

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

**LOK SABHA
UNSTARRED QUESTION NO.4383
TO BE ANSWERED ON 19TH JULY, 2019**

IMR AND CMR

**4383. SHRI UPENDRA SINGH RAWAT:
SHRI KAUSHAL KISHORE:**

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

- (a) the percentage of national average Infant Mortality Rate (IMR) and Child Mortality Rate (CMR) and still births for the period of 2015-19; and
- (b) the steps taken by the Government to lower the present IMR, CMR and still births?

ANSWER

**THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND
FAMILY WELFARE
(SHRI ASHWINI KUMAR CHOUBEY)**

(a) & (b): As per Sample Registration System (SRS) of Registrar General of India, the Infant Mortality Rate (IMR) is 33 per 1000 live births, The Under 5 Mortality Rate (U5MR) is 37 per 1000 live births and Still Birth Rate (SBR) is 5 per 1000 births at National level in 2017. IMR, U5MR and SBR for the year 2015, 2016 and 2017 as per SRS Report are available and placed at **annexure**.

Public Health is a state subject, however to reduce Child mortality and still birth, various programmes and schemes under National Health Mission being implemented by States/ UTs are as follows:

- (1) Promotion of Institutional deliveries through cash incentive under Janani Suraksha Yojana (JSY) and Janani Shishu Suraksha Karyakaram (JSSK) which entitles all pregnant women (PW) delivering in public health institutions to absolutely free ante-natal check-ups, delivery including Caesarean section, post-natal care and treatment of sick infants till one year of age.
- (2) Strengthening of delivery points for providing comprehensive and quality Reproductive, Maternal, Newborn, Child and Adolescent Health (RMNCH+A) Services, ensuring essential newborn care at all delivery points, establishment of Special Newborn Care Units (SNCU), Newborn Stabilization Units (NBSU) and Kangaroo Mother Care (KMC) units for care of sick and small babies. India Newborn Action Plan (INAP) was launched in 2014 to make concerted efforts towards attainment of the goals of “Single Digit Neonatal Mortality Rate” and “Single Digit Stillbirth Rate”, by 2030. Comprehensive

Lactation Management Centres (CLMCs) at facilities with SNCU and Lactation Management Units (LMUs) at Sub-district level are made functional to ensure availability of Human Milk for feeding small new-borns. Home Based Newborn Care (HBNC) and Home Based Care of Young Children (HBYC) are being provided by ASHAs to improve child rearing practices.

- (3) Early initiation and exclusive breastfeeding for first six months and appropriate Infant and Young Child Feeding (IYCF) practices are promoted in convergence with Ministry of Women and Child Development. Village Health and Nutrition Days (VHNDs) are observed for provision of maternal and child health services and creating awareness on maternal and child care including health and nutrition education. Mothers' Absolute Affection (MAA) programme for improving breastfeeding practices (Initial Breastfeeding within one hour, Exclusive Breastfeeding up to six months and complementary feeding up to two years) through mass media campaigns and capacity building of health care providers in health facilities as well as in communities.
- (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. "Mission Indradhanush and Intensified Mission Indradhanush" was launched 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.
- (5) LaQshya a Labour Room quality improvement programme is being implemented in over 2100 health facilities across the country including medical colleges.
- (6) Pradhan Mantri Surakshit Matritva Abhiyan (PMSMA) is being implemented to provide fixed-day assured, comprehensive and quality antenatal care universally to all PW on the 9th of every month.
- (7) Universal screening of pregnant women including anaemic PW is carried out at all public health facilities. 180 iron and folic acid (IFA) tablets are given in the ante natal and 180 IFA tablets are given in the post-natal period to all pregnant women. Of these who are found to be clinically anaemic, are given double doses tablets as a part of treatment regimen.
- (8) Guidelines on standardization of Labour Rooms and creation of Obstetric HDU and Obstetric ICU at District Hospitals and Medical Colleges has also been prepared and disseminated to the States for improving quality of care during delivery and child birth.
- (9) Name based tracking of mothers and children till two years of age (Mother and Child Tracking System) is done to ensure complete antenatal, intranatal, postnatal care and complete immunization as per schedule.
- (10) Rashtriya Bal Swasthya Karyakram (RBSK) for health screening, early detection of birth defects, diseases, deficiencies, development delays and early intervention services has been operationalized to provide comprehensive care to all the children in the age group of 0-18 years in the community.
- (11) 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.

- (12) Iron and folic acid (IFA) supplementation for the prevention of anaemia among the vulnerable age groups, home visits by ASHAs to promote exclusive breast feeding and promote use of ORS and Zinc for management of diarrhoea in children under Intensified Diarrhoea Control Fortnight (IDCF), administration of deworm tablets to all the children in the age group of 1-19 years during National Deworming Day (February and August) are carried out.
- (13) Health and nutrition education through Information, Education & Communication (IEC) and Behaviour Change Communication (BCC) to promote healthy practices and create awareness to generate demand and improve service uptake.
- (14) To tackle the problem of anaemia due to malaria particularly in pregnant women and children, Long Lasting Insecticide Nets (LLINs) and Insecticide Treated Bed Nets (ITBNs) are distributed in endemic areas.
- (15) Dietary counseling to pregnant women is provided during ante-natal visits through the existing network of sub-centres and primary health centres and other health facilities as well as through outreach activities at Village Health & Nutrition Days (VHNDs).
- (16) Various trainings are being conducted to build and upgrade the skills of health care providers in basic and comprehensive obstetric care of mother during pregnancy, delivery and essential new-born care.

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Annexure

Infant Mortality Rate (IMR)			
	2015	2016	2017
India	37	34	33
Source: Sample Registration System (RGI)			

Under 5 Mortality Rate (U5MR)			
	2015	2016	2017
India	43	39	37
Source: Sample Registration System (RGI)			

Still Birth Rate (SBR)			
	2015	2016	2017
India	4	4	5
Source: Sample Registration System (RGI)			