

(c) whether it is also a fact that several States have voiced concern about the delays and discussions are going on to resolve the situation, if so, the details thereof?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI SHRIPAD YESSO NAIK): (a) Activities of AIDS Control Programme has been prioritized as per availability of funds; and prevention programmes have not been allowed to suffer.

(b) Payment to employees is the first charge on available funds. According to information available, most State AIDS Control Societies (SACS) have made payments to their employees upto the month of June, 2015. There are only 3 Societies which have paid salaries upto March, 2015.

However, there have been reports that staff employed by NGOs in Target Intervention Programmes face delay in payment of their remunerations.

There are no construction of clinics under the Programme.

(c) The National AIDS Control Programme is a 100% Centrally Sponsored Scheme. During the current year a total of ₹ 269 crore has so far been released to the States as grants-in-aid. These funds are routed through the State Treasuries and there have been reports of delay from some State treasuries to State AIDS Control Societies.

Measures to check population growth

†126. SHRI NARESH AGRAWAL: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the steps taken by Government to check the increasing population of India; and

(b) whether Government is contemplating imposing restriction on having more than two children per family, if so, by when, and if not, the reasons therefor?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) As per Statement (*See below*).

(b) Government has no such proposal at present to impose restriction on having more than two children in family.

The Family Welfare Programme in India is voluntary in nature, which enables a couple to adopt the family planning methods, best suited to them, according to their choice, without any compulsion.

†Original notice of the question was received in Hindi.

Statement*Strategies for attaining population stabilization*

Interventions under family planning programme:

1. Scheme for Home delivery of contraceptives by ASHAs at doorstep of beneficiaries: The Government has launched a scheme to utilize the services of ASHA to deliver contraceptives at the doorstep of beneficiaries. 8.85 lakh ASHAs are now distributing contraceptives at the door step.
2. Scheme for ASHAs to ensure spacing in births: The scheme is operational from 16th May, 2012. Under this scheme, services of ASHAs are being utilised for counselling of newly married couples to ensure delay of 2 years in birth after marriage and couples with 1 child to have spacing of 3 years after the birth of 1st child.
3. Pregnancy testing kits have been made an integral part of ASHA kit and are being used to diagnose pregnancy early, so as to ensure early registration of pregnancy/safe abortion services.
4. A new family planning method, *i.e.* *post-partum* IUCD (PPIUCD) has been introduced in the program. PPIUCD services are being provided by trained health providers in Government hospitals, within 48 hours after the delivery.
5. Basket of choice has been expanded with introduction of a new IUCD-375 of 5 years effectivity, in addition to the already existing IUCD-380A of 10 years effectivity.
6. Dedicated counsellors (RMNCH counsellors) are placed at high case load facilities for providing family planning counselling to clients.
7. Celebration of World Population Day 11th July and Fortnight: The event is observed over a month long period, split into fortnight of mobilization/ sensitization followed by a fortnight of assured family planning service delivery and has been made a mandatory activity from 2012-13 and starts from 27th June each year.
8. Other On-going interventions:
 - Assured delivery of family planning services for both IUCD and sterilisation.
 - National Family Planning Indemnity Scheme' (NFPIS) under which clients are insured in the eventualities of deaths, complications and failures following sterilization and the providers/ accredited institutions are indemnified against litigations in those eventualities.
 - Compensation scheme for sterilization acceptors - under the scheme

MoHFW provides compensation for loss of wages to the beneficiary and also to the service provider (and team) for conducting sterilisations.

- More emphasis on Spacing methods like IUCD.
- Availability of Fixed Day Static Services at all facilities.
- Quality care in Family Planning services by establishing Quality Assurance Committees at state and district levels.
- Contraceptives supply management up to peripheral facilities.
- Demand generation activities in the form of display of posters, billboards and other audio and video materials in the various facilities.

Following strategies have been taken up by Jansankhya Sthirata Kosh/National population stabilization fund as population control measures:

Advocacy and IEC activities:- JSK as a part of its awareness and advocacy efforts on population stabilization, has established networks and partnerships with other Ministries, development partners, private sectors, corporate and professional bodies for spreading its activities at the national, state, district and block level.

Perna Strategy:- JSK has launched this strategy for helping to push up the age of marriage of girls and delay in first child and spacing in second child the birth of children in the interest of health of young mothers and infants. The couple who adopt this strategy awarded suitably. This helps to change the mindsets of the community.

Santushti Strategy:- Under this strategy, Jansankhya Sthirata Kosh, invites private sector gynecologists and vasectomy surgeons to conduct sterilization operations in Public Private Partnership mode. The private hospitals/nursing home who achieved target to 10 or more are suitably awarded as per strategy.

Patients suffering from water-borne diseases

127. SHRI MOHD. ALI KHAN: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that 50 per cent of patients across the globe suffer from water-borne diseases;

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

(c) the funds spent for the purpose in the Eleventh and Twelfth Plans period, State-wise; and

(d) the corrective steps being taken so far?