

GOVERNMENT OF INDIA
MINISTRY OF WOMEN AND CHILD DEVELOPMENT

LOK SABHA
UNSTARRED QUESTION NO. 4006
TO BE ANSWERED ON 24.03.2023

POST PARTUM ISSUES AMONG PREGNANT WOMEN

4006. SHRI M.K. RAGHAVAN:

Will the Minister of WOMEN AND CHILD DEVELOPMENT be pleased to state:

- (a) whether it is a fact that postpartum issues are on the rise among pregnant women;
- (b) if so, whether the Government has statistics of such cases in India, if so, the details thereof, State-wise indicating the number of such postpartum issues reported from Kozhikode in Kerala;
- (c) the corrective steps being taken by the Government in this regard;
- (d) whether the Government proposes any special campaign to reduce postpartum depression, delivery stress amongst women in India and if so, the details thereof;
- (e) whether there is rise in caesarean deliveries in India, if so, the details thereof, State-wise including the number of such deliveries in Kozhikode; and
- (f) the steps taken for promoting normal deliveries over C Section deliveries in hospitals?

ANSWER

MINISTER OF WOMEN AND CHILD DEVELOPMENT
(SHRIMATI SMRITI ZUBIN IRANI)

(a) & (b) As per the information furnished by the Ministry of Health & Family Welfare, the first 48 hours of the post-natal period, followed by the first one week, are the most crucial period for the health and survival both of the mother and her new-born. Most of the fatal and near-fatal maternal and neonatal complications occur during this period.

World Health Organisation (WHO) recommendations on maternal and new-born care for a positive postnatal experience state that upto 30 percent of maternal deaths occur in the post-natal period. The majority of the complications such as postpartum haemorrhage (PPH), Sepsis and eclampsia, which may lead to maternal mortality, occur during this period.

(c) & (d) Public health and hospitals is a State subject, however, Government of India (GoI), has issued various guidance to all States/UTs to prevent such deaths during the postpartum period as given below:

- As per guideline on “Antenatal care and Skilled Attendance at Birth by Auxiliary Nurse Midwife (ANM)/ Lady Health Visitors (LHVs)/ Staff Nurses (SNs)”, an ANM provides social/psychological support to pregnant woman during her antenatal visits. In post-partum period, four Post Natal Care (PNC) visits are

conducted by ANM for ascertaining the wellbeing of baby and the mother. First visit is conducted within 24 hours in case of home deliveries, second visit is conducted on 3rd day after delivery, third visit is conducted on 7th day after delivery and fourth visit is conducted 6 weeks after delivery. During her 2nd and 3rd visits, the ANM assesses and counsels all the postnatal women for any postpartum depression and refers to the Medical Officer for further management if required.

- GoI is implementing Home Based New Born Care (HBNC) programme, under which Accredited Social Health Activists (ASHAs) conduct 7 home visits on the 1st day (within 24 hrs), 3rd day, 7th day, 14th day, 21st day, 28th day and 42nd day to check the mother and new-born, for their well-being. In case of institutional delivery, Reproductive Maternal Newborn Child Adolescent Health Plus Nutrition (RMNCAH+N) Counsellor/SN provides counselling to mother.

(e) & (f) As per National Family Health Survey (NFHS)-5, birth delivered by Caesarean Section has increased from 17.2% in 2015-16 to 21.5% in 2019-21. The State-wise percentage of birth delivered by Caesarean Section is **Annexed**.

The steps taken by the Ministry of Health & Family Welfare (MoHFW) for promoting normal deliveries over Caesarean Section deliveries in hospitals are as follows:

- Guidelines on Midwifery Services in India has been disseminated which aims to promote natural birthing.
- WHO statement (2015) on Caesarean section, has been shared with the Principal Secretaries, Mission Directors of all States and UTs urging them to share the WHO statement (2015) with all the Obstetricians and Gynaecologists working in public health facilities in their respective States/UTs. The Ministry has issued another OM M.12015/182/2015-MCH to the Federation of Obstetric and Gynaecological Societies of India (FOGSI) to share the WHO statement (2015) among the Obstetricians and Gynaecologists under its umbrella.
- All Central Government Health Scheme (CGHS) empanelled hospitals have been directed to display the information regarding ratio of deliveries by Caesarean Section vis-à-vis normal deliveries.
- Caesarean Section rates in public and private facilities are captured routinely at Health Management Information System (HMIS) portal. During the State review meetings, the issue of Caesarean Sections especially if found high is flagged based on the data captured in the portal. The states with high caesarean section rates are urged to look into the issue and take appropriate actions.
- Labour Room Quality Improvement Initiative (LaQshya) guideline of GoI entails that the facility shall ensure that information about the treatment is shared with patients or attendants regularly and a system is in place to involve Patient and/or relative in decision making about pregnant women's treatment. Furthermore, the guideline also ensures that written consent with details of the procedure with potentials risks and complication should be signed by patient/next of kin and one witness. Separate consent is taken for Anaesthesia procedure.
- Apart from these, caesarean section audit tool and guidelines have been shared with the States which aim to ensure that caesarean sections are undertaken judiciously, in only those cases which require such surgical interventions.

Annexure

Statement referred to in reply to part (e) and (f) of the Lok Sabha Unstarred Question Number 4006 for answer on 24.03.2023 raised by Shri V.K. Raghavan regarding 'Postpartum issues among Pregnant Women'

State-wise details of percentage of births delivered by Caesarean Section

Sl. No.	State/UT	Percentage of births delivered by Caesarean Section
1	India	21.5
2	Andaman and Nicobar	29.9
3	Andhra Pradesh	42.4
4	Arunachal Pradesh	14.8
5	Assam	18.1
6	Bihar	9.7
7	Chandigarh	31.3
8	Chhattisgarh	15.2
9	Delhi	23.6
10	Goa	39.5
11	Gujarat	21
12	Haryana	19.5
13	Himachal Pradesh	21
14	Jammu and Kashmir	41.7
15	Jharkhand	12.8
16	Karnataka	31.5
17	Kerala	38.9
18	Ladakh	37.6
19	Lakshadweep	31.3
20	Madhya Pradesh	12.1
21	Maharashtra	25.4
22	Manipur	25.6
23	Meghalaya	8.2
24	Mizoram	10.8
25	Nagaland	5.2
26	Odisha	21.6
27	Puducherry	33.3
28	Punjab	38.5
29	Rajasthan	10.4
30	Sikkim	32.8
31	Tamil Nadu	44.9
32	Telangana	60.7
33	The Dadra & Nagar Haveli and Daman & Diu	22.9
34	Tripura	25.1
35	Uttarakhand	20.4
36	Uttar Pradesh	13.7
37	West Bengal	32.6
