

**Inquiry into alarming rise in caesarean surgeries**

\*277. SHRI AMAR SINGH: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government has received any complaint about the alarming rise in caesarean surgery cases mainly in private hospitals in the country;

(b) whether Government is aware that a large number of doctors do caesarean delivery for no reasons at all except for extracting exorbitant money from the public at the cost of health of women; and

(c) whether Government has conducted any inquiry about this shameful practice in private hospitals and if so, the details thereof and what action Government proposes to take against such heartless doctors?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) and (b) Government of India has received complaints through public grievances regarding the high rate of C-section in private hospitals and unethical practice of doctors for making money from unsuspecting women and pushing them towards surgical deliveries.

(c) Government of India (GoI) has already written to all States and UTs sharing the latest WHO statement on Caesarean section rates. In addition, States have been informed to conduct periodic prescription audit in the private health facilities under the Clinical Establishment Act.

A Communication has also gone to Federation of Obstetrical and Gynecological Societies of India (FOGSI) which is the largest professional body of Obstetricians and Gynecologists in India for sharing the WHO statement to all their State chapters and the Obstetricians and Gynecologists registered with them.

The Government of India has enacted the Clinical Establishments (Registration and Regulation) Act, 2010 with the objective of registration and regulation of health care institutions including those in the private sector. 10 States and 6 UTs have adopted the Clinical Establishment Act. Health being a State subject, it is the responsibility of the State to effectively implement the act.

**Removing hurdles in implementation of Jan Dhan Yojana**

\*278. SHRI K. T. S. TULSI: Will the Minister of FINANCE be pleased to state:

(a) whether it is a fact that the legal requirements of having an Aadhaar Card to be able to get the benefit of Jan Dhan Yojana is impeding the implementation of the said scheme; and

(b) if so, the steps taken by Government to remove the hurdles in implementation of the said scheme?

THE MINISTER OF FINANCE (SHRI ARUN JAITLEY): (a) and (b) There is no legal compulsion of having an Aadhaar Card to get the benefit of Jan Dhan Yojana.

#### **Unsupervised deliveries of babies**

†\*279. CH. SUKHRAM SINGH YADAV: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) to what extent the Maternal Mortality Rate (MMR) and Infant Mortality Rate (IMR) have reduced during the last three years and whether the Ministry, keeping in view the same, proposes to take some more steps in this direction;

(b) whether it is a fact that deliveries take place even today without supervision or help of trained health workers; and

(c) if so, the year-wise number of such deliveries?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA): (a) The data on Maternal Mortality Ratio (MMR) is made available by Registrar General of India (RGI) through its Sample Registration System (SRS) and it is not available on an annual basis.

As per the last SRS data released by the RGI, MMR of India has shown a decline from 212 per 100,000 live births in the period 2007-09 to 178 per 100,000 live births in 2010-12 to 167 per 100,000 live births in the period 2011-13.

As per the SRS data released by RGI, Infant Mortality Rate (IMR) has also steadily declined from 40 per thousand live births in 2013 to 39 per thousand live births in 2014 and has further dropped to 37 per thousand live births in 2015.

Under the National Health Mission, various strategies have been implemented by Government of India to reduce Maternal and Infant Mortality such as demand promotion and conditional cash transfer for increasing institutional delivery through the Janni Suraksha Yojana, entitlements for free and no expense delivery including C Sections at public health institutions under Janani Shishu Suraksha Karyakaram (JSSK), strengthening delivery points for providing comprehensive and quality Reproductive, Maternal, New-born, Child and Adolescent Health (RMNCH+A) Services, establishment of Special New-born Care Units (SNCU), New-born Stabilization Units (NBSU), establishment of Mother and Child Health Wings etc. A host of newer interventions have also been recently introduced. The institutional deliveries has gone up from

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† Original notice of the question was received in Hindi.