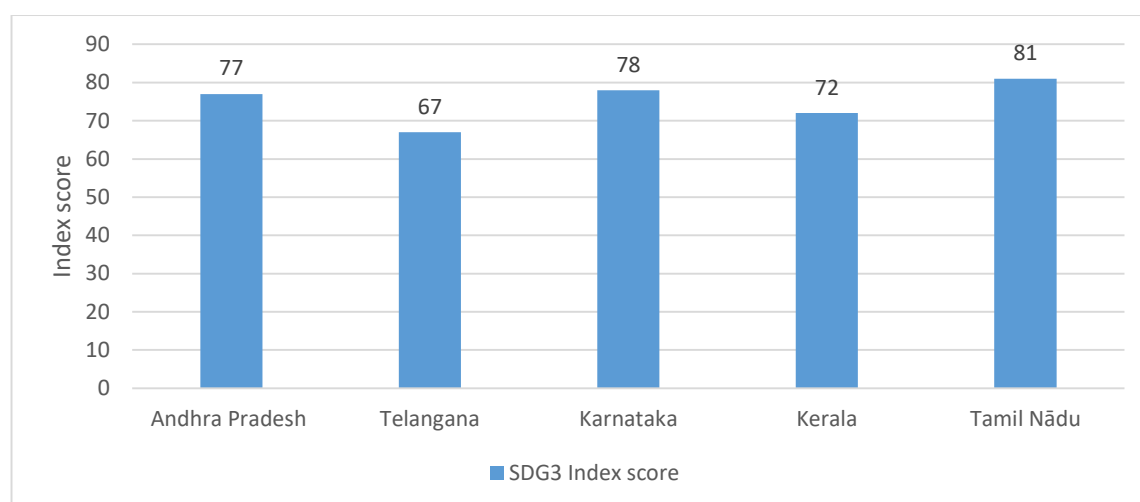


Source: - NITI Aayog SDG Index 2021

## 8.4 SDG-3 Index score

To measure India's performance towards the Goal of Good Health and Well-Being, 10 National level Indicators had been identified, which capture eight out of the thirteen SDG Targets for 2030 outlined under this Goal. NITI Aayog had assessed the performance of States based on these indicators, the SDG Index Score of Telangana and other Southern States was as follows.

Chart 8.12 - SDG-3 Index score



Source: NITI Aayog SDG Index 2021

Telangana was graded as a front runner as it had secured a score of 67 in view of the performance of State in respect of implementation on MMR (63), U5MR (30), immunisation of children in the age group 9-11 (98), TB notification (192), HIV incidence rate (0.08), Suicide Rate (20.6), Death due to traffic accidents (18.68), Institutional deliveries (99.90), OOPE (14.40), Availability of total Physicians, Nurses and Midwives (10) as per the parameters considered by NITI Aayog.

## 8.5 Conclusion

*Telangana had already achieved the required target of Maternal Mortality Rate (MMR) of less than 70 per 100,000 live births. The State had met the target Infant Mortality Rate (IMR) of 28 per 1000 live births in urban areas, but it fell short in rural areas. Similarly, while achieving the target of Under-5 Mortality Rate (U5MR) of 25 per 1000 live births in urban areas, Telangana did not meet this goal in rural areas. There was an increase in the percentage of institutional deliveries in Telangana during NFHS-5 as compared to NFHS-4, Caesarean deliveries percentage in NFHS 5 had increased in both in Urban and rural areas. C-Section deliveries were higher in Telangana as compared to the National average. Further, the C-Section deliveries in Government Health facilities decreased from 60 (2017-18) to 39 per cent (2021-22), while C-Section deliveries in Private Health facilities increased from 40 (2017-18) to 61 per cent (2021-22).*

*Monthly Per Capita Out-of-Pocket Expenditure on health in the State is higher than the National average. The State also fell short of achieving the target of 45 health*


*professionals per 10,000 population to be achieved. The suicide mortality rate and Deaths due to road traffic injuries in Telangana are higher than that of National average.*

*As per the NITI Aayog SDG Index 2021, Telangana is in Front Runner category with an Index Score of 67. Telangana has performed well in aspects of MMR, Immunisation, IMR, U5MR, NMR, Institutional Deliveries and Tuberculosis success rate. However, still there is scope for improvement in respect of certain indicators, viz., Total Physicians, Nurses and Midwives per 10000 population, Suicide Mortality Rate, Death rate due to Road Traffic Accidents, Caesarian Deliveries etc.*

## 8.6 Recommendations

- State Government may ensure achievement of targets and plans by the Health Department and associated line Departments to achieve the SDG-3 goals.
- State Government may take all the necessary measures to address the issues of higher Infant Mortality Rate, Under-5 Mortality Rate and Neonatal Mortality rate in rural areas, Suicide Mortality Rate and Deaths due to Road Traffic Accidents.

Hyderabad  
The 10 July 2024

  
(P. MADHAVI)  
Accountant General (Audit)  
Telangana

Countersigned

New Delhi  
The 12 July 2024

  
(GIRISH CHANDRA MURMU)  
Comptroller and Auditor General of India