

immunization (iv) Time not convenient (v) Fear of side effects (vi) Do not have time (vii) Vaccine not available (viii) Place not convenient (ix) ANM absent (x) Long waiting time (xi) Place too far (xii) Service not available.

The Government of India has declared year 2012-13 as the year of intensification of Routine Immunization. Various steps have been taken under Immunization programme to increase coverage and these include need based Central funding and commodity assistance to States, support for logistics such as Alternate Vaccine Delivery (AVD), capacity building of service providers at all levels, strengthening reporting and management of Adverse Event Following Immunization (AEFI), Strengthen supportive supervision at all levels, involvement of ASHAs for social mobilization of children, carrying out immunization weeks in North Eastern States, Uttar Pradesh, Bihar, Madhya Pradesh, Rajasthan, Gujarat, Jharkhand, Intensified IEC/Behaviour change Communication, increasing community participation and strengthening the follow up of children through mother and child tracking system etc.

#### **Death of pregnant women in the country**

2679. SHRI BAISHNAB PARIDA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that there is an unabated increase in the death cases of pregnant women for want of timely medical help in the country;

(b) if so, the details thereof and the reasons therefor;

(c) what is its status in Odisha; and

(d) what is the action plan to upgrade the existing medical system and set up additional such units in the country to control these deaths?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI GHULAM NABI AZAD): (a) and (b) As per the latest Registrar General of India-Sample Registration System (RG1-SRS) estimates on Maternal Mortality Ratio (2007-09), the MMR in India has declined from 254 per 100,000 live-births in 2004-06 to 212 per 100,000 live-births in 2007-09. There is a 42 point decline in MMR between SRS 2004-06 and 2007-09. The details of MMR in India and State-wise is given in the Statement (*See below*).

(c) As per the same report, the MMR for the State of Odisha has declined from 303 per 100,000 live births in 2004-06 to 258 per 100,000 live births in 2007-09 which translates into a decline of 45 points between SRS 2004-06 and 2007-09.

(d) Under the National Rural Health Mission, the key steps taken to upgrade the existing medical system including setting up dedicated units for maternal and child health care for bringing down maternal deaths are as under:

- Promotion of institutional deliveries through Janani Suraksha Yojana.
- Capacity building of health care providers in basic and comprehensive obstetric care.
- Operationalization of sub-centers, Primary Health Centers, Community Health Centers and District Hospitals for providing 24×7 basic and comprehensive obstetric care services.
- Major expansion of District Hospital, Sub-District Hospital and Community Health Centres with high case load of institutional deliveries by creation of 100 bedded MCH wing at DHs and 70/50/30 bedded maternity wards at SDH/CHC.
- Name Based web enabled tracking of Pregnant Women to ensure antenatal, intranatal and postnatal care has been provided.
- Mother and Child Protection Card in collaboration with the Ministry of Women and Child Development to monitor service delivery for mothers and children.
- Antenatal, Intranatal and Postnatal care including Iron and Folic Acid supplementation to pregnant and lactating women for prevention and treatment of anemia.
- Engagement of 8.71 lakhs Accredited Social Health Activists (ASHAs) to generate demand and facilitate accessing of health care services by the community.
- Village Health and Nutrition Days in rural areas as an outreach activity, for provision of maternal and child health services including Health and nutrition education.
- Janani Shishu Suraksha Karyakaram (JSSK) has been launched on 1st June, 2011, to eliminate any out of pocket expense for pregnant women delivering in public health institutions and sick newborns accessing public health institutions for treatment till 30 days after birth.

***Statement****Maternal Mortality Ratio**India and State-wise*

(Source: RGI, (SRS), 2004-06, 2007-09)

Major State	MMR (2004-06)	MMR (2007-09)
<b>INDIA TOTAL *</b>	<b>254</b>	<b>212</b>
Assam	480	390
Bihar/Jharkhand	312	261
Madhya Pradesh/ Chhattisgarh	335	269
Orissa	303	258
Rajasthan	388	318
Uttar Pradesh/Uttaranchal	440	359
Andhra Pradesh	154	134
Karnataka	213	178
Kerala	95	81
Tamil Nadu	111	97
Gujarat	160	148
Haryana	186	153
Maharashtra	130	104
Punjab	192	172
West Bengal	141	145
*Others	206	160

\*: Includes Others.