

Birth and infant mortality rates of Rajasthan

†2535. SHRI ASHK ALI TAK : Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

- (a) the details of child birth and infant mortality rates in India;
- (b) the details of the child birth and infant mortality rates, in the State of Rajasthan during the last three years;
- (c) the names of schemes being run by the Central Government to reduce child birth and infant mortality rates; and
- (d) the details of the funds provided to the State for the purpose during the last three years?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI GHULAM NABI AZAD) : (a) As per Registrar General of India SRS 2010 report, Crude Birth rate in India is 22.1 per 1000 population and Infant mortality rate is 47 per 1000 live births.

- (b) CBR and IMR of Rajasthan for last three years are given below:

Year	Crude birth rate	Infant mortality rate
2008	27.5	63
2009	27.2	59
2010	26.7	55

(c) The following Schemes under RCH programme of NRHM are being implemented to reduce child birth rate and infant mortality rate :

- (1) Compensation scheme for sterilization acceptors - under the scheme MoHFW provides compensation for loss of wages to the beneficiary and also to the service provider & team for conducting sterilisations.
- (2) 'National Family Planning Insurance Scheme' (NFPIS) under which clients are insured in the eventualities of deaths, complications and

† Original notice of the question was received in Hindi.

failures following sterilization and the providers/accredited institutions are indemnified against litigations in those eventualities.

- (3) A scheme has been launched to utilize the services of ASHA to deliver contraceptives at the doorstep of beneficiaries. Scheme is being implemented in 233 districts of 17 states.
- (4) Promoting Post-partum Family Planning services at district hospitals by providing for placement of dedicated Family Planning Counsellors and training of personnel.
- (5) Realizing the need for spacing of births, an Incentive Scheme has been drawn up for ASHA in 18 identified states (EAG states, NE states, Gujarat & Haryana).
- (6) Promotion of Institutional Delivery through Janani Suraksha Yojana (JSY) and Janani Shishu Suraksha Karyakram (JSSK): Promoting Institutional delivery to ensure skilled birth attendance is key to reducing both maternal and neo-natal mortality.
- (7) Operationalizing Community Health Centers as First Referral Units (FRUs) and Primary Health Centers (24×7) for round the clock maternal care services.
- (8) Strengthening Facility based newborn care: Newborn care corners (NBCC) are being set up at all health facilities where deliveries take place; Special New Born Care Units (SNCUs) and New Born Stabilization Units (NBSUs) are also being set up at appropriate facilities for the care of sick newborn including pre-term babies.
- (9) Home Based Newborn Care (HBNC): Home based newborn care through ASHA has been initiated to improve new born practices at the community level and early detection and referral of sick new born babies
- (10) Capacity building of health care providers; Various trainings are being conducted under National Rural Health Mission (NRHM) to build and upgrade the skills of health care providers in basic and comprehensive obstetric care of mother during pregnancy, delivery and essential newborn care.

(d) Details of the funds provided to the State under RCH-II programme is given in Statement.

Statement

*Statement Showing the Allocation, Release and Expenditure RCH for the
F.Ys. 2009-10 to 2011-12*

(Rs. in crore)

States	2009-10			2010-11			2011-12		
	Alloc.	Rel.	Exp.	Alloc.	Rel.	Exp.	Alloc.	Rel.	Exp.
India	3295.00	3329.08	3124.69	3650.00	3444.01	3705.56	4012.75	4002.79	4572.87
Rajasthan	181.50	181.50	279.94	206.06	231.06	284.73	227.07	299.07	369.45

Study on women death due to child birth

2536. 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 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 and, if so, the details thereof;
- (c) the measures taken to bring down maternal and infant mortality rates;
- (d) 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
- (e) if so, the details thereof and the action taken to improve medical facilities and doctors in these areas?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI SUDIP BANDYOPADHYAY) : (a) As per the latest data on Maternal Mortality Ratio (MMR) from the Sample Registration System of Registrar General of India (RGI-SRS), MMR in the country is 212 per 100,000 live births for the