

3. Reproductive Child Health Programme under National Rural Health Mission (NRHM) includes:
- Janani Suraksha Yojana (JSY) to promote maternal health & institutional deliveries for better birth outcomes.
 - Focus on Maternal Health by promoting institutional deliveries improved coverage and quality of ANC skilled care to pregnant women, Post-partum care at community level.
 - Emphasis on appropriate Infant and Young Child Feeding.
 - Janani Shishu Suraksha Karyakram (JSSK).
 - Immunization of children to prevent them from both morbidity and mortality.
 - Promotion of ORS with zinc supplementation for a period of two weeks during the diarrhoea management.
 - Integrated Management of Neonatal and Childhood Illnesses and malnutrition.
 - Treatment of severe acute malnutrition through Nutrition Rehabilitation Centers (NRCs) set up at public health facilities.
 - Specific Programme to prevent and combat micronutrient deficiencies of Vitamin A, Iron & Folic Acid. Vitamin A supplementation for children from 9 months to the age of 5 years. Iron & Folic Acid syrup to children from the age of 6 months to 5 years. Iron & Folic Acid Supplementation to pregnant and lactating women & adolescents.
4. National Iodine Deficiency Disorders Control Programme (NIDDCP) for promotion of adequately iodated salt consumption at household level.
5. Nutrition Education to increase the awareness and bring about desired changes in the dietary practices including the promotion of breast feeding and dietary diversification is encouraged under both Integrated Child Development Services Scheme (ICDS) and National Rural Health Mission (NRHM).

Ambulance service for the North-eastern States

548. SHRIMATI VASANTHI STANLEY: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether the Ministry would consider providing 108 ambulance service to the North-Eastern States without insisting on the State Government's contribution;

(b) whether the Ministry contemplates on providing Neonatal 108 ambulance service to these States; and

(c) if so, the State-wise allocation of funds?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI GHULAM NABI AZAD): (a) and (b) Under NRHM, all State/UT Governments project their requirements of funds for undertaking various activities including 108 ambulance services for improvement in health care transportation facilities in their respective annual Programme Implementation Plan(PIP). The Government of India releases the fund for taking up the approved activities. At present, no such proposal is being considered for providing 108 ambulance service to the North-Eastern States without insisting on the State Government's contribution. Under NRHM Programme, funding share between, Centre and the North-Eastern States is 90:10, unlike most other States for which this ratio is 75:25.

(c) Does not arise in view of (a) & (b) above.

Sharp increase in premature births

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

(a) whether there is a sharp increase in the number of premature births in the country;

(b) if so, the reasons for this increase;

(c) the figures in this regard for the last three years; and

(d) the steps being taken to reverse this trend of premature birth?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI GHULAM NABI AZAD): (a) As per recent WHO publication "Born too Soon: The Global Action Report on Preterm Births", out of an estimated annual 2.7 Crore live births in India, 35 lakh babies are born preterm. This report also highlights the fact that preterm births are rising all over the world. However there is no specific data available for India in this regard.