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

LOK SABHA UNSTARRED QUESTION NO. 4411 TO BE ANSWERED ON 20TH MARCH, 2020

POST PARTUM DEATHS

4411. SHRIMATI RANJANBEN DHANANJAY BHATT:

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

- (a) whether the Government is contemplating to take effective and concrete steps to prevent post portum deaths;
- (b) if so, the details thereof; and
- (c) if not, the reasons therefor?

ANSWER

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

- (a) to (c): The Government of India has initiated following key strategies to prevent maternal deaths which includes post partum deaths.
- Promotion of institutional deliveries through **Janani Suraksha Yojana** (**JSY**). A demand promotion and conditional cash transfer scheme was launched with the objective of reducing Maternal and Infant Mortality.
- Janani Shishu Suraksha Karyakram (JSSK) aims to eliminate out-of-pocket expenses for pregnant women and sick infants (up to one year of age). Under JSSK, every pregnant woman is entitled to free delivery, including caesarean section, in public health institutions. This also includes free transport, diagnostics, medicines, other consumables, diet and blood (if required).
- **Pradhan Mantri Surakshit Matritva Abhiyan** (PMSMA): Under PMSMA, all pregnant women are provided a minimum package of antenatal care services (investigations & drugs) on fixed day, 9th of every month. As part of the campaign, identification and line-listing of high risk pregnancies based on Obstetric/medical history and existing clinical conditions is carried out.
- To prevent anemia, every pregnant women is given 180 tablets of iron and folic acid after the first trimester, to be taken 1 tablet daily for 6 months and same is continued during the postnatal period (till 180 days). Pregnant women who are found to be clinically anemic, are given two tablets daily.
- Surakshit Matratva Ashwasan(SUMAN) a comprehensive multipronged and coordinated policy approach with an aim to assured, dignified, respectful and quality healthcare at no cost

- and zero tolerance for denial of services for every women and newborn visiting public health facilities in order to end all preventable maternal and newborn deaths and morbidities and provide positive birthing experience
- **Midwifery Initiative** has been started to create a cadre for Nurse Practitioners in Midwifery who are skilled in accordance to International Confederation of Midwives (ICM) competencies and capable of providing compassionate women-centred, reproductive, maternal and new-born health care services.
- LaQshya LaQshya programme aims to improve the quality of care in Labour room and Maternity operation theatres to ensure that pregnant women receive respectful and quality care during delivery and immediate post-partum.
- **Functionalisation of FRUs:** Provision of Emergency Obstetric care at FRUs is being done by operationalizing FRUs. While operationalizing, the thrust is on the critical components such as manpower, blood storage units, referral linkages etc.
- Operationalization of Blood Bank in District Hospitals and Blood Storage Unit in Sub district facilities is being taken to tackle complications due to severe anemia.
- Obstetric High Dependency Unit & Intensive Care Unit: Operationalization of Obstetric High Dependency Unit & Intensive Care Unit in a high case load tertiary care facilities across country to handle complicated pregnancies.
- Prevention of Post-Partum Hemorrhage (PPH) through "Community based advance distribution of Misoprostol" by ASHAs/ANMs for high home delivesry districts.
- Capacity building is undertaken of MBBS doctors in Anesthesia (LSAS) and Obstetric Care including C-section (CEmONC) skills to overcome the shortage of specialists in these disciplines, particularly in rural areas. Dakshata initiative aims to enable service providers in providing high quality services during childbirth at the institutions.
- **Skill Labs** with earmarked skill stations for different training programs are established to enhance the quality of training. Five National and over 100 State level Skills labs are now operational for conducting training.
- Maternal Death Surveillance Review (MDSR) is being implemented both at facilities and at the community level. The purpose is to take corrective action at appropriate levels and improve the quality of obstetric care.