

**GOVERNMENT OF INDIA
HEALTH AND FAMILY WELFARE
LOK SABHA**

STARRED QUESTION NO:551
ANSWERED ON:04.05.2005
WHO REPORT ON MOTHER AND CHILD HEALTH CARE
Adhalrao Patil Shri Shivaji;Nair Shri P.K. Vasudevan

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

- (a) whether the World Health Organisation (WHO) in its World Health Report 2005 has highlighted poor mother and child health care in India;
- (b) if so, the facts thereof;
- (c) the steps taken or proposed to be taken by the Government to improve the mother and child health care in the country;
- (d) whether the World Health Report 2005 puts India in the list of 51 slow progressing countries as far as infant and child mortality and maternal mortality is concerned;
- (e) if so, whether the Government has studied the said report;
- (f) if so, the Government's reaction thereto; and
- (g) the steps taken by the Government to bring India in the list of fast progressing nation in child and maternal care?

Answer

THE MINISTER OF HEALTH AND FAMILY WELFARE (DR. ANBUMANI RAMADOSS)

(a)to(g): A statement is laid on the Table of the House.

STATEMENT REFERRED TO IN REPLY TO LOK SABHA STARRED QUESTION NO. 551 FOR 4TH MAY, 2005

The World Health Organization have released the World Health Report 2005 in which, among other things, they have highlighted the status of the health of mothers and children in 192 countries of the world. According to this report, India is among the 51 countries which have shown a slow decline in reducing mortality among children under 5 years of age. The report further states that these 51 countries will need to accelerate their efforts over the next ten years for achieving the millennium development goals on infant and maternal mortality rates by the year 2015.

The National Population Policy - 2000 and the National Health Policy - 2002 the Govt. of India have laid down specific goals for bringing down the infant mortality rate to less than 30 and the maternal mortality rate to less than 100 by the year 2010. These goals are in conformity with the Millennium Development Goals.

For achieving these goals, a Reproductive and Child Health Programme is under implementation in all States and UTs of the countries since 1997. A number of interventions are being implemented for improving the maternal and child health and bringing down mortality rates as part of this programme.

The interventions for improving maternal health are essential obstetric care, emergency obstetric care, referral transport for pregnant women with complication of pregnancy through Panchayat, provision of drugs and equipments at First Referral Units (FRUs), provision of contractual staff like additional Auxiliary Nurse Midwife (ANMs), staff nurses and hiring of anesthetists. In the second phase of the RCH Programme, provision has been made to accelerate the decline of Maternal Mortality and Morbidity by introducing new interventions like operationalisation of First Referral Units (FRUs), providing 24-hour delivery and new born care services at Community Health Centers (CHCs) and Primary Health Centers (PHCs) promoting institutional delivery and training of ANM and LHV to become skill birth attendants.

For reducing child and infant mortality, the interventions include immunization against six vaccine preventable diseases, control of deaths due to diarrhoeal diseases, control of deaths due to Acute Respiratory Infections, eradication of polio, prophylaxis against blindness due to Vitamin A deficiency and essential new born care. As part of the second phase of RCH Programme, the Integrated Management for Newborn and Childhood Illnesses will be implemented in the districts in a phased manner.

Government of India have recently launched the National Rural Health Mission (NRHM) in order to improve the availability of and access to quality health care including services for Immunization and Safe Motherhood. The mission seeks to provide effective health care to rural population throughout the country with special focus on 18 States, which have weak public health indicators and/or weak

infrastructure. These States are Arunachal Pradesh, Assam, Bihar, Chhattisgarh, Himachal Pradesh, Jharkhand, Jammu & Kashmir,

Manipur, Mizoram, Meghalaya, Madhya Pradesh, Nagaland, Orissa, Rajasthan, Sikkim, Tripura, Uttaranchal and Uttar Pradesh. The Mission will operate over a period of seven years from 2005 to 2012. Under the NRHM, the services provided under the RCH Programme will be strengthened through :

- Implementation of Janani Suraksha Yojana (JSY) under which cash incentives are provided to pregnant women belonging to families Below Poverty Line (BPL) if they deliver at a health center / hospital.
- Appointment of Accredited Social Health Activist (ASHA) for every village with a population up to 1000. ASHA will facilitate in accessing health care services to the community and will have specific responsibility of mobilizing pregnant women for antenatal care, institutional delivery and post-natal checks and immunization to children.
- Operationalising 2000 Community Health Centers as First Referral Units (FRU) for providing Emergency Obstetric and Child Health services
- Making 50% Primary Health Centers functional for providing 24-hours delivery services, over the next five years
- Ensuring quality of services by implementing Indian Public Health Standards (IPHS) for Primary Healthcare Facilities.