

Status of Mahila Banks in Odisha

*250. SHRI BISHNU CHARAN DAS: Will the Minister of FINANCE be pleased to state:

- (a) number of Mahila Banks presently being run in the country, State-wise;
- (b) the number of Mahila Banks functioning in Odisha, district-wise;
- (c) whether Government is considering to spread the network of Mahila Banks in rural areas of Odisha particularly in Jagatpuri district; and
- (d) if so, the details thereof and if not, the reasons therefor?

THE MINISTER OF FINANCE (SHRI ARUN JAITLEY): (a) and (b) The State-wise list of number of Mahila Urban Co-operative Banks (organised by Mahilas) is in closed as Statement (*See below*).

(c) and (d) Reserve Bank of India has informed that relaxations have been permitted in entry point norms for Mahila Banks to the extent of 50% of the minimum required capital prescribed for general category of Banks.

As informed by Public Sector Banks, there are about 320 all-women branches in the country of which 22 are in Odisha. There are about 8839 bank branches headed by women in the country, out of which 281 are in Odisha.

Statement***State-wise list of Mahila Urban Co-operative Banks in India***

Sl. No.	State/UT	No. of Mahila Urban Co-operative Banks (organized by Mahilas)
1	2	3
1.	Andhra Pradesh	2
2.	Assam	1
3.	Chhattisgarh	3
4.	Goa	1
5.	Gujarat	9
6.	Karnataka	24
7.	Madhya Pradesh	8
8.	Maharashtra	27
9.	Manipur	1

1	2	3
10.	Rajasthan	6
11.	Telangana	2
12.	Uttar Pradesh	2
13.	West Bengal	2
TOTAL		88

Source: Reserve Bank of India.

Deaths of children due to preventable diseases

*251. DR. KANWAR DEEP SINGH: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether India is one of the five countries where highest number of children under five die of preventable diseases, if so, the details thereof and reasons therefor; and

(b) what are the interventions to improve this?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) As per the State of World's Children report published by UNICEF in 2016, Democratic Republic of the Congo, Ethiopia, India, Nigeria and Pakistan account for maximum number of under-five deaths in the world. The possible reasons for this may be summarised as:

- India's large birth cohort and high neonatal mortality
- Infectious diseases like-pneumonia, diarrhoea and measles
- Non-communicable diseases and injuries
- Malnutrition acts as a contributory factor in child diseases and deaths

(b) The interventions under the National Health Mission (NHM) of Government of India, aimed at reducing child mortality in the country include-Promotion of Institutional deliveries through Janani Suraksha Yojana (JSY) and Janani Shishu Suraksha Karyakaram (JSSK), strengthening of delivery points, ensuring essential newborn care and Facility Based Newborn Care (FBNC) for care of sick and small babies, and newer interventions such as Kangaroo Mother Care (KMC), Antenatal Corticosteroids in preterm labour, Vitamin K injection at birth, Empowering ANMs to provide Injection Gentamicin to young infants with suspected sepsis and establishment of Nutritional Rehabilitation Centres (NRCs) to treat under-5 severe acute malnourished children.

Some other important interventions are Universal Immunization Programme (UIP)