

- Augmenting the availability of skilled manpower by means of different skill-based trainings such as Skilled Birth Attendance; training of MBBS Doctors in Life Saving Anaesthetic Skills and Emergency Obstetric Care including Caesarean Section
- Provision of Ante-natal and Post Natal Care services including prevention and treatment of Anaemia by supplementation with Iron and Folic Acid tablets during pregnancy and lactation.
- Appointment of an Accredited Social Health Activist (ASHA) to facilitate accessing of health care services by the community including pregnant women.
- Systems strengthening of health facilities through flexi funds at Sub Centres, Primary Health Centres (PHCs) and Community Health Centres (CHCs).

New legislation to curb population growth

3110. SHRI N.K. SINGH:

SHRIMATI SHOBHANA BHARTIA:

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

- whether to curb the population growth in the country Government proposes to bring any new legislation;
- if so, the details thereof;
- whether the National Population Policy, 2000 has completely failed to curb population growth;
- if so, whether Government has recently stated that late marriages, regular power supply in rural areas and watching late night TVs can contribute a lot in curbing population growth; and
- if so, to what extent these measures can ensure curb in rising population?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI GHULAM NABI AZAD): (a) No.

- Does not arise.

(c) to (e) India adopted a comprehensive and holistic National Population Policy (NPP), 2000, with clearly articulated objectives, strategic themes and operational strategies. The National Population Policy, 2000 is based upon the need to simultaneously address issues of child survival, maternal health and contraception while increasing outreach and coverage of a comprehensive package of reproductive and child health services with Government, industry and the voluntary Non-Government sector, working in partnership. TFR which was 3.2 in 2000 — at the time of adoption of NPP, has declined to 2.7 in 2007 (as per Sample Registration Survey-SRS).

Efforts on Population stabilization very much required strengthening of the primary health care system as there is a very strong correlation between health indicators like Maternal Mortality rate and Infant Mortality Rate to the population stabilization. As such in line with the National Population Policy, 2000 the Government has launched the National Rural Health Mission (NRHM) on 12th April, 2005 throughout the country to address the strengthening of primary health care system. The approach to population stabilization under NRHM is providing through quality health services in remote rural areas along with a wide range of contraceptive choices to meet the unmet demands for these services which includes delivery, safe abortions, treatment of reproductive tract infections and Family Planning Services while ensuring full reproductive choices to women. The strategy also is to promote male participation in Family Planning.

The new initiative of NRHM of Community Health Workers (ASHAs) in every village has positively contributed towards household seeking health and family planning services and also has strengthened the public awareness campaign for family planning services.

Excessive control of MCI on medical education

3111. SHRIMATI JAYA BACHCHAN: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that medical education in India is in the hands of a small but powerful group of doctors and officials headed by MCI president; and

(b) if so, the steps Government has taken to wean away the excessive control from the group?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI GHULAM NABI AZAD): (a) and (b) This Ministry has proposed to set up a National Council for Human Resources in Health as an overarching regulatory body for the health sector to reform the current regulatory framework and enhance supply of skilled personnel. A Task Force under the chairmanship of Union Secretary (Health and Family Welfare) has been constituted to deliberate upon the issue of setting up the proposed National Council. The Task Force shall submit its report to the Ministry by 31st July, 2009.

Closed vaccine PSUs

3112. SHRI RAJKUMAR DHOOT:

SHRI RAHUL BAJAJ:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state whether it is true that some Public Sector Units manufacturing vaccines have been closed down in the last 5 years and if so, why was such a step taken and how has it impacted availability and cost of vaccines in the country?