GOVERNMENT OF INDIA
MINISTRY OF HEALTH AND FAMILY WELFARE
DEPARTMENT OF HEALTH AND FAMILY WELFARE

RAJYA SABHA
UNSTARRED PARLIAMENT QUESTION 1710
TO BE ANSWERED ON 3RD AUGUST 2021

"STRATEGY TO COUNTER RISE IN MATERNAL AND CHILDREN DEATHS DURING COVID-19 PANDEMIC"

1710: Shri Shaktisinh Gohil:

Will the **MINISTER of HEALTH AND FAMILY WELFARE** be pleased to state:

(a) whether Government is aware that according to "Direct and Indirect Effects of COVID-19 Pandemic and Response in South Asia", published by UNICEF, India is likely to register the greatest increase in the number of deaths among children below five years among six South Asian countries in 2020 and also the highest number of maternal deaths amid the COVID-19 pandemic;

(b) if so, the strategy devised by Government to manage this situation; and

(c) if not, the reasons for such delay?

ANSWER

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE

(DR. BHARATI PRAVIN PAWAR)

(a) to (c):

Public health and hospitals being a State subject, the primary responsibility to ensure provision of health services lies with the respective State/UT.

In order to bring down maternal and child mortality, the Government of India is supporting all States/UTs in implementation of Reproductive, Maternal, Newborn, Child, Adolescent health and Nutrition (RMNCAH+N) strategy under National Health Mission based on the Annual Program Implementation Plan (APIP) submitted by States/ UTs. The maternal and child mortality has shown significant decline. As per Sample Registration System (SRS) Reports of Registrar General of India (RGI), the Under 5 Mortality Rate (U5MR) has declined from 45 per 1000 live births in 2014 to 36 per 1000 live births in 2018 and Maternal Mortality Ratio has declined from 130 per 1,00,000 live births in the period 2014-16 to 113 per 1,00,000 live births in the period 2016-18.

In order to prevent any disruption of essential services due to COVID Pandemic, the Government of India has taken proactive steps such as issuing guidelines, advisories, regular review with States/ UTs on provision of all essential services. Ministry of Health and Family Welfare (MoHFW) is continuously monitoring the implementation of essential health services and provides required guidance and need-based technical and financial assistance to States/ UTs from time to time. The details of steps taken for continuation of essentials services are placed at annexure.

Annexure

Steps taken for continuation of essential services:

I. Issuing guidelines and advisories:

- Guidance Note on "Enabling Delivery of Essential Health Services (including maternal, newborn, children, nutrition, immunization, abortion care and Adolescent Health and hospital treatment for major diseases) during the COVID-19 Outbreak" was released on 14.04.20 to all States and UTs.
- National Guidelines to safely continue immunization services during the COVID -19 pandemic was released on 21.05.2020.
- Guidance Note on Provision of RMNCAH+N Services with special focus on pregnant women and children during and post COVID-19 Pandemic is issued to states/UTs dated 24.05.2020.
- An advisory dated 16.06.20 issued by MoHFW to all States/UTs stating that ensuring access to safe delivery and antenatal and postnatal care is a non-negotiable agenda and emphasized the directives at all levels in the states to prevent and pre-empt unfortunate adverse incidents.
- Appropriate communication material has been developed and shared with the States and UTs for addressing vaccine hesitancy and strengthening routine immunization with due precautions, during COVID-19 pandemic.
- In June 2021, MoHFW issued "Guideline on Operationalization of COVID care services for children and adolescents" with focus on strengthening Paediatric COVID Care services in the country and also on continuing all essential child and adolescent health services.

II. Regular review with the States/UTs:

- Regular virtual meetings were conducted at the senior most levels with the State/UT team to impress upon them the importance and continuation of the essential services including RMNCH+A services and with special focus on Pregnant women and children during COVID-19 pandemic. Best practices across the States/ UTs were also shared in these meetings.
- In addition to these, various webinars/ meetings are organized by Ministry of Health and Family Welfare, with States/ UTs to review and guide for continuation of all essential services during COVID-19 pandemic.

III. Roll out National Telemedicine Service – eSanjeevani:

- On 13th April 2020, MoHFW rolled out National Telemedicine Service-eSanjeevani comprising of two variants of eSanjeevani namely - doctor to doctor (eSanjeevani AB-HWC) telemedicine platform and patient to doctor telemedicine platform (eSanjeevaniOPD) which provides outpatient services to the citizens in the confines of their homes. Currently, the eSanjeevani application is operational in 35 States/UTs and has rendered around 78 lakh consultations.
- To ensure safe and secure implementation of telemedicine services across the country, the National Medical Commission has issued Telemedicine Practice Guidelines in March 2020.

- eSanjeevani application has also been integrated with country's 3.74 lakh Common Service Centers (CSC) to enable telemedicine services to the remotest area of the country.

IV. In addition to above, Government of India has made provision of unique helpline No. 1921 in the Aarogya Setu App and 1075 as centralized COVID-19 helpline. Moreover, for quick transport of pregnant women and infants to the hospitals, 102, 108 and for guidance 104
numbers are also operational.

V. Government of India carried out Intensified Mission Indradhanush 3.0 (IMI 3.0) in 250 high risk districts identified based on the immunization coverage to vaccinate the left out and missed out children and Pregnant women. More than 9,50,000 children and 2,24,000 pregnant women received due doses of vaccines in this drive between February and March 2021.