Chapter

Information, Education and Communication

The Information, Education and Communication (IEC) activities under NRHM aimed to spread awareness about preventive health care and dissemination of information about availability of easily accessible quality health care facilities for poor, women and children in rural areas. IEC component was built into every major NRHM activity and funds for the purpose were provided under respective programme heads. Various publicity media like television, radio, newspapers, handbills, placards, hoardings etc. are generally used for spreading the message. The message of NRHM was also to be spread by organising health melas, observing World Health Day, Village Health and Nutrition Day etc.

10.1 Expenditure on IEC

SPMU did not provide details of funds allotted for IEC activities and utilisation thereof. The information available in PIPs and the accounts of SHS revealed the following releases and utilisation of fund for IEC during 2005-11:

Funds provided Utilisation Percentage of Sl. No. Year expenditure (₹ in crore) (₹ in crore) 1. 2005-06 Information not available 2. 2006-07 Information not available 19 3. 2007-08 33.73 6.55 4. 2008-09 24.73 4.88 20 5. 2009-10 27.79 3.74 13 2010-11 36.72 19.87 54

Table 10.1: Details of fund allotted and utilised

(Source: State PIPs, Annual Accounts for 2007-08 to 2009-10 and SOE for 2010-11)

Thus, during 2007-10 the expenditure ranged only between 13 and 20 per cent which, however, increased to 54 per cent during 2010-11.

10.2 Activities undertaken under IEC

IEC Bureau, headed by a Director, received funds from DGNPME for IEC. DGNPME also awarded work orders for IEC related activities at its level. Some of IEC activities are discussed in following paragraphs:

10.2.1 Hiring of media services

DGNPME approved (June 2007) an expenditure of ₹ 1.75 crore for telecast/broadcasting of messages on TV and Radio through two advertising firms without availability of funds. Audit observed that bills of the two firms for ₹ 1.74 crore were still (November 2011) awaiting payment.

IEC Bureau replied (October 2011) that it functioned under the direction of DGNPME and payments would be made after its approval. The reply was not acceptable as SPMU transferred (August 2007) funds (₹ 1.75 crore), for the work. DGNPME, however, did not release funds to IEC Bureau. The status of hiring of media services, worth ₹ 1.75 crore could not be ascertained.

10.2.2 Printing and supply of flex banners

DGNPME released (November 2007) ₹ 68.83 lakh to the Bureau for supply of Flex Banners under Routine Immunisation Programme. The Director, IEC Bureau invited (October 2007) tenders for printing and supply of the material without any administrative and financial sanctions and issued a work order for ₹ 68.83 lakh (20 October, 2007) for supply of 25000 Banners. The Bureau neither obtained assurances on quality of banners supplied/numbers received and utilised nor made payment (November 2011).

In reply (October 2011), IEC Bureau accepted the facts and stated that payment was not released and CMOs were asked to furnish stock entry reports, which were awaited.

10.2.3 Wall painting

DGNPME allotted (April 2010) ₹ 4.88 crore to all the districts for 'wall paintings', aimed at creating awareness among people about 'Mother and Child Health', 'Child Health & Routine Immunisation', 'Family Planning' etc., at District Male and Female Hospitals/CHCs/PHCs/Sub centres/Anganwadi Centres/Gram Panchayats and ASHAs' residences. The guidelines issued in April 2010 provided for award of work on tender basis at maximum rate of ₹ seven per square feet (sq. ft); monitoring the paintings by ACMO/ Deputy CMO, nominated as Nodal Officer; and 100 per cent verification of site, monitoring and supervision by MOICs at the health centres, verification of 20 per cent of the work by District Project Manager/ District Community Mobilizer/ Block Programme Managers on random selection basis.

Audit observed that payments for wall paintings were made in eight test-checked districts¹ without necessary verification. A summary of audit observations are mentioned in *Appendix-10.1*. Further, audit observations in the test checked districts are discussed in succeeding paragraphs.

10.2.3.1 CMO, Ballia received (March 2010) ₹ 15 lakh for wall paintings and after entering into the cash book of RCH Flexipool, transferred it to the account of CMO, FW. CMO accepted (September 2011) the transfer of money to non-NRHM account and stated that this money was distributed to MOIC through cheques. Thus, transfer of NRHM fund to non-NRHM account was irregular.

10.2.3.2 CMO, FW Moradabad paid ₹ 19.99 lakh for 4.83 lakh sq. ft. of wall painting at ₹ 3.75 per sq. ft. plus taxes against the stipulated quantity of 1.39 lakh sq. ft. communicated (April 2010) by DGNPME. This resulted in an extra payment of ₹ 14.23 lakh. The CMO stated in reply (October 2011) that release of ₹ 20 lakh against a requirement of ₹ 9.75 lakh indicated that extra work was to be executed. Reply was not correct as the payment was for area exceeding the area approved by DGNPME.

¹ Allahabad, Bahraich, Etah, Gorakhpur, Jaunpur, Jhansi, Moradabad and Raebareli.

10.2.3.3 CMO, Etah received (March 2010) ₹ 12 lakh for wall paintings. CMO issued work order and made payments of ₹ 10.13 lakh (between June and December 2010) for painting 1,00,106 sq. ft. DGNPME had approved (April 2010) wall painting for only 74085 sq. ft. Thus, payment of ₹ 2.65 lakh was made for 26021 sq. ft. of excess work.

The Government replied that no direction regarding area of wall paintings was received. The reply was not acceptable as details of the wall painting area were annexed to DGNPME's order dated 23 April 2010.

Further, although the lowest bidder had reduced (May 2010) its rate to ₹ seven per sq. ft., CMO made payment at ₹ 10 per sq. ft., which resulted in excess expenditure of ₹ three lakh. CMO replied (December 2011) that approval for higher rate was obtained from DGNPME in May 2010. Reply was not acceptable because the vendor had reduced his rates before the payment was made.

- 10.2.3.4 CMO, Jhansi received (March 2010) and spent ₹ 3.75 lakh for wall painting. However, MOIC, Chrigaon, MOIC Mauranipur and MOIC, Bangra intimated that no wall painting was taken up in their areas. Thus, payment of ₹ 1.38 lakh (₹ 0.46 lakh for each block) in these three blocks was doubtful. CMO stated (November 2011) that the completion reports were submitted by the erstwhile MOICs and the reply furnished by the present MOICs may be due to their lack of awareness. However, the verification reports referred to in reply were not furnished to audit.
- CMO, Allahabad was allotted (March 2010) ₹ six lakh for wall paintings, 10.2.3.5 including ₹ 1.50 lakh for wall painting on ASHA's residence. Entire amount was utilized (August 2010) but as per the payment vouchers made available to audit, painting was not done on the walls of ASHA's residence.

CMO stated in reply (October 2011) that wall paintings were carried on ASHA's residence and relevant vouchers were shown to audit. Reply was not correct, as the vouchers presented to audit did not include ASHA's residence.

10.2.3.6 Wall paintings from 'innovation fund'

Wall paintings were not included in the activities covered under "district innovation". CMO, Bareilly spent (March 2009) ₹ 5.71 lakh from innovation fund. The Bills submitted by the firms neither carried the TIN and VAT registration number nor were verified by the concerned MOICs. No photographs of the wall paintings done were produced to audit. No evidence of calling quotations was on record. CMO accepted (November 2011) noninvitation of tenders, non-maintenance of dispatch register, non-availability of work order and agreement and non-indication of TIN/ VAT registration number on vendor's bill.

10.2.4 Health Melas

As per PIP 2010-11, Health Melas were to be organised at block level every month. Further, EC accorded (13 July, 2010) ex-post facto approval for ₹ 4.37 crore, (₹ 3.55 crore: at district; ₹ 0.82 crore at block level) for Health Mela. Audit observed that expenditure of ₹ 3.55 crore was shown to have been incurred at district level from 11 to 17 July, 2010. The evidencing and documentation in support of organising Health *Melas* in 13² test checked districts and CHC, Manda, Allahabad was very weak creating doubts on the expenditure on HMs.

10.3 Recommendations:

- The activities under IEC should be clearly defined in the State and District Health Action Plans. Clear guidelines should be issued for documentation and evidencing of IEC activities and their adherence should be ensured; and
- As NRHM caters mainly to rural population, the focus of IEC activities needs to be oriented for rural areas by taking up activities during festivals and melas and traditional methods like rickshaw-advertisements/announcements in and around villages, tehsils, rural schools etc., should be encouraged.

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² Bahraich, Ballia, Bareilly, Budaun, Bulandshahar, Gorakhpur, Jaunpur, Kanpur Nagar, Moradabad, Raebareli, Shahjahnpur, Unnao and Varanasi.