

Chapter X: Sustainable Development Goals-3

The Sustainable Development Goals (SDGs) evolved from the Millennium Development Goals (MDGs). The MDGs were a set of eight international development goals with 18 quantifiable targets for the year 2015 set by the Millennium Summit of the United Nations in 2000. MDGs were the first global attempt at establishing measurable goals and targets on key challenges facing the world within a single framework and galvanised countries and communities into action.

The Sustainable Development Goals 2030 Agenda was adopted by the United Nations General Assembly in September 2015 to set out a vision for a world free of poverty, hunger, disease and want and came into effect from 1st January 2016, to be achieved by 2030. There are 17 SDGs (SDG-1 to SDG-17) and 169 targets for sustainable development. India is committed to 2030 Agenda and SDGs were to be taken as the key contours of envisioning development up to the local level.

SDG - 3 seeks to ensure health and well-being for all, at every stage of life. The goal addresses all major health priorities, including reproductive, maternal and child health; communicable, non-communicable and environmental diseases; universal health coverage; and access to safe, effective, quality and affordable medicines and vaccines.

In India, National Institution for Transforming India (NITI) Aayog is responsible for overall coordination of the SDGs and the Ministry of Statistics and Programme Implementation (MoSPI) is responsible for the formulation of the National Indicator Framework (NIF) to monitor the SDGs.

'Drishti Himachal Pradesh-2030 was launched (March 2019) by the State Government to achieve Sustainable Development Goals. In light of the Agenda for Sustainable Development-2030, which aims at leaving no one behind in sharing the benefits of development, the State Government had been pursuing inclusive growth with the motto of "Sabka Saath-Sabka Vikas".

The State Government was committed to attain synergy between faster and inclusive economic growth, social cohesion and environmental sustainability in Himachal Pradesh to facilitate overall prosperity and a better quality of life for the people of the State by building partnerships with the private sector, civil society institutions, knowledge communities, panchayats, local bodies, domain experts and citizens of the State.

State Health & Family Welfare Department was nominated as the nodal department for planning, preparation of a road map, implementation and monitoring of SDG-3, Good Health and Well-Being, which calls on countries to ensure healthy lives and promote well-being for all at all ages.

10.1 Formulation of State Indicator Framework and District Indicator Framework

To monitor and measure the progress of SDGs, State Governments were to formulate State Indicator Framework (SIF) and District Indicator Framework (DIF) in consultation with National Institution for Transforming India (NITI) Aayog. The State Governments have been

given flexibility to develop their own indicators taking into consideration local priorities to monitor SDGs and National Indicator Framework (NIF) will serve as a basis. A brief description of the 13 global targets under SDG-3 is given in **Table 10.1**.

Table 10.1: Details of global targets

Target No.	Brief description
3.1	By 2030, reduce the maternal mortality ratio (MMR) ¹ to less than 70 per 1,00,000 live births.
3.2	By 2030, end preventable deaths of newborns and children under 5 years of age, aiming to reduce neonatal mortality to at least as low as 12 per 1,000 live births and under-5 mortality to at least as low as 25 per 1,000 live births.
3.3	By 2030, end the epidemics of AIDS, tuberculosis, malaria and neglected tropical diseases and combat hepatitis, water-borne diseases and other communicable diseases.
3.4	To reduce the premature mortality due to NCDs (Non communicable disease) by 1/3 rd by 2030 (to decrease prevalence of NCDs and to increase treatment compliance. To promote Mental Health and well-being).
3.5	Strengthen the prevention and treatment of substance abuse, including narcotic drug abuse and harmful use of alcohol.
3.6	By 2020, halve the number of deaths and injuries from road traffic accidents
3.7	By 2030, ensure universal access to sexual and reproductive health-care services, including for family planning, information and education, and the integration of reproductive health into national strategies and programmes.
3.8	Achieve universal health coverage (UHC), including financial risk protection, access to quality essential health-care services and access to safe, effective, quality and affordable essential medicines and vaccines for all.
3.9	By 2030, substantially reduce the number of deaths and illnesses from hazardous chemical and air, water and soil pollution and contamination.
3.a	Strengthen the implementation of the World Health Organization Framework Convention on Tobacco Control in all countries, as appropriate.
3.b	To support the research and development of vaccines and medicines for the communicable and non-communicable diseases.
3.c	Substantially increases health financing and the recruitment, development, training and retention of the health workforce (Health+ Ayurveda).
3.d	Strengthen the capacity for early warning, risk reduction and of local, national and global health risks.

A comparative analysis (**Appendix 12**) of indicators for the 13 global targets was done by Audit to assess availability of indicators for SDG-3 by scrutinising Global Indicator Framework, National Indicator Framework (NIF), and State Indicator Framework (SIF). Scrutiny of records/reports revealed:

1. There are 28 Global Indicators and 41 National Indicators covering all 13 Global targets under SDG -3. In Himachal Pradesh as per 'Drishhti Himachal Pradesh-2030', there are 28 State indicators which covers all 13 global targets.
2. District Indicator Framework has not been prepared as of October 2022.
3. The State Government adopted the SDG- 3 goals after a delay of nearly two and a half years from the date of adoption of national indicators. This shows that the Government of Himachal Pradesh had not taken timely action to adopt the national indicators.

¹ MMR in Himachal Pradesh could not be calculated due to less than one lakh births per year, hence, maternal deaths have been reflected in absolute number.

10.2 Planning for SDG-3

State Health and Family Welfare Department was nominated as the nodal department for planning, preparation of a road map, implementation and monitoring of SDG-3.

The nodal department was required to prepare a road map, three-year and seven-year action plan, ensure implementation, assessment, review and hold regular review meetings with other departments concerned to achieve the targets under SDG- 3.

Audit observed the following:

- The nodal department had prepared a road map, three-year and seven-year action plan in December 2016.
- The Department had not held regular review meetings with other departments for monitoring the progress of the indicators with reference to the action plan prepared.
- Workshops/seminars or training programmes for skill development of the staff were not organised regularly.

10.3 Constitution of Working group

The Government of Himachal Pradesh (Planning Department) issued instructions in July 2016 for constitution of a working group by the nodal department with other related major departments for preparing vision/strategy/action documents in pursuit of achieving Sustainable Development Goals-3. The working group was constituted by the Health Department, however, only one meeting of the group was held during July 2016 and thereafter no meetings were held till October 2022.

10.4 Allocation of funds under NHM in order to achieve SDG-3 Goals

The Ministry of Health and Family Welfare, GoI intimated that NHM is the primary vehicle for achieving SDG- 3 targets. Various schemes and programmes are implemented under NHM in the State. All the NHM schemes impact the indicators and targets, therefore the funds released under NHM play an important role towards improvement of health and well-being in the State. No separate funds were allocated specifically for SDG-3.

The budget projection and allocation for NHM during 2016-17 to 2021-22 is depicted in **Table 10.2:**

Table 10.2: Budget allocation under NHM

Year	Amount projected	Amount approved in Programme Implementation Plan	Allocation	Shortfall (-)/Excess (+)	
				Amount	Percentage
2016-17	365.74	335.56	230.23	-105.33	-31.38
2017-18	444.27	409.82	373.34	-36.48	-8.90
2018-19	478.46	431.72	374.31	-57.41	-13.29
2019-20	587.1	517.31	556.96	39.65	7.66
2020-21	674.68	624.33	563.43	-60.9	-9.75
2021-22	655.23	627.00	980.72	353.72	56.41
Total	3,205.48	2,945.74	3,079.07	133.33	4.53

Source: Data provided by NHM.

As seen from **Table 10.2**, there was a shortfall in allocation of funds in comparison to approved funds ranging from 8.90 per cent to 31.38 per cent during 2016-19 and 9.75 per cent in 2020-21. There was an excess of 7.66 per cent and 56.41 per cent during 2019-20 and 2021-22 respectively. There was an overall excess of 4.53 per cent of the allocation of funds during 2016-22. The Department replied (January 2024) that the excess allocation during 2021-22 was on account of allocation towards Infrastructure Maintenance & ECRP I & II for Emergency Response during the Covid pandemic.

10.5 Targets for Health Indicators under Sustainable Development Goals (SDGs-3)

Sustainable Development Goals on healthcare are focused on providing essential services to the entire population, with a special emphasis on the poor and vulnerable groups. The comparison of important health indicators of NFHS-4 vis-à-vis NFHS-5 are given in **Appendix 13**. Targets for 10 healthcare indicators² for Himachal Pradesh, which were to be achieved by 2022 are given in **Table 10.3**.

Table 10.3: Important health indicators and SDG-3 targets thereof

Sl. No.	Name of Indicators	SDG/ Drishti Target for 2022	Achievements for 2022 (May 2022)	Remarks	Target for 2030
1	Maternal Mortality Ratio	<45/1,00,000 live births	MMR not calculated, however, 71 maternal deaths against 89,963 live births in 2020-21 as per HMIS data	Not achieved	<25/ 1,00,000 live births
2	Institutional deliveries (ID)	90 per cent	92.68* per cent	Achieved	100 per cent
3	Mortality rate under 5 years	30/1,000	23	Achieved	<5/1,000
4	Neonatal mortality rate (NMR)	15/1,000	13	Achieved	5-10/1,000
5	Infant Mortality rate	22/1,000	19	Achieved	5-10/1,000
6	TB	<100 / lakh	<20 /lakh	Achieved	20/lakh
7	Percentage of women aged 15-49 years with a live birth in a given time period	Achieving 100 per cent ANC	4 ANCs- 80.30 per cent**	Not on track to achieve 100 per cent ANC as per SDG-3	100 per cent by 2022

² As per Drishti Himachal Pradesh-2030.

Sl. No.	Name of Indicators	SDG/ Drishti Target for 2022	Achievements for 2022 (May 2022)	Remarks	Target for 2030
	who received all antenatal care (ANC)				
8	Age standardised prevalence of current tobacco use among persons aged 15+ years (Prevalence of tobacco use aged 15 yrs. and older: India- 38 per cent, Himachal Pradesh- 22 per cent)	Bring down tobacco use among persons aged 15 years and older from current level (22 per cent) to 17 per cent	12 per cent	Achieved	Bring down tobacco use among aged 15 years and older to <5 per cent
9	No. of beneficiaries covered (H.P. SDMA, Clean energy, Hospital manual, Public awareness, Risk reduction, yoga, training of health professionals and others)	To covers all sub- divisions/ blocks teams for awareness/ training/ sensitisation	Only notification for financial incentive to yoga teachers for conducting yoga services at HWCs. In selected Districts, it was noticed that no yoga services were provided in HWCs.	Not on track to achieve target as per State target.	To cover all villages in the State for awareness/training/ sensitisation by 2024. To cover all schools up to 10+2 level for awareness/ training/ sensitisation
10	Death rate due to road traffic injuries (1000 deaths per year / approximately 3-4 deaths per day)	To ensure dedicated Trauma Care services up to CHC level and quality services in all centres	Dedicated Trauma Centres have not yet been established in the whole State (Trauma Centre at Nalagarh, Kotkhai, Unafunds received)	Not on track to achieve target as per State target.	To ensure dedicated Trauma Care services up to PHC level by 2024, and quality services in all health facilities

Source: Data provided by Mission Director, NHM HP

* Calculated against total number of deliveries in the State.

** As per HMIS portal, four ANCs were done for 85,395 against 1,06,340 registered pregnant women.

Note: For the remaining 18 indicators, Department stated that assessment is yet to be done by GoI/Govt of HP and that SDG-3 indicators are being reviewed periodically.

From the **Table 10.3**, it is evident that in view of the present achievement, the State needs to gear up and review the activities to achieve the target for 2030 of a few indicators as discussed below:

- Target for institutional deliveries in 2022 was 90 *per cent* and 100 *per cent* by 2030. The State achievement was 92.68 *per cent* as of March 2022.
- Target for 2022 for NMR was 15/1,000 and the State's achievement was 13/1,000 during 2019-20. The State needs to gear up to achieve the target for 2030.
- Target for 2022 for IMR for 2022 was 22/1,000. The State achievement was 19/1,000 as of May 2022.
- Target for 2022 for giving all four ANC was 100 *per cent* but as on March 2022, the State achievement was 80.30 *per cent*.
- Target for 2022 was to cover all subdivisions/blocks teams for awareness/training/sensitisation/yoga but as of September 2021, the Government had notified to only provide financial incentives to yoga teachers in Health Wellness Centres (HWCs). No data for awareness/training/ sensitisation was provided by the Department. Further, in the selected districts, it was noticed that no yoga services were provided in HWCs.
- To reduce the death rate due to road traffic injuries, the State had targeted to ensure dedicated trauma care services up to CHC level and quality services in all centres by 2022. But as of June 2022, no dedicated Trauma Centres have been established in the whole State. Trauma centre at Nalagarh, Kotkhai and Una are yet to be set up though funds have been received.

10.6 Conclusion

The State adopted 28 indicators covering all 13 global targets. The district indicator framework was not prepared as of October 2022. The State adopted SDG-3 goals after a delay of two and a half years from the date of adoption of national indicators. Separate budget provision for implementation of SDG-3 was not allocated, instead NHM was considered to be the primary vehicle for achieving SDG-3 targets. However, in between 2016-17 to 2018-19 there were shortfalls ranging between 8.90 *per cent* to 31.38 *per cent* and 9.75 *per cent* in 2020-21 in allocation of funds from NHM. The target for maternal mortality ratio could not be achieved as of May 2022. Workshops/seminars and training programmes for skill development of the staff were not organised.

10.7 Recommendations

There needs to be convergence of all the various State agencies involved in implementation of different aspects of SDG-3. Accordingly, the Government should endeavour to:

- *Conduct timely meetings of the working group of SDG-3 so that views and suggestions of the members of the working group can be discussed and implemented.*
- *Prepare District Indicator Framework to enable monitoring the progress of the district towards achieving SDG targets.*
- *Organise regular workshops/seminars and training programmes for skill development of the staff organised for effective implementation of the SDG targets.*
- *Make available sufficient funds from NHM to meet the SDG target timely.*

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