

**National De-Worming Initiative**

913. SHRI PAUL MANOJ PANDIAN : Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

- (a) whether it is a fact that in an attempt to improve overall child health and address malnutrition, Government has launched a National De-Worming Initiative among all pre-school and school age children across the country;
- (b) if so, the details thereof;
- (c) whether it is also a fact that 241 million children, representing 68 per cent of the total, in the 1-14 year age group in India are stated to be at risk of soil transmitted helminths or parasitic worms; and
- (d) whether it is also a fact that Government will play the role of the nodal agency and the initiative will be implemented by States for the said National De-Worming Initiative?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA) : (a) to (d) Yes. Government of India has already launched National Deworming Day in 11 States/UT of India, namely Assam, Bihar, Chhattisgarh, Dadra and Nagar Haveli, Haryana, Karnataka, Rajasthan, Madhya Pradesh, Maharashtra, Tamil Nadu and Tripura. The deworming day round was observed on 10th February, 2015.

The salient features of this initiative are as follows :-

- All pre-school and school-age children (enrolled and non-enrolled) between the ages of 1 – 19 years were administered deworming drug *i.e.* Albendazole tablets through the platform of schools and anganwadi centres in order to improve their overall health, nutritional status, access to education and quality of life.
- Anganwadi workers provided deworming drug to all pre-school children (1-5 years) and all out of school children (6-19 years) at the Anganwadi centres, and School teachers provided deworming drug to all school enrolled children of 6-19 years age as per the National guidelines.

In addition, Government has provided detailed guidelines for implementation of deworming intervention alongwith training, awareness generation and ensuring sufficient

stock supply of deworming drug. There are specific guidelines / protocols for adverse event management as well and the initiative is being implemented by the States as per the national guidelines.

As per World Health Organization (WHO) database (2012), it is estimated that 241 million children (68%) between the ages of 1 – 14 years in India are at risk of parasitic intestinal worms.

#### **Opening of health centres near residential areas**

†914. SHRI P.L. PUNIA : Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government has issued directions to the States for opening of health centres under the National Rural Health Mission (NRHM) within the radius of three kilometres of residential areas;

(b) if so, the States in which health centres will be opened and the number of health centres to be opened in each State and the facilities with which each of them will be equipped with the State-wise details thereof; and

(c) the State-wise details of the quantum of funds to be allocated by the Centre to the States under this head?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA) : (a) to (c) Public Health being a State subject, the primary responsibility to ensure easier access to health services in the rural areas lies with State Governments. However, under National Rural Health Mission (NRHM) financial support is provided for strengthening of their health system including setting up and upgrading health facilities within their resource envelope as per the following population norms:

**Sub-Centre** : 1 per 5000 in Plain areas and 1 per 3000 in Hilly/Tribal/Difficult areas.

**Primary Health Centre (PHC)**: 1 per 30,000 population in Plain areas and 1 per 20,000 population in hilly/difficult/tribal areas.

**Community Health Centre (CHC)**: 1 per 1,20,000 population in plain areas and 1 per 80,000 population in hilly/difficult/tribal areas.

Additional norm of “time to care” has also been adopted to ensure that a Sub Centre

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†Original notice of the question was received in Hindi.