

The newer evidence based approaches like empowering ANM to give injection Gentamycin, Injection Vitamin K at birth, Kangaroo Mother Care for preterm newborn and strengthening of care of sick newborn services have been incorporated in INAP.

The State Governments have started implementing INAP and this is expected to reduce neonatal mortality and thereby overall child mortality in the country.

(c) Public health institutions in States/UTs which implement Janani Suraksha Yojana (JSY) are equipped to deal with institutional deliveries. Funds are being provided to the States/UTs under the National Health Mission to strengthen their public health facilities in terms of infrastructure up gradation in labour room, wards, hiring of medical officers and staff nurses, procurement of essential drugs and supplies so that these facilities get equipped for conducting institutional deliveries.

(d) There has not been a delay of 2-3 years in disbursement of JSY funds under DBT as the DBT payments under JSY has been expanded to all the districts of the country from 2015-16 only.

Controlling menace of HIV in the country-side

1868. SHRI BAISHNAB PARIDA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

- (a) what is the status of HIV menace in the country;
- (b) how far has it been controlled especially in the country-side;
- (c) the details of various measures that have been taken to control this menace; and
- (d) the action plan of Government to speed up creation of additional facilities and also organising proper awareness among the public to help them to avail of these facilities to control this menace in the rural parts of India?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI SHRIPAD YESSO NAIK): (a) As per India HIV estimation 2015 report, an estimated 21.17 lakh People are living with HIV. The adult HIV prevalence at national level has continued its steady decline from an estimated peak of 0.38% in 2001-03 through 0.34% in 2007 to 0.26% in 2015.

(b) and (c) India is estimated to have around 86,000 Annual new HIV infections in 2015, showing a decline of 66% in new infections from 2000-2015. Thus, it is under

control. There is no separate figure for rural and urban areas, however, HIV Sentinel Surveillance 2012-13 measuring HIV prevalence among Pregnant Women, which is considered as proxy for general population shows that there is no significant difference between rural and urban area HIV prevalence.

There is no separate measure taken for rural areas, except the Link Worker Scheme, which is implemented through community-based organization/Non-Governmental Organisation to addresses HIV prevention and care needs of the high risk and vulnerable groups in rural areas.

Link Worker Scheme, a community-based intervention/Non-Governmental Organisation is implemented to addresses HIV prevention and care needs of the high risk and vulnerable groups in rural areas by providing information on HIV, condom promotion and distribution and referrals to counseling, testing and STI services through Link workers. Currently Link Worker Scheme is operational in 129 districts of India.

The Government communication strategy to create awareness of AIDS among different groups including sex-workers has moved from creating general awareness to Behaviour Change Communication. It aims to motivate behavioural change among most at risk populations, raise awareness and risk perception among general population, particularly youth and women, generate demand for HIV/AIDS related health services like condoms, Counseling & Testing Services and create an enabling environment that encourages HIV related prevention, care and support activities and to reduce stigma and discrimination at individual, community and institutional levels.

Keeping mental illness out from the Disability Law

1869. DR. SANJAY SINH: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

- (a) whether Government proposes to keep out mental illness from the ambit of long delayed law planned on disabilities;
- (b) if so, the details thereof and reasons therefor;
- (c) whether Government is aware that mental illness all over the world is considered as disability; and
- (d) if so, what is Government's reaction in this regard?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI SHRIPAD YESSO NAIK): (a) to (d) As per information furnished by