INTERNSHIP REPORT

National Health Mission (NHM), Jaipur

Under the NCD Cell:
National Programme for Prevention and Control of Non-Communicable Diseases
(NP-NCD)

Submitted By

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Introduction

During my internship at National Health Mission, Jaipur, I was a part of the NCD Cell, working on the National Program for Control and Prevention of Non-Communicable Diseases.
Throughout my internship I got to learn about the working of Public Health programs at the center and state level and challenges in the implementation of these programs.

The duration of my internship was from 10th March, 2025 to 31st May, 2025.

Objectives of Internship

- To gain hands-on experience in the functioning and management of public health programmes.
- To understand the implementation strategies of NP-NCD at the state and district levels.
- To assist in field-based monitoring and evaluation of non-communicable disease screening and reporting.
- To observe the integration of digital health systems like the NCD Portal and ABHA IDs into healthcare delivery.
- To contribute to the planning and execution of awareness and health promotion activities.

Organizational Profile

The National Health Mission (NHM) is a government initiative under the Ministry of Health and Family Welfare, India, aiming to provide universal access to equitable, affordable, and quality healthcare services. It subsumes two major sub-missions: the National Rural Health Mission (NRHM) and the National Urban Health Mission (NUHM), focusing on both rural and urban populations.

National Level Structure

- **Mission Steering Group (MSG):** The apex policy-making body, chaired by the Union Minister of Health & Family Welfare. The Secretary, Department of Health & Family Welfare, acts as the convener, with the Additional Secretary & Mission Director as co-convener. The MSG provides policy direction and oversight for the Mission.
- **Empowered Programme Committee (EPC):** Headed by the Union Secretary of Health & Family Welfare, the EPC examines financial proposals and supports the MSG in policy and implementation matters.
- **Mission Director:** An Additional Secretary-level officer leads the Mission, supported by Joint Secretaries and a National Programme Management Unit (NPMU), which handles day-to-day administration, planning, implementation, and monitoring.

- **Technical Support:** The National Health Systems Resource Center (NHSRC) serves as the apex technical support body, assisting with problem-solving, capacity building, research, and evaluation, as well as supporting State Health Systems Resource Centers.

State Level Structure

- **State Health Mission (SHM):** Headed by the Chief Minister of the respective state, with the State Health & Family Welfare Society as its implementing arm. The SHM provides overall guidance and oversight at the state level.

- **Governing Body:** Chaired by the Chief Secretary or Development Commissioner, this body provides strategic direction and approves state action plans.
- **Executive Committee:** Led by the Principal Secretary/Secretary (Family Welfare), this committee ensures the execution of the integrated NHM State Action Plan, meeting at least monthly.
- **Programme Committees:** Formed for focused planning and review of specific national programmes, chaired by the Director and managed by State Programme Managers.
- **State Programme Management Support Unit (SPMSU):** Acts as the secretariat for the SHM and the State Society, providing technical and managerial support through a pool of experts in human resources, monitoring, evaluation, and other technical areas.

District and Local Level Integration

- District and city health action plans are aggregated into state action plans, ensuring decentralized and context-specific planning.
- All existing vertical programmes are horizontally integrated at state, district, and block levels, promoting efficient use of resources and unified data management.

Financing and Implementation

- NHM is financed through six main components, including flexipools for rural and urban health, communicable and non-communicable diseases, infrastructure maintenance, and family welfare.
- Fund flow is from the central government to states/UTs, with state-specific flexibility in planning and implementation.
- State Programme Implementation Plans (PIPs) are appraised by the National Programme Coordination Committee (NPCC) and approved by the Union Secretary of Health & Family Welfare.

State and district plans are foundational to the effective implementation of the National Health Mission (NHM), enabling decentralized, need-based, and participatory health planning and service delivery.

State Plans: Strategic Direction and Resource Allocation

- **State Programme Implementation Plans (PIPs):** Each state prepares an annual PIP that details strategies, budgetary requirements, and targeted health outcomes. The Executive Committee of the State Health Society drafts the PIP, which is then approved by the State Government or Governing Board.

- **Flexibility and Contextualization:** States have the flexibility to design and implement action plans tailored to their specific health challenges and priorities, within the broad national framework.

- **Integration of District Plans:** The state PIP is an aggregate of district and city health action plans, ensuring that local needs and priorities are reflected in state-level strategies and resource allocation.

- **Appraisal and Approval:** The PIP is appraised by the National Program Coordination Committee (NPCC), with technical support and inputs from various national and state agencies and is finally approved by the Ministry of Health and Family Welfare.

District Plans: Decentralized, Participatory Planning and Implementation

- **District Health Action Plans (DHAPs):** District plans are developed through a bottom-up, participatory process, starting from village-level consultations and block health plans, which are then integrated into the district plan.

Key Functions:

- Identify local health needs and priorities through community engagement.
- Develop strategies and activities to address these needs, including specific targets, budget allocations, and resource requirements.
- Integrate inputs from various sectors (e.g., sanitation, nutrition, water supply) for a holistic approach to health determinants.
- Serve as the primary roadmap for implementing NHM activities at the district level, guiding resource allocation, monitoring, and evaluation.

District Health Missions and District Health Societies oversee planning, implementation, and monitoring. District Planning Teams facilitate the process and ensure technical support.

District plans promote convergence with other departments (e.g., Women and Child Development, Education, Rural Development) and prioritize the needs of vulnerable and hard-to-reach populations, ensuring equity in service delivery

The key functions of the National Health Mission (NHM) include:

- **Provision of Free and Accessible Healthcare Services:** NHM supports a wide range of free services related to maternal, child, and adolescent health, family planning, and universal immunization programs. It also targets major diseases such as tuberculosis, malaria, dengue, kala azar, and leprosy to contribute to overall public health improvement.

- **Universal Access to Equitable, Affordable, and Quality Healthcare:** The mission aims to ensure healthcare services are accountable and responsive to people's needs, focusing on both rural and urban populations.

- **Strengthening Health Systems:** NHM works on enhancing health infrastructure at district and sub-district levels, including establishing Health and Wellness Centres for comprehensive primary healthcare, improving availability of essential drugs, diagnostics, ambulances, and mobile medical units.

- **Maternal and Child Health Improvement:** It focuses on reducing maternal mortality rate (MMR), infant mortality rate (IMR), and total fertility rate (TFR) through initiatives like Janani Suraksha Yojana (JSY), Janani Shishu Suraksha Karyakram (JSSK), and Mission Indradhanush (immunization drive).

- **Disease Control:** NHM tackles both communicable and non-communicable diseases through targeted programs at the community and district levels, aiming to reduce cases and mortality from diseases like tuberculosis and malaria.

- **Human Resources Development:** Training and deployment of Accredited Social Health Activists (ASHAs) and other frontline health workers to improve community outreach and health education form a core function.

- **Community Participation and Decentralized Planning:** Encourages community involvement through Village Health Sanitation and Nutrition Committees (VHSNCs) and decentralized planning at district and block levels to ensure local health needs are addressed effectively.

- **Promotion of Healthy Lifestyles and Population Stabilization:** NHM promotes awareness and adoption of healthy behaviors and supports reproductive health services to stabilize population growth.

- **Integration of Traditional Medicine:** Revitalizes local health traditions and mainstreams AYUSH (Ayurveda, Yoga & Naturopathy, Unani, Siddha, and Homeopathy) systems within the health framework.

- **Innovative Health Initiatives:** NHM includes programs like the National Digital Health Mission (NDHM) for digital health records, free drugs and diagnostics services, Pradhan Mantri Swasthya Suraksha Yojana (PMSSY) for upgrading healthcare facilities, and mobile medical units to reach remote areas

Internship Experience

During my internship, I worked closely with the State NCD Cell under the supervision of the State Program Officer. My contributions focused on:

- Field visits to PHCs, CHCs, and DHs to observe NCD screening, reporting, and health promotion.
- Monitoring ABHA ID generation and NCD Portal data entry at health facilities.
- Supporting data analysis and presentation of NP-NCD indicators at review meetings.
- Learning coordination practices between NHM and other vertical disease programs

Projects Undertaken (Other than Dissertation)

- Assessed ABHA ID creation trends and NCD Portal utilization across selected districts.
- Supported district-level capacity-building workshops for Medical Officers and ANMs.
- Contributed to the development of SOPs for hypertension and diabetes follow-up care.
- Participated in analysis of data discrepancies between manual registers and the NCD Portal.
- Engaged in monitoring outreach activities under National Cancer Awareness Day

Key Learnings from Internship

- **Programmatic Insight:** Understood how a centrally sponsored scheme like NP-NCD is adapted and implemented at the state level.
- **Data Systems:** Gained proficiency in the use of the NCD Portal and learned about the importance of real-time data entry and dashboard monitoring.
- **Field-Level Challenges:** Observed infrastructural and human resource limitations that affect service delivery, especially in rural areas.
- **Community Interaction:** Learned the value of health communication and the role of community health workers in behavior change.
- **Policy Understanding:** Developed awareness of the policy framework guiding NCD management in India and its alignment with global goals (e.g., SDGs).
- **Professional Development:** Improved my documentation, reporting, and communication skills by interacting with diverse stakeholders.