

75,103 births is 1.9 per 1000 live births. With annual birth cohort of 26 million, children born with Down syndrome is estimated to be 49400.

(c) and (d) The National Sample Survey Organisation, Ministry of Statistics and Programme Implementation in its 58th round, surveyed 45571 and 24731 households in rural and urban areas, respectively from 4637 villages and 3354 urban blocks, at the all-India level and reported prevalence of 94 person (92 in rural and 100 in urban areas) suffering from mental retardation per 1,00,000 persons. World Health Organization, 1992 defined intellectual disability (ID) or mental retardation as “a condition of arrested or incomplete development of the mind, which is especially characterized by impairment of skills manifested during the development period, which contribute to the overall level of intelligence, *i.e.* cognitive, language, motor and social abilities”.

#### **Revision of National Health Policy**

939. SHRI RAM KUMAR KASHYAP : Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether health status of Indians is still a cause for grave concern, especially that of the rural population;

(b) whether about 75 per cent of health infrastructure, medical man-power and other health resources are concentrated in urban areas where 27 per cent of the population live;

(c) the details of steps taken to address the problems of rural health both at macro (National and State) and micro (district and regional) levels; and

(d) whether there is any proposal to revise National Health Policy to address prevailing inequalities and working towards promoting a long-term perspective plan, mainly for rural health and if not, the reasons therefor?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA) : (a) The health status of the population especially that of rural population does require improvement. However, the condition of the health services in rural areas of the country has improved after the launch of the National Rural Health Mission.

(b) As per National Sample Survey Organisation (NSSO) 2004-05, the health worker density in rural areas is 11.74 per 10,000 populations while in urban areas, the

density is 40.46 per 10,000 populations. As per the 2011 National Health Profile, there are 1,60,862 hospital beds in rural areas out of the total 7,84,940 hospital beds available in the Country.

(c) Public Health being a State subject, the primary responsibility to provide health care facilities lies with the State Governments. To address the healthcare challenges, particularly in rural areas, the National Rural Health Mission (NRHM) was launched in 2005 to supplement the efforts of the State/UT governments to provide accessible, affordable and quality healthcare. The National Rural Health Mission (NRHM) has now been subsumed under the National Health Mission (NHM) as its Sub-Mission, along with National Urban Health Mission (NUHM) as the other Sub-Mission.

Under NRHM, high focus States that are economically and socially backward and have poor health indices are provided with higher per capita allocation as compared to rest of the States. Further, within the States, to ensure equitable healthcare and to bring about sharper improvements in health outcomes, a systematic effort to effectively address the intrastate disparities in health outcomes has been undertaken. At least 25% of all districts in each State have been identified as “High Priority Districts” based on a composite health index. All tribal districts which are below the State’s average of composite health index have also been included as high priority districts. These districts receive higher per capita funding, enhanced monitoring and focused supportive supervision, and are supported to adopt innovative approaches to address their special healthcare challenges.

Under NHM, financial support is provided to States to strengthen their health care systems including support for infrastructure, equipment, human resource and other resources based on the requirements posed by the States in their Programme Implementation Plans. Besides the support for medical human resource, support is also provided for programme managers, finance managers and accountants, data managers etc. for effective programme implementation.

(d) The draft National Health policy, 2015 has been placed in public domain seeking suggestions from stakeholders.

#### **Registration of slaughter houses with FSSAI**

940. SHRIMATI RENUKA CHOWDHURY : Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the total number of slaughter houses registered with the Food Safety and Standards Authority of India (FSSAI) as on date, State-wise;