

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

**RAJYA SABHA
UNSTARRED QUESTION No. 896
TO BE ANSWERED ON 3rd DECEMBER 2024**

NATIONAL AVERAGE OF CHILD MORTALITY RATE

**896: SHRI JAVED ALI KHAN:
SHRI RAMJI LAL SUMAN:**

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

- (a) the details of national average of child mortality rate;
- (b) the details of districts of the country which have higher child mortality rate than the national average, State-wise;
- (c) the reasons for higher child mortality rate in these States and districts; and
- (d) the details of steps Government has taken to bring down the child mortality rate in these districts in particular and in the country in general during last three years, year-wise and district-wise?

**ANSWER
THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY
WELFARE
(SMT. ANUPRIYA PATEL)**

(a) and (b): As per latest available report of Sample Registration System (SRS) of Registrar General of India (RGI), Under 5 Mortality Rate (child mortality) is 32 per 1000 live births in 2020 at National level.

The State/ UT wise details of Under 5 Mortality Rate (U5MR) is placed at Annexure I.

(c):As per Cause of Death Statistics 2017-19 report released by Office of the Registrar General & Census Commissioner, India; major causes of child mortality in India are – Prematurity & low birth weight (31.2%), Pneumonia (17.5%), Birth asphyxia & birth trauma (9.9%), Other non-communicable diseases (9.6%), Diarrheal diseases (5.8%), Congenital anomalies (5.7%), Injuries (4.9%), Ill-defined or cause unknown (4.3%), Fever of unknown origin (4.1%), Acute bacterial sepsis and severe infections (3.8%) and Other remaining causes (3.3%).

(d): The Ministry of Health and Family Welfare (MoHFW) supports all States/UTs in implementation of Reproductive, Maternal, Newborn, Child, Adolescent Health and Nutrition (RMNCAH + N) strategy under National Health Mission (NHM) based on the Annual Program Implementation Plan (APIP) submitted by States / UTs. The details of interventions to improve child survival all across the country are placed at Annexure II.

Annexure I

Annexure referred in reply to part (a) and (b) of Rajya Sabha US Question No. 896 for answer on 03.12.2024

Status of Under 5 Mortality Rate (SRS) in India and Bigger States/ UTs in 2020 (Source: Sample Registration System Report of Registrar General of India)	
India	32
Andhra Pradesh	27
Assam	40
Bihar	30
Chhattisgarh	41
Delhi	14
Gujarat	24
Haryana	33
Himachal Pradesh	24
Jammu & Kashmir	17
Jharkhand	27
Karnataka	21
Kerala	8
Madhya Pradesh	51
Maharashtra	18
Odisha	39
Punjab	22
Rajasthan	40
Tamil Nadu	13
Telangana	23
Uttar Pradesh	43
Uttarakhand	26
West Bengal	22

Annexure referred in reply to part (d) of Rajya Sabha US Question No. 896 for answer on 03.12.2024

The details of interventions to improve child survival all across the country are placed as below:

- **Facility Based New-born Care:** Neonatal Intensive Care Units (NICUs)/ Special New-born Care Units (SNCUs) are established at Medical College and District Hospital, New-born Stabilization Units (NBSUs) are established at First Referral Units (FRUs)/ Community Health Centres (CHCs) for care of sick and small babies.
- **Mother Newborn Care Units (MNCUs)** are established with the aim of 'zero separation' of mother and baby including small and sick babies who require newborn care.
- **Kangaroo Mother Care (KMC)** is implemented at facility and community level for low birth weight/ pre-term babies. It includes early and prolonged skin-to-skin contact with the mother or family member and exclusive and frequent breastfeeding.
- **Community Based care of New-born and Young Children:** Under Home Based New-born Care (HBNC) and Home-Based Care of Young Children (HBYC) program, home visits are performed by ASHAs to improve child rearing practices and to identify sick newborn and young children in the community for referral to health facility.
- **Janani Shishu Suraksha Karyakram (JSSK):** Sick infants up to one year of age are entitled to free treatment in public health institutions along with the provision of free transport, diagnostics, medicines, blood and consumables.
- **Universal Immunization Programme (UIP)** is implemented to provide 11 vaccines to protect children against 12 preventable diseases.
- **Mothers' Absolute Affection (MAA):** 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).

- **Social Awareness and Actions to Neutralize Pneumonia Successfully (SAANS)** initiative has been implemented since 2019 for reduction of childhood morbidity and mortality due to Pneumonia.
- **STOP Diarrhoea** initiative is implemented for promoting use of ORS and Zinc and for reducing morbidity and mortality due to childhood diarrhoea.
- **Rashtriya Bal Swasthya Karyakram (RBSK):** Children from 0 to 18 years of age are screened for 32 health conditions (i.e. Diseases, Deficiencies, Defects and Developmental delay) under Rashtriya Bal Swasthya Karyakram (RBSK) to improve child survival. District Early Intervention Centres (DEICs) at district health facility level are established for confirmation and management of children screened under RBSK.
- **Nutrition Rehabilitation Centres (NRCs)** are established at public health facilities where children with Severe Acute Malnutrition (SAM) and medical complications are admitted for treatment.