

(c) Examination of Adverse Drug Reactions of approved drugs and taking appropriate action is a continuous and ongoing process carried out in consultation with the experts.

#### **Maternal Deaths**

2119. DR. K.P. RAMALINGAM:

SHRI UPENDRA KUSHWAHA:

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

(a) whether over 55,000 women die due to child birth in India every year and 13 lakh children die before they reach their first birthday;

(b) whether Government has conducted any study to ascertain the reasons for these deaths;

(c) if so, the details thereof;

(d) the measures being taken to bring down maternal and infant mortality rates;

(e) whether Government has also conducted any study to ascertain the availability of medical facilities and doctors in the country particularly in rural, tribal and hilly areas; and

(f) if so, the details thereof and action taken to improve medical facilities and doctors in these areas?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI GHULAM NABI AZAD) : (a) As per the latest data on Maternal Mortality Ratio (MMR) from the Sample Registration System of Registrar General of India, MMR in the country is 212 per 100,000 live births for the period 2007-09 which translates into an approximate number of 56,000 maternal deaths in one year. As per SRS 2010, the Infant Mortality Rate (IMR) is 47 per 1000 live births which translates into approximately 12.5 lakh children dying before their first birthday.

(b) & (c) As per the Registrar General of India - Sample registration System (RGI-SRS) report titled "Maternal Mortality in India: 1997-2003 trends, causes and risk factors", major causes of maternal deaths in the country are Haemorrhage (38%), Sepsis (11%), Hypertensive Disorders (5%), Obstructed Labour (5%), Abortion (8%) and "Others" (34%) which includes Anaemia.

The main reasons for Infant Mortality in India as per the RGI for 2001-03 are perinatal conditions (46%), Respiratory infections (22%), Diarrhoeal diseases (10%), other infectious and parasitic diseases (8%) and Congenital anomalies (3.1%).

(d) Under the National Rural Health Mission (NRHM) & Reproductive and Child

Health programme within its umbrella, measures taken by the Government of India to reduce maternal and infant mortality in the country include:

- Promotion of institutional deliveries through Janani Suraksha Yojana.
- Capacity building of health care providers in basic and comprehensive obstetric care and infant and newborn care.
- Operationalization of sub-centres, Primary Health Centres, Community Health Centres and District Hospitals for providing 24x7 basic and comprehensive obstetric & newborn care.
- Facility Based Integrated Management of Neonatal and Childhood Illness (IMNCI)
- Emphasis on setting up the facilities for care of new born such as Sick New Born Care Units (SNCUs), New- Born Stabilization Units (NBSUs) and New Born Care: Corner (NBCCs) for strengthening and improving facility based new-born care at different levels.
- Name Based Tracking of all pregnant women and children to ensure antenatal, intra-natal and postnatal care and immunization services.
- Iron and Folic Acid supplementation to pregnant & lactating women and children from 6 months to 10 years for prevention and treatment of anemia.
- Promotion of limiting and spacing methods under Family planning.
- Engagement of more than 800,000 Accredited Social Health Activists (ASHAs) to generate demand and facilitate accessing of health care services by the community.
- Village Health and Nutrition Days (VHNDs) in rural areas as an outreach activity, for provision of maternal and child health services.
- Home based new born care (HBNC) through ASHA to improvew new born care practices at the community level and early detection and referral of sick new born babies.
- Early detection and appropriate management of Diarrheal and Acute Respiratory diseases.
- Infant and Young Child Feeding.
- Immunization against seven vaccine preventable diseases.
- Vitamin A prophylaxis.

- Setting up Nutritional Rehabilitation Centers (NRCs) for Management of Severe Acute Malnutrition (SAM) Children.
- Establishing Referral systems including emergency referral transport, for which the states have been given flexibility to use different models.
- A new initiative Janani Shishu Suraksha Karyakaram (JSSK) has been launched on 1st June 2011 which entitles all pregnant women delivering in public health institutions to absolutely free and no expense delivery including Caesarean section. Free entitlements have also been put in place for all sick newborns accessing public health institutions for treatment till 30 days after birth.

(e) and (f) The Rural Health Statistics published by the Government of India every year provides information on the numbers of different types of health facilities, availability of human resources and infrastructure etc. at these facilities in the rural and tribal areas of the country.

To improve medical facilities & doctors in these areas, the key steps taken by the GOI are:

- Augmentation of human resources: over 1.5 lakhs health human resources including nurses, paramedics and management professionals have been added to strengthen the health care delivery system in the country since the launch of NRHM.
- Financial assistance has been provided to the States to strengthen the healthcare facilities through new construction/up-gradation/renovation work in these health facilities. This also includes flexible funds through Rogi Kalyan Samities (RKS), Annual Maintenance Grants (AMG) and United Funds.

#### **Free Medicines to Patients**

2120. SHRI UPENDRA KUSHWAHA:

SHRI BALWINDER SINGH BHUNDER: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government has formulated a scheme to provide free medicines to patients visiting Government health facilities across the country;

(b) if so, the details thereof and by when the scheme will be implemented;

(c) whether hospitals under State Governments are also covered under the scheme; and

(d) the details of measures taken to strengthen medical facilities in rural areas?