

The House re-assembled at twelve of the clock,

MR. DEPUTY CHAIRMAN in the Chair.

WRITTEN ANSWERS TO STARRED QUESTIONS

Initiatives for achieving stipulated TFR target

*562.DR. CHANDAN MITRA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether the National Population Policy, 2000 has failed to achieve the target of Total Fertility Rate (TFR) of 2.1 by 2010;

(b) if so, the reasons therefor alongwith the names of the States and UTs which have achieved TFR of 2.1 in the country;

(c) the details of new initiatives taken to achieve the stipulated TFR target of 2.1 in the remaining States and UTs; and

(d) the further steps taken by Government for revitalising Postpartum Family Planning to encourage new mothers to adopt family planning methods?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI GHULAM NABI AZAD): (a) and (b) The objectives of the National Population Policy, 2000, include addressing the unmet need for contraception and achieving a stable population by 2045, at a level consistent with the requirements of sustainable economic growth, social development and environmental protection. National Population policy, 2000, has been implemented with varying degree of success across different states of the country.

21 States/UTs have already achieved the TFR of 2.1. These are Himachal Pradesh, Jammu and Kashmir, Manipur, Mizoram, Nagaland, Sikkim, Tripura, Andhra Pradesh, Karnataka, Kerala, Maharashtra, Punjab, Tamil Nadu, West Bengal, Goa, Andaman and Nicobar Islands, Chandigarh, Daman, Delhi, Lakshadweep and Pudducherry. State-wise Total Fertility Rate is given in the Statement (See below).

(c) Major initiatives are as under:

- Expanding the basket of contraceptive choices.
- Strengthening service delivery.
- Improving access to information, supplies and services.

- Improving quality of family planning services.
- Sharp focus on post-partum family planning services and laying emphasis on spacing services particularly IUCDs.

Some of the specific initiatives in this direction are:

- Contraceptive delivery scheme through which contraceptives are made available at the doorstep through around 8.60 lakhs ASHAs in all the states.
- Focusing on high TFR States.
- Bringing back family planning as a part of overall health discourse and integrating it with RMNCHA+(Reproductive, maternal, newborn and child health including adolescents).

(d) The key steps for revitalizing post-partum family planning include:

- Identification of high case load facilities.
- Training of service providers in post-partum IUCD and post-partum sterilization.
- Appointing counsellors to motivate women for post-partum family planning.

Statement

Total Fertility Rate

| Sl. No. | States | TFR | Source |
|----------------------------|-----------------------------|-----|----------|
| 1 | 2 | 3 | 4 |
| TFR-2.1 & below | | | |
| 1. | Andaman and Nicobar Islands | 1.5 | SRS 2007 |
| 2. | Manipur | 1.6 | SRS 2007 |
| 3. | Goa | 1.6 | SRS 2007 |
| 4. | Puducherry | 1.6 | SRS 2007 |
| 5. | Tripura | 1.7 | SRS 2007 |
| 6. | Tamil Nadu | 1.7 | SRS 2011 |
| 7. | West Bengal | 1.7 | SRS 2011 |

| 1 | 2 | 3 | 4 |
|--------------------|-------------------|-----|----------|
| 8. | Himachal Pradesh | 1.8 | SRS 2011 |
| 9. | Andhra Pradesh | 1.8 | SRS 2011 |
| 10. | Kerala | 1.8 | SRS 2011 |
| 11. | Maharashtra | 1.8 | SRS 2011 |
| 12. | Punjab | 1.8 | SRS 2011 |
| 13. | Chandigarh | 1.8 | SRS 2007 |
| 14. | Delhi | 1.8 | SRS 2011 |
| 15. | Jammu and Kashmir | 1.9 | SRS 2011 |
| 16. | Karnataka | 1.9 | SRS 2011 |
| 17. | Daman and Diu | 1.9 | SRS 2007 |
| 18. | Mizoram | 2.0 | SRS 2007 |
| 19. | Nagaland | 2.0 | SRS 2007 |
| 20. | Sikkim | 2.0 | SRS 2007 |
| 21. | Lakshadweep | 2.1 | SRS 2007 |
| TFR-2.2-2.5 | | | |
| 22. | Odisha | 2.2 | SRS 2011 |
| 23. | Uttarakhand | 2.3 | AHS2010 |
| 24. | Haryana | 2.3 | SRS 2011 |
| 25. | Assam | 2.4 | SRS 2011 |
| 26. | Gujarat | 2.4 | SRS 2011 |
| TFR-2.6-3.0 | | | |
| 27. | Chhattisgarh | 2.7 | SRS 2011 |
| 28. | Arunachal Pradesh | 2.7 | SRS 2007 |

| 1 | 2 | 3 | 4 |
|----------------------------|------------------------|-----|----------|
| 29. | Jharkhand | 2.9 | SRS 2011 |
| 30. | Rajasthan | 3.0 | SRS 2011 |
| TFR 3.1 & above | | | |
| 31. | Madhya Pradesh | 3.1 | SRS 2011 |
| 32. | Meghalaya | 3.1 | SRS 2007 |
| 33. | Dadra and Nagar Haveli | 3.3 | SRS 2007 |
| 34. | Uttar Pradesh | 3.4 | SRS 2011 |
| 35. | Bihar | 3.6 | SRS 2011 |

Affordable dialysis facilities at Government hospitals

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

(a) whether Government is aware that cases of kidney failure are on the rise in the country;

(b) if so, the details of patients reported with kidney failure in Government hospitals in the country during the last two years, Year-wise and State-wise;

(c) whether Government is aware that dialysis facilities are very costly and inaccessible for ordinary patients;

(d) if so, the details thereof; and

(e) the efforts made by Government to provide quick, and accessible dialysis facility at affordable costs to all the patients in Government hospitals, including Tamil Nadu?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI GHULAM NABI AZAD): (a) and (b) The data regarding kidney failure is not maintained centrally. However as awareness is increasing, more patients with symptoms are approaching health care facilities and are being diagnosed with kidney failure.

(c) and (d) Yes. However, complete data regarding availability and cost of