

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

UNSTARRED QUESTION NO:41  
ANSWERED ON:22.11.2006  
CHILD MORTALITY RATE  
Majhi Shri Parsuram

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

- (a) the progress made in various States to check the child mortality rate during the last three years, State-wise and year-wise;
- (b) the steps taken by the Government to curb the child mortality rate;
- (c) whether special attention is being paid in this regard in tribal areas; and
- (d) if so, the details thereof ?

**Answer**

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

(a) to (d): The progress made in various states to check the child mortality rate, as per the latest available data (Sample Registration System, (SRS) 2004) for the past three years, state-wise and year-wise is enclosed at Annexure-I.

The response of the Government has been to launch the Integrated Management of Neonatal and Childhood Illnesses (IMNCI) in the country as part of the second phase of the Reproductive and Child Health Programme which has been implemented since April, 2005. The IMNCI places specific attention to the management of newborn children in the community and promotes health care of newborn children and management of sick newborn children. Under the Universal Immunization Programme (UIP) children are immunized against six vaccine preventable diseases. Micronutrient supplementation with Vitamin A (for children up to five years) and iron folic acid is being carried out. Optimal Infant and Young Child Feeding is being promoted. Zinc has been introduced as an adjunct therapy to ORS in the management of diarrhea in children.

In addition, Home Based Newborn Care (HBNC) to be implemented through ASHAs, has been approved. The training material has been finalized and sensitization workshops held in the high focus states of Madhya Pradesh, Uttar Pradesh, Uttar Pradesh, Orissa, Rajasthan and Bihar.

Under the ongoing Reproductive and Child Health Programme, planning and provision for health care services for women and children with special focus on tribal areas is mandatory.