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

LOK SABHA UNSTARRED QUESTION NO. 653 TO BE ANSWERED ON 18TH NOVEMBER, 2016

FAMILY WELFARE PROGRAMME

653. SHRI SADASHIV LOKHANDE: SHRI PARBHUBHAI NAGARBHAI VASAVA:

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

- (a) whether the Government is considering to implement new family welfare programme for controlling the pace of rising population in the country;
- (b) if so, the details thereof;
- (c) the measures adopted by the Government for making the small family concept popular; and
- (d) whether any success has been achieved in it and if so, the details thereof?

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

- (a): The current family welfare program addresses all the aspects of reproductive health and therefore there is no proposal to implement new family welfare programme for controlling the pace of rising population in the country.
- (b): Does not arise.
- (c): The measures adopted by the Government for making small family concept popular are annexed.
- (d): Yes , the TFR of the country has reduced to 2.3. 24 States/UTs have achieved a replacement TFR

The measures adopted by the Government for making small family concept popular On-going Interventions under Family Planning Programme:-

- Ensuring quality care in Family Planning services by establishing Quality Assurance Committees in all state and districts.
- Increasing male participation and promotion of 'Non Scalpel Vasectomy".
- 'National Family Planning Indemnity Scheme' (NFPIS) under which clients are insured in the eventualities of deaths, complications and failures following sterilization and the providers/ accredited institutions are indemnified against litigations in those eventualities.
- Compensation scheme for sterilization acceptors under the scheme MoHFW provides compensation for loss of wages to the beneficiary on account of undergoing sterilisation.
- Accreditation of more private/ NGO facilities to increase the provider base for family planning services under PPP.
- Improving contraceptives supply management up to peripheral facilities
- A rational human resource development plan is in place for provision of IUCD, Minilap and NSV to empower the facilities (DH, CHC, PHC, SHC) with at least one provider each for each of the services and Sub Centres with ANMs trained in IUD insertion
- Emphasis on MinilapTubectomy services because of its logistical simplicity and requirement of only MBBS doctors and not post graduate gynaecologists/ surgeons.
- Demand generation activities in the form of display of posters, billboards and other audio and video materials in the various facilities

New interventions started under Family Planning

- Expansion of basket of choice: The current basket of choice has been expanded to include the new contraceptives viz. Injectable contraceptive DMPA, Centchroman and ProgreteroneOnly Pills (POP).
- Redesigned Contraceptive Packaging: The packaging for Condoms, OCPs and ECPs has now been improved and redesigned so as to influence the demand for these commodities.
- New Family Planning Media campaign to influence the contraceptive demand.
- Promotion of IUCDs as a short & long term spacing method Introduction of Cu IUCD-375 (5 years effectivity) under the Family Planning Programme.
- Emphasis on Postpartum Family Planning (PPFP) services with introduction of PPIUCD and promotion of minilap as the main mode of providing sterilization in the form of post-partum sterilization to capitalize on the huge cases coming in for institutional delivery under JSY.
- Appointment of dedicated RMNCH+A counsellors at high case load facilities.

- Assured delivery of family planning services In last four years states have shown their commitment to strengthen fixed day family planning services for both IUCD and sterilization.
- Scheme for Home delivery of contraceptives by ASHAs at doorstep of beneficiaries has been expanded to the entire country w.e.f. 17th Dec, 2012.
- Scheme for ASHAs to ensure spacing in births:
 - Under the scheme, services of ASHAs are being utilized for counselling newly married couples to ensure delay of 2 years in birth after marriage and couples with 1 child to have spacing of 3 years after the birth of 1st child.
 - The scheme is being implemented in 18 states of the country (8 EAG, 8 North East, Gujarat and Haryana). Additionally the spacing component has been approved in West Bengal, Kamataka, Andhra Pradesh, Telangana, Punjab, Maharashtra, Daman Diu and Dadra and Nagar Haveli
- Celebration of World Population Day & fortnight (July 11 July 24):
 - The World Population Day celebration is a step to boost Family Planning efforts all over the country.
 - The event is observed over a month long period, split into an initial fortnight of mobilization/sensitization followed by a fortnight of assured family planning service delivery.
 - June 27 to July 10: "DampatiSamparkPakhwada" or "Mobilisation Fortnight"
 - July 11 to July 24 "JansankhyaSthirthaPakhwada" or "Population Stabilisation Fortnight"

FOLLOWING STRETAGIES HAVE BEEN ADOPTED BY JANSANKHYA STHIRATA KOSH/NATIONAL POPULATION STABILIZATION FUND AS POPULATION CONTROL MEASURES:

- Prerna Strategy:- JSK has launched this strategy for helping to push up the age of
 marriage of girls and delay in first child and spacing in second child birth in the
 interest of health of young mothers and infants. The couple who adopt this
 strategy awarded suitably. This helps to change the mindsets of the community.
- Santushti Strategy:- Under this strategy, JansankhyaSthirataKosh, invites private sector gynaecologists and vasectomy surgeons to conduct sterilization operations in Public Private Partnership mode. The private hospitals/nursing home who achieved target of 10 or more are suitably awarded as per strategy.
- National Helpline:- JSK also running a call center for providing free advice on reproductive health, family planning, maternal health and child health etc. Toll free no. is 1800116555.

