



सत्यमेव जयते



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Ministry of Housing & Urban
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Dear Colleague,

We are writing to you with regard to the convergence plan between National Urban Health Mission (NUHM), Swachh Bharat Mission (SBM) and National Urban Livelihood Mission (NULM) to develop a holistic environment covering health, sanitation and livelihood. As we are aware that NUHM works towards providing equitable and quality primary health care services to urban population with special focus on slum and vulnerable population, an integrated approach is needed involving all the stakeholders to address the social determinants for good health with convergence of ideas and co-ordination between activities as the key philosophy with support from SBM whose prime focus is on elimination of open defecation & generation of awareness about sanitation and its linkage with public health and NULM whose strategy is to reduce poverty & vulnerability of the urban poor by enabling them to access gainful self-employment & skilled wage employment opportunities, resulting in a sustainable significant improvement in their livelihoods, through building strong grass root level institutions for them.

There is a paradigm shift in the National Health Policy (2017) which emphasizes also on the importance of achieving convergence among wider determinants of health and improving the environment for health. It is now imperative that we join hands and utilize this opportunity to address the root causes of ill health by providing quality primary healthcare services with prime focus on access to safe water and sanitation to all and an enabling environment for sustainable livelihood. The main objective of convergence is to enhance the utilization of the system through provision of a common platform and availability of all services at one point. In this regard, please recall the Joint Video Conference held with HUPA, MoUD and NUHM on 3rd Feb, 2017 where all the states/UTs shared their areas of activities for urban health and expressed their commitment to work in collaboration for better urban health outcomes.

Keeping the above in view, some key action points for joint implementation of urban health initiatives are planned as follows:

1. State initiative to develop a road map in consultation with their counterparts in the state on convergence activities under NULM, SBM and NUHM with regular state level reviews at the Urban Local Bodies and State Health Departments.
2. Formation of Common Coordination Committee(CCC) at state, district, city and ward level to implement convergence through proper planning, activity and monitoring.
3. Sanitation drives with focus on importance of sanitation in areas around the urban health facilities and in accordance to the SBM norms for every fifty thousand population covered by the facility involving the urban health mechanism.

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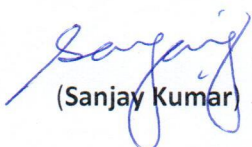
4. Involvement of all the community level workers like Mahila Arogya Samiti, Self Help Groups, Area Level Federation, City Level Federation etc., through christening them as "Swachhagrahis" through adequate capacity development and training (MEPMA model).
5. Leveraging these community level groups through social entrepreneurship by incentivizing them to participate actively in improving not only sanitation in area but also improvement in resultant health indicators.
6. Utilization of NULM infrastructure like night shelters & city livelihood centres and also community SBM infrastructure to provide community level health care like outreach services; utilization of NUHM-SBM combined triggering platform for sustained behavioral change counseling.

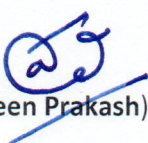
The way forward for this convergence mechanism has been envisaged as under:

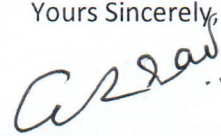
1. Joint Meetings with the stakeholders (NUHM, NULM, SBM) at the state and sub-state level.
2. Formation of CCC at state and sub-state level.
3. Formation of Swachhagrahis involving members from ASHA, MAS, ALF, CLF and other self help groups.
4. Identification of infrastructure for use across all three programmes (e.g. NULM-SUH/CLC).
5. Triggering Platform for health education.
6. Training and Capacity Building through development of a common Training Module.
7. Development of IT based mechanism for real time data transfer and training/capacity building at every level.
8. Development of Monitoring Indicators-processing indicators, impact indicators, outcome indicators etc.

In addition to the above, States/UTs may develop their own mechanism of convergence between these committees based on local needs. The success of convergent action would depend largely on all the stakeholders who would come and work together for the benefit of vulnerable and poor people in urban areas so as to achieve common goal of a healthy and improved urban life within the framework of guidelines/instructions of respective schemes.

With warm regards,


(Sanjay Kumar)


(Praveen Prakash)

Yours Sincerely,

(Dr K Rajeswara Rao)

To

Principal Secretary Health/Urban Development-All States/UTs
Municipal Commissioners of 7 Metros & 75 Million Plus Cities
Mission Directors DAY-NULM/SBM/NHM- All States/UTs
PS to Chief Minister of all States
PS to Minister -Urban Development/Health - All States

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