

Sl.No.	Name of the Scheme	2008-09	2009-10	2010-11	2011-12	Total
3.	Strengthening of nursing services Human Resources (Health)-					
	(a) Opening of ANM Schools			1125	251	1376
	(b) Opening of GNM Schools			1125	2500	3625
4.	Strengthening of State Nursing Council	100	100			200
	TOTAL	103	100	2250	3351	5804

#### **Rising cases of mental illness among children**

727. DR. JANARDHAN WAGHMARE: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

- (a) whether cases of mental illness particularly among children are on the rise in the country;
- (b) if so, the details thereof;
- (c) whether treatment ratio for mental illness is very low in the country compared to some other countries;
- (d) if so, the details thereof; and
- (e) the details of strategies formulated to strengthen National Mental Health Programme in the country?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI GHULAM NABI AZAD): (a) and (b) As per a study conducted by the ICMR during 1995-2000 at Bangalore and Lucknow, the prevalence rate of child and adolescent psychiatric disorders has been estimated at 12-13% in children aged 0-16 years (excluding specific learning disability). The most common illness was nocturnal enuresis. The other common mental disorders were simple phobia, stammering, attention deficit hyperactivity disorder and oppositional defiant disorder. However, there is no conclusive evidence based upon epidemiological studies done in the same population at two different times to show that the prevalence is increasing in the country.

(c) and (d) According to WHO reports, the treatment gap of common mental disorders in developing countries is upto 90%.

(e) To address the huge burden of mental disorders, Government of India is implementing the National Mental Health Programme (NMHP) since 1982. A total of 123 districts in 30 States/UTs have been covered under the District Mental Health Programme (DMHP). Under the Eleventh Five Year Plan, the NMHP has been restructured to include the following components:

- I. Manpower Development Scheme:
  - (i) Establishment of Centres of Excellence
  - (ii) Scheme for manpower development in Mental Health
- II. District Mental Health Programme with added components of Life Skills Education and Counselling in Schools and Colleges, suicide prevention services etc.
- III. Up-gradation of Psychiatric Wings of Government Medical College.
- IV. Modernization of Government Mental Hospitals.

Further, there are 3 Centrally run mental health institutes, 40 State run mental hospitals and 335 Departments of Psychiatry in various medical colleges (154 in Government and 181 in private) across the country equipped to treat patients suffering from mental illness.

#### **Rise in child and maternal mortality rates**

728. SHRI N. BALAGANGA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

- (a) whether child and maternal mortality rates are on the rise in the country;
- (b) if so, the details thereof along with the reasons therefor;
- (c) the number of child and maternal mortality cases reported during the last three years, year-wise and State-wise;
- (d) the details of the ongoing programmes to check the rising rates of such mortalities, including the amounts allocated, utilised by each State, State-wise and year-wise, during the said period; and
- (e) the steps proposed to be taken by Government to reduce child and maternal mortality rates?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI SUDIP BANDYOPADHYAY): (a) to (c) No. Child and maternal mortality rates have shown steady decline and details are given in the Statement I, II, III. (*See below*)

(d) and (e) Details related to amount allocated, utilized by each State, State-wise and year-wise are given in the Statement IV, V, VI. (*See below*)

Under National Rural Health Mission, the following interventions are implemented to reduce child and maternal mortality rates in the country:

- (1) **Promotion of Institutional Delivery through Janani Suraksha Yojana (JSY):** Promoting Institutional delivery by skilled birth attendant is key to reducing both maternal and neo-natal mortality. There has been a phenomenal increase in number of institutional deliveries since the launch of JSY and number of beneficiaries has increased from 7.39 lacs in 2005 to 113.38 lacs in 2010-11. Besides this infrastructure of health facilities is also being strengthened for providing comprehensive obstetric care services under NRHM.