



# Evolution of National Health Programs

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# Some commonly used terms in Program Planning



# Goal

- The result or achievement toward  
Which effort is directed
- The proposed long-range benefits of the program for a specified area, defined in general terms. A goal is the ultimate objective; for example, "reducing the incidence of HIV in (a country)."



## Purpose:

- The overall objective (also called strategic objective) of the program, for example, “to increase the accessibility to and use of palliative care facilities in (a particular geographic area).”
- ultimate measure of the program’s effectiveness.



# Objectives:

- The anticipated outcomes or benefits that are the expected results of implementing a strategy. They are described in measurable terms and indicate a specific period of time during which these results will be achieved.
- should be SMART
  - specific,
  - measurable,
  - appropriate,
  - realistic, and
  - time-bound).



# Program

“a strategy with defined Objectives”



# Policy

“ a written statement of objectives and expected outcomes”



# Planning

**“ a process of choosing between alternatives to accomplish the desired”**

**Plan- a Blue print for action**





# Strategy

Alignment of your resources,  
Processes and organizational  
structure to maximize benefits

A strategy is a plan (to choose) to  
achieve a particular goal or result;  
and reveals the logic of your  
choices.



# Strategic Planning

- **Strategic planning** is a process for making informed, evidence-based decisions about how to, most efficiently and effectively, achieve a measurable change toward a defined and specific goal. More specifically, it involves **identifying clearly articulated goals, objectives, targets, and the strategies and broad-based activities that will be required to achieve them over time.**



## Approach:

A statement that describes how the program will achieve its objective. That is, activities that will help the program achieve its objectives most effectively and feasibly.



- NO Health Policy for **36** years
- Health left to **Committees and Commissions**
- Each Committee addressed to a **single** specific issue.
- **Comprehension** was missing
- Majority of recommendations of every committee were **reiterations** of Bhole Committee.
- Individual “Health” Programs developed in isolation based on situational **exigency**.
- Uni-purpose workers later baptized as Multi-purpose.
- Some Programs worked in complete **isolation** till 1980 (e.g. NTCP).
- **Fragmented approach to Health**



# Mile stones:

**NRHM-2005**  
**NHP-2002**  
**NPP-2000**

**RCH-1996**

**UIP-1985**  
**NHP-1983**

**Alma Ata-1978**

**Small pox eradicated-July 5, 1975**

**NFPP-1952**

**India Joins WHO-1948**

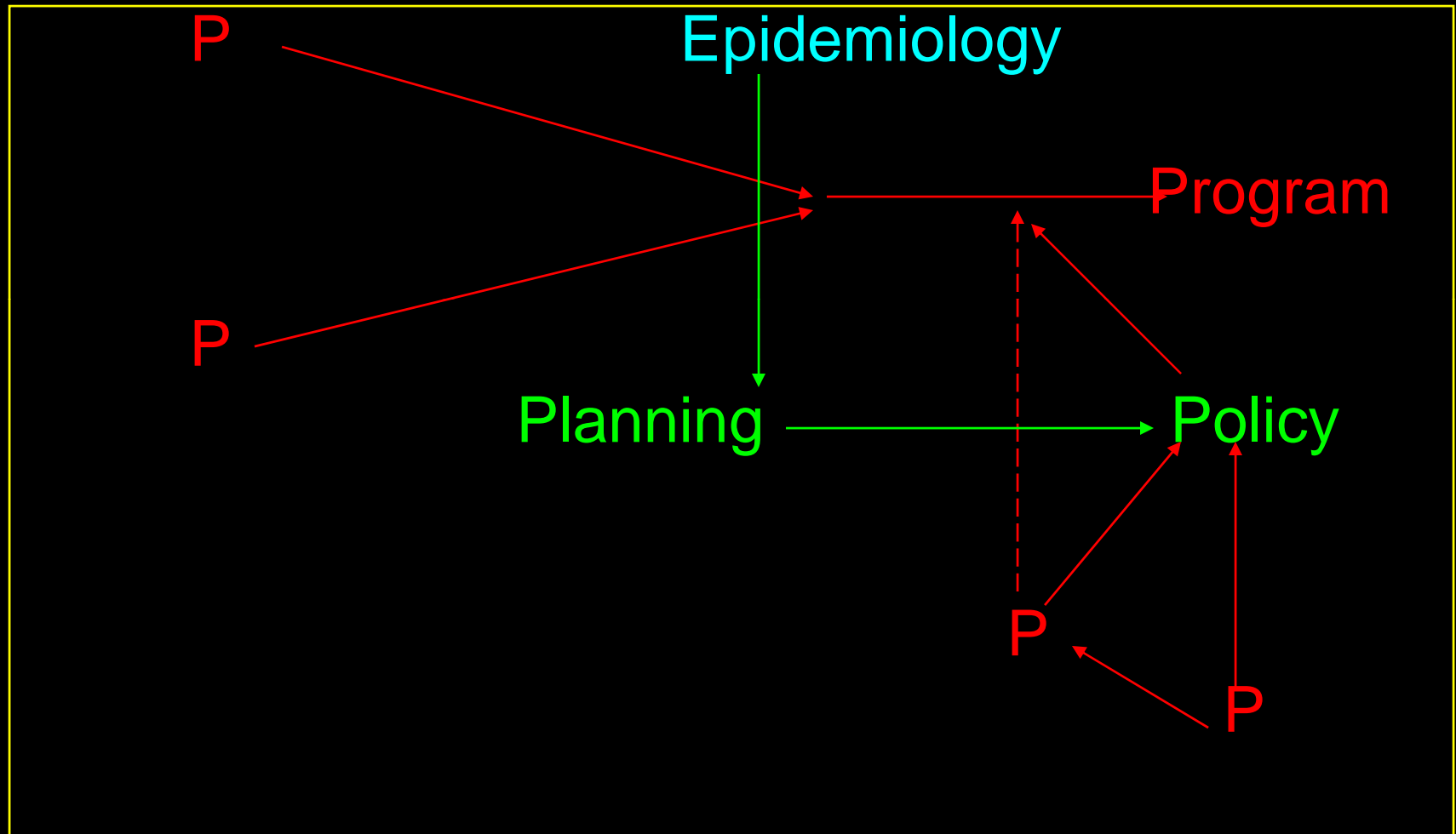


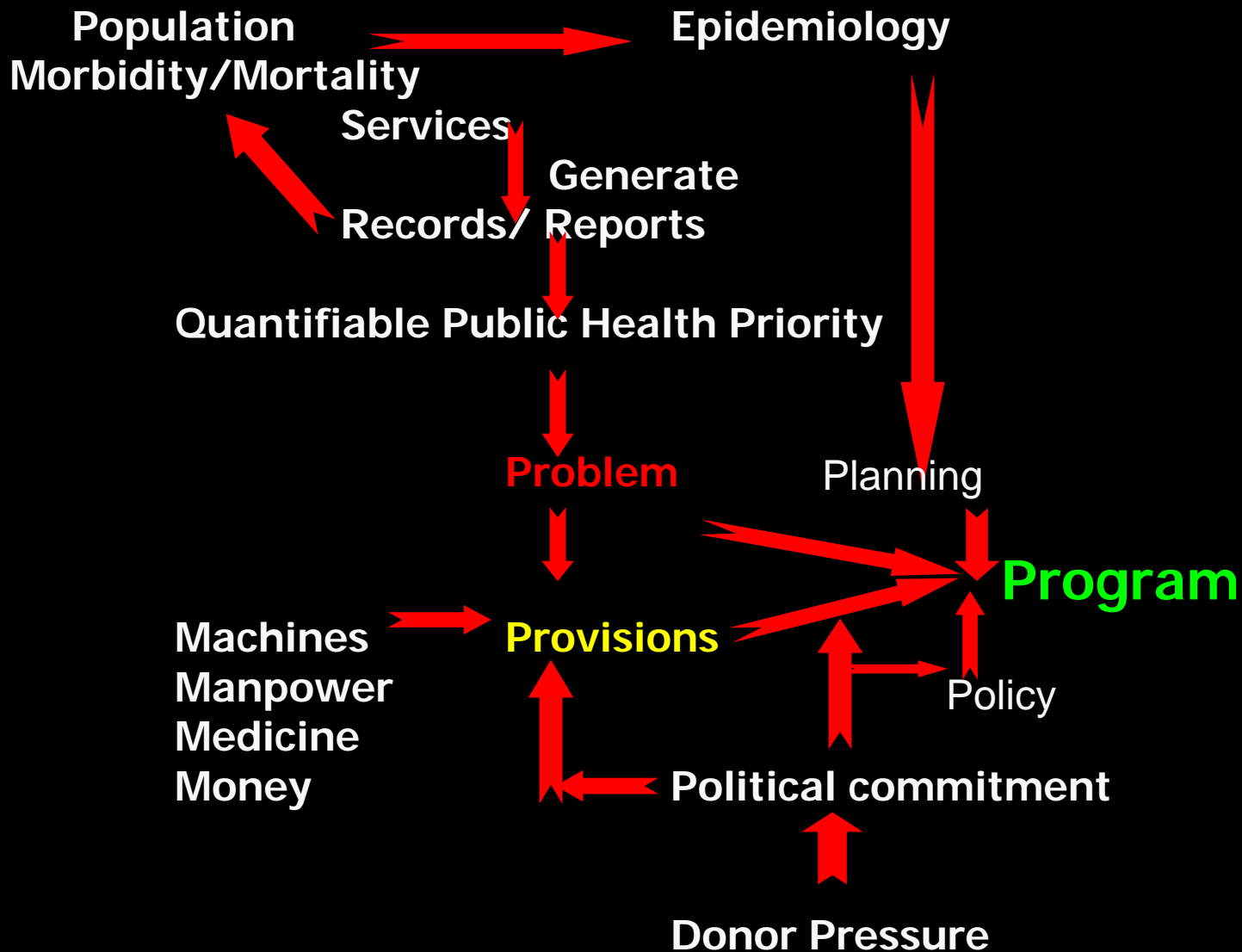
**HSDC-1946**





# Health Programs:





## Program perception and the prerequisites

# Policy Prescriptions–NHP–2002:



- increase health sector expenditure to **6 % of GDP**
- **Increased allocation** (55 %) for the primary health sector
- Gradual **convergence of all health programs**
- Developing the **capacity**
- Strengthening of the primary health
- User **charges**
- **Contract** employment
- **Manpower deployment norms**





- **Integrated** disease control network
- **Increase** in postgraduate seats in Public Health & Family Medicine
- **Decentralization**-Role of LSG/ NGO
- Medical Grants **commission**
- **legislation** for regulating clinical establishments/medical institutions by 2003



**NPP-2000**

**NPP-2000**  
**TFR-2.1 : 2010**

**May 11, 2000:**  
**Pop.-1 Billion**

**July 1993**

**NHP-1983:**  
**Replacement TFR (2.1) by 2000**

**NFWP-1977**

**Cafeteria, Education,  
Motivation, Compulsion,  
Incentive, Target free**

**June, 1977**  
**April 16, 1976**

**NFPP-1952**



# National Pop. Policy

## Objectives:

### – Immediate

- To address the unmet needs for
  - Contraception,
  - Health care infrastructure, and
  - Health personnel, and
- To provide integrated service delivery for basic reproductive and child health care

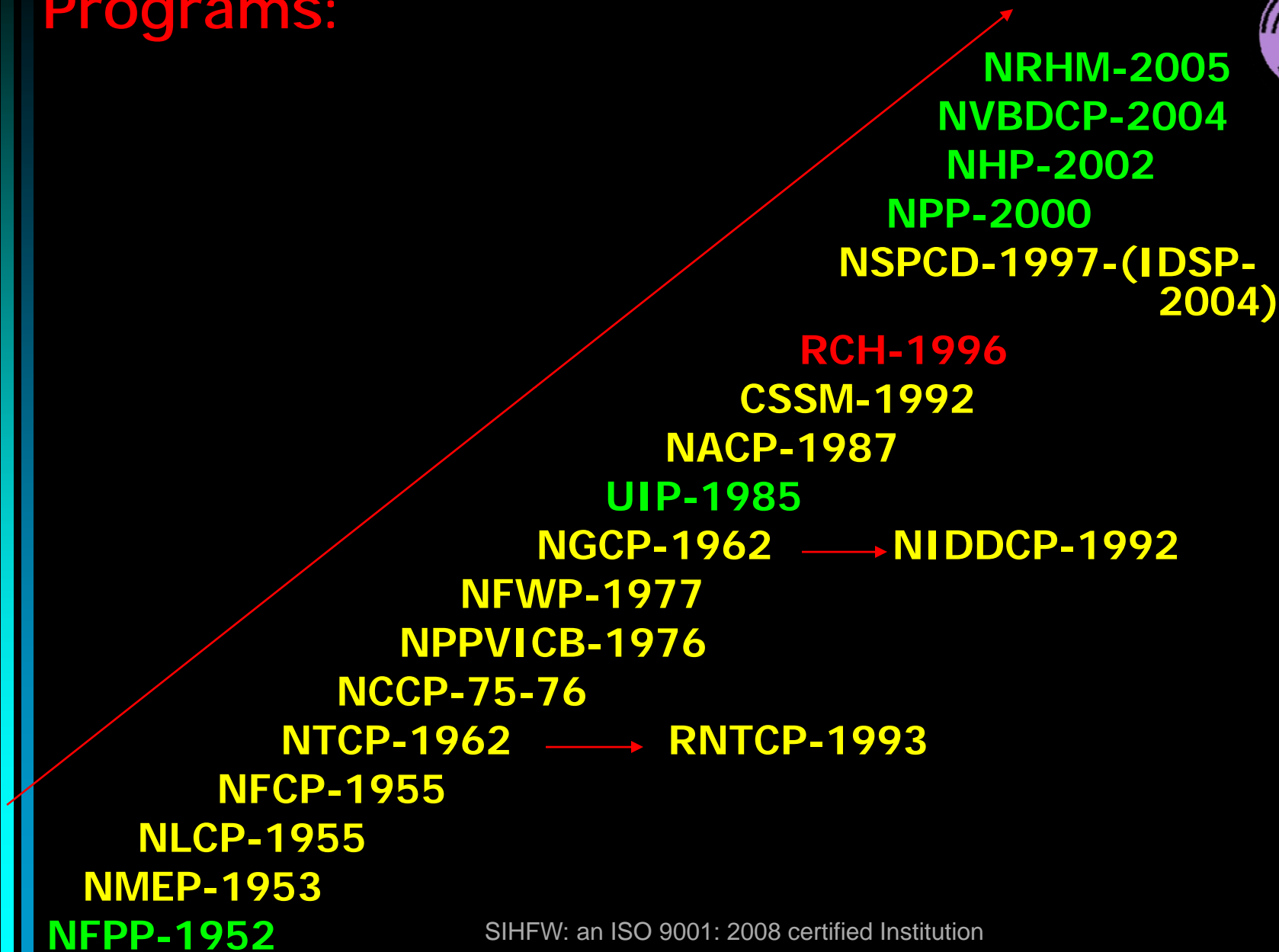
### – Medium

- To bring the TFR to replacement levels by 2010

### – Long term

- To achieve a stable population by 2045,

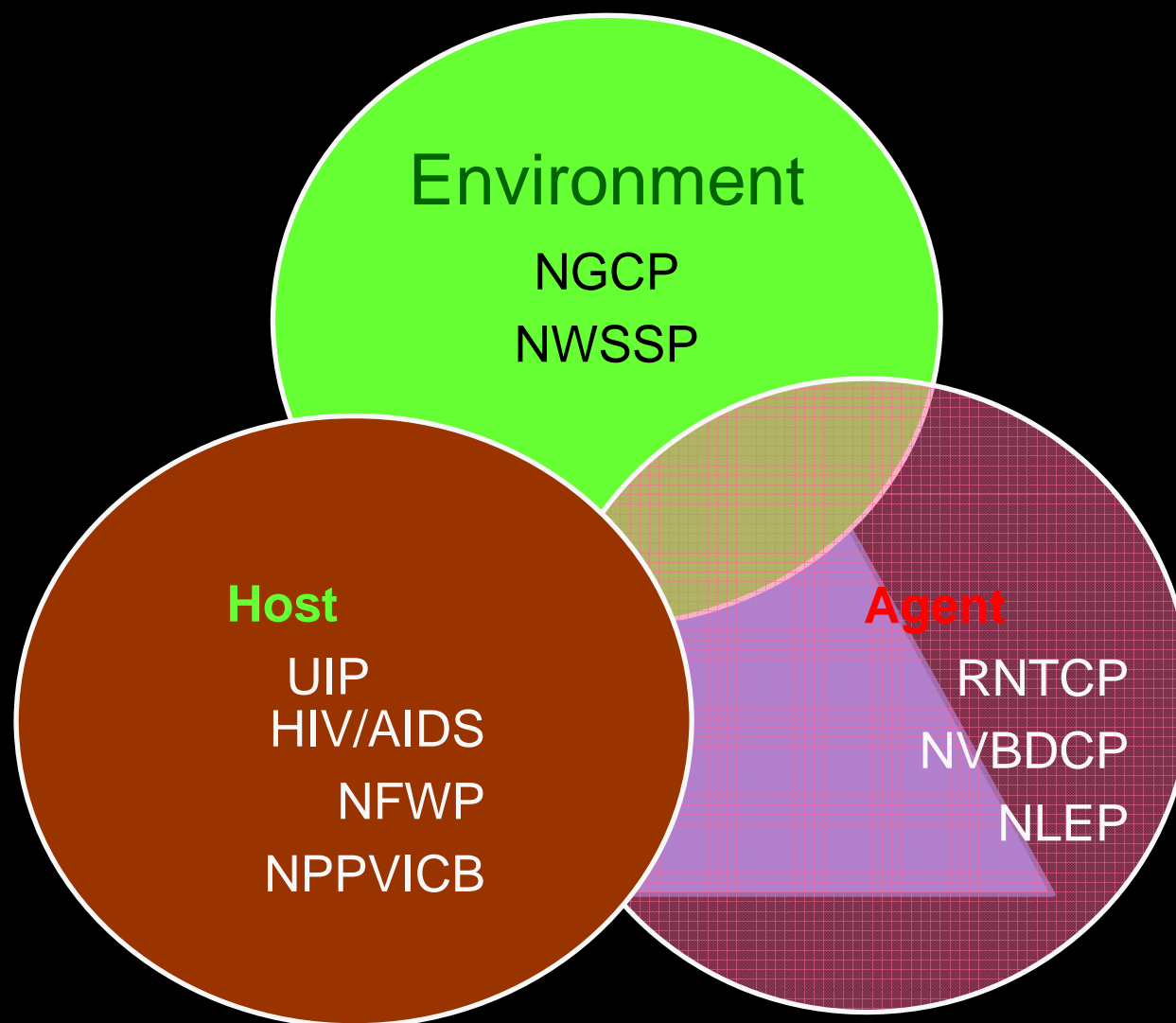
# Programs:





# Health v/s Disease control programs

- Disease
- Behavior
- Development



**Programs address to:**



Plan	Program	Exp. (% of plan outlay)
I (1951-56)	<b>NFPP</b> , NMCP(53), NFCP(55), NLCP(55), <b>NWSSP</b>	3.3
II (56-61)		3.06
III (61-66)	NTCP(62), NPIDD	2.63
IV (69-74), 66-69-Annual plans	Trachoma(68), <b>AIHPPP</b> , <b>MNP</b> , <b>20-Point</b>	
V (74-79)	NBCP(1976), NCCP(1976),EPI(78)	2.45
VI (80-85), 79-80 Annual plan	NGEP(83), NLEP(83), NDDCP, UIP(1985)	1.87
VII (85-90)90-92 Annual plans	NACP, NMHP	0.98
VIII (92-97)	RNTCP, CSSM	1.76
IX (97-02)	NPSCD, RCH	0.9 Govt. exp. As % of GDP
X (02-07)	NVBDCP(04), <b>NRHM(05)</b>	0.9
XI (07-12)	NPPCD(08), <b>NTCP(08)</b>	1.2



## Program components:

- Need
- Goals & Objectives
- Strategy
- Approach
- Activity
- Indicators
- Monitoring & Evaluation
- Financing





# Program Design

- Process that identifies the interventions and determines how to manage them.
- A good design
  - Interventions are ethically sound,
  - Technically up-to-date,
  - Relevant to the program setting, and
  - Acceptable to or endorsed by the beneficiary populations.



# Program Designing

## Ensure that programs contains:

- Focused data collection and analysis
- Scale of action that suits the objectives and resources
- The right mix of activities or interventions
- An appropriate monitoring and evaluation system
- A clear and feasible implementation plan
- Supportive and sustainable management systems



# Programs

## Major:

- National Family Welfare Program (1951, 1977)
- National Cancer Control Program (1975)
- National Leprosy Eradication Program (1983)
- National AIDS Control Program (1987)
- National Diarrheal Disease Control Program
- National Iodine Deficiency Disorders Control Program (1992)



- National Vector borne disease control Program (2004)
- National Program for Control of Blindness & Visual Impairment (1976)
- National Reproductive and Child Health Program (1995)
- National Program for surveillance Program for Communicable diseases (1997)
- National Tuberculosis Control Program (Revised) (1997)



## Minor:

- National Mental Health Program (1982)
- National Diabetes Control Program (1987)
- National Kala-azar Control Program\* (2004)
- National Water Supply and Sanitation Program (1954)
- National Program for prevention & control of Deafness
- National Tobacco control program (2010)



# Thank You

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