

- Central support for larvicides, fogging machines, LLINs etc.
- Conduct of trainings for capacity Building of doctors on case management.
- Information Education Communication(IEC)/ Behaviour Change Communication(BCC) activities to disseminate knowledge for prevention and control.
- Mega Awareness Campaign for community sensitization under the leadership of Hon'ble HFM was carried out by 286 teams in Delhi jointly by Gol and Municipalities on 17th to 19th July, 2019. As a follow up of Mega Awareness Campaign, activities carried out in Delhi NCR during August and September, 2019.
- Observance of 'National Dengue Day' across the country including Delhi emphasizing on initiation of pre-monsoon preventive activities on 16th May.
- Sensitization of different Ministries/Departments for effective inter-sectoral convergence.

**UNICEF's State of the World's Children Report 2019**

1074. SHRI PRABHAKAR REDDY VEMIREDDY: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

- (a) whether it is a fact that as per the UNICEF's State of the World's Children Report 2019, India has the highest burden of deaths among children under the five years of age per year;
- (b) whether it is also a fact that more than 8 lakh children below five years died in 2018;
- (c) if so, the reasons therefor;
- (d) Government's reaction to this argument of UNICEF that poverty, urbanisation and climate change are the result of the above; and
- (e) the remedial measure Government proposes to take to stop deaths of children below five?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI ASHWINI KUMAR CHOUBEY): (a) to (c) As per UNICEF's State of

the World's Children Report 2019, the Under 5 Mortality Rate in India is 37 per 1,000 live births against Global average of 39 per 1,000 live births in 2018, which translates to more than 8 lakhs under 5 deaths in India.

As per the Sample Registration System (SRS) 2010-13 report of Registrar General of India, major causes of child mortality in India are: Prematurity and low birth weight (29.8%), Pneumonia (17.1%), Diarrheal diseases (8.6%), Other non-communicable diseases (8.3%), Birth asphyxia and birth trauma (8.2%), Injuries (4.6%), Congenital anomalies (4.4%), Ill-defined or cause unknown (4.4%), Acute bacterial sepsis and severe infections (3.6%), Fever of unknown origin (2.5%), All Other Remaining Causes (8.4%).

(d) As per the UNICEF 2019 report. Globalization, urbanization, inequities, humanitarian crises and climate shocks are driving unprecedented negative changes in the nutrition situation of children around the world.

Government of India has launched POSHAN (Prime Minister Overarching Scheme for Holistic Nourishment) Abhiyaan, to address malnutrition challenges in India by engaging all the important stakeholders in a convergent approach. The goals of POSHAN Abhiyaan is to prevent and reduce stunting, underweight and low birth weight by 2% per annum and the reduction of anemia by 3% per annum.

The Government of India has also launched several schemes under the aegis of Ministry of Women and Child Development (MWCD) to tackle malnutrition in the country including Anganwadi Services, Scheme for Adolescent Girls (SAG) and Pradhan Mantri Matru Vandana Yojna (PMMVY) to improve the nutritional and health status of children in the age-group 0-6 years. The Anganwadi Services scheme provides a package of six services i.e. Supplementary Nutrition, Pre School Non-formal Education, Nutrition and Health Education, Immunization, Health checkups and referral services.

(e) In order to address child mortality and morbidity, the Government of India is supporting all States/UTs under National Health Mission in implementation of Reproductive, Maternal, Newborn, Child, Adolescent health and Nutrition (RMNCAH+N) strategy, which has following interventions:—

1. Strengthening essential newborn care at all delivery points, establishment of Sick Newborn Care Units (SNCU), Newborn Stabilization Units (NBSU) and Kangaroo Mother Care (KMC) units for care of sick and small babies.

2. Home Based Newborn Care (HBNC) and Home-Based Care of Young Children (HBYC) by ASHAs to improve child rearing practices and to identify sick new-born and young children.
3. Early initiation and exclusive breastfeeding for first six months and appropriate Infant and Young Child Feeding (IYCF) practices are promoted under Mothers' Absolute Affection (MAA) in convergence with Ministry of Women and Child Development.
4. Universal Immunization Programme (UIP) is being supported to provide vaccination to children against life threatening diseases such as Tuberculosis, Diphtheria, Pertussis, Polio, Tetanus, Hepatitis B, Measles, Rubella, Pneumonia and Meningitis caused by Haemophilus Influenzae B. The Rotavirus vaccination has also been rolled out in the country for prevention of Rota-viral diarrhoea. Mission Indradhanush is targeted to immunize children who are either unvaccinated or partially vaccinated *i.e.* those that have not been covered during the rounds of routine immunization for various reasons. Intensified Mission Indradhanush (IMI) 2.0 is rolled-out as per road-map for achieving 90% full immunization coverage across the country.
5. Nutrition Rehabilitation Centres (NRCs) have been set up at public health facilities to treat and manage the children with Severe Acute Malnutrition (SAM) admitted with medical complications.
6. Defeat Diarrhoea (D2) initiative has been launched for promoting ORS and Zinc use and eliminating the diarrhoeal deaths by 2025.
7. Social Awareness and Actions to Neutralize Pneumonia Successfully (SAANS) initiative for reduction of Childhood morbidity and mortality due to Pneumonia.
8. Anaemia Mukh Bharat (AMB) strategy as a part of Poshan Abhiyan aims to strengthen the existing mechanisms and foster newer strategies to tackle anaemia, which include testing and treatment of anaemia in school going adolescents and pregnant women, addressing non nutritional causes of anaemia and a comprehensive communication strategy. National Deworming Day (NDD) is implemented biannually every year for deworming of children (one to nineteen year of age).

9. All the children from 0 to 18 years of age are screened for 30 health conditions classified (into 4Ds - Diseases, Deficiencies, Defects and Developmental delay under "Rashtriya Bal Swasthya Karyakaram" (RBSK) to improve the quality of survival and to reduce out of pocket expenditure of families. District early intervention centre (DEIC) at district health facility level are established for confirmation and management of the 4D's.
10. Village Health Sanitation and Nutrition Days (VHSNDs) are observed for provision of maternal and child health services and awareness on maternal and child Health and nutrition education through mass and social media to improve healthy practices and to generate demand for service uptake.
11. Name based tracking of mothers and children till two years of age is done through RCH portal to ensure complete antenatal, intranatal, postnatal care and immunization as per schedule.
12. Promotion of Institutional deliveries through cash incentive under Janani Suraksha Yojana (JSY) and Janani Shishu Suraksha Karyakaram (JSSK) which entitles all pregnant women delivering in public health institutions to absolutely free delivery including Caesarean section, post-natal care and treatment of sick infants up to one year of age. Pradhan Mantri Matru Vandana Yojana (PMMVY) is another maternity benefit programme under which cash incentive is provided to pregnant women and lactating mothe`

**National health policy with emphasis on EWSs**

1075. LT. GEN. (DR.) D. P. VATS (RETD.): Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

- (a) whether Government contemplates to formulate a national policy on health with special focus on providing quality healthcare to the Economically Weaker Sections (EWSs) of the country;
- (b) if so, the details thereof; and
- (c) whether Government also proposes to make it mandatory for specialist doctors to serve in rural areas for a specified period?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI ASHWINI KUMAR CHOUBEY): (a) to (c) The Government has