

GOVERNMENT OF INDIA  
MINISTRY OF WOMEN & CHILD DEVELOPMENT

**LOK SABHA**  
**UNSTARRED QUESTION NO. 993**  
TO BE ANSWERED ON 18.09.2020

**REDUCTION IN MATERNAL MORTALITY RATE**

993. KUMARI SHOBHA KARANDLAJE:

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

- (a) whether the Government has taken note of reduction in Maternal Mortality Rate (MMR) in recent years, if so, the details thereof along with the various Government programs/schemes operational to address maternal health;
- (b) the details of States which have shown improvement in reducing maternal deaths in recent years, state-wise;
- (c) whether it is a fact that women's age of marriage was increased from fifteen years to eighteen years in 1978, by amending erstwhile Sharda Act of 1929;
- (d) if so, whether the Government has set up a Task Force to examine matters pertaining to age of motherhood, imperatives of lowering MMR, improvement of nutritional levels and related issues if so, the details thereof including the composition and terms of reference; and
- (e) whether the Task Force has submitted its report and if so, the recommendations thereof?

**ANSWER**

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

(a) & (b) As per the latest report (2016-18) of Sample Registration System (SRS) released by Registrar General of India (RGI), Maternal Mortality Ratio (MMR) of India per 100,000 live births has declined to 113 in 2016-18 from 122 in 2015-17 and 130 in 2014-2016. The detailed comparative state-wise MMR of the year 2015-17 and 2016-18 is placed at **Annexure-I**.

Under the National Health Mission (NHM), some of the important steps taken to reduce maternal deaths in the country are as follows:

- Janani Suraksha Yojana (JSY), a demand promotion and conditional cash transfer scheme is implemented with the objective of reducing Maternal and Infant Mortality by encouraging institutional deliveries.
- Under Janani Shishu Suraksha Karyakram (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, food and blood, if required.

- Pradhan Mantri Surakshit Matritva Abhiyan (PMSMA) has been launched to provide fixed-day assured comprehensive and quality antenatal care universally to all pregnant women on the 9<sup>th</sup> of every month. While antenatal care is routinely provided to pregnant women, special ANC services are provided by OBGY specialists/ Radiologist/ Physicians at government health facilities under PMSMA.
- 'LaQshya - Labor room Quality improvement Initiative' has been launched on 11<sup>th</sup> Dec 2017.
- Special provision of birth waiting homes under NHM in tribal areas.
- Maternal Death Surveillance and Response (MDSR) is implemented to take corrective action for averting maternal deaths.
- Funds are provided for strengthening of 'Delivery Points' for provision of comprehensive Reproductive, Maternal, New Born Child Health and Adolescent (RMNCH+A) services. Placing quality emergency obstetric care services at "Delivery Points" is a priority area.
- Maternal and Child Health (MCH) Wings are established at high caseload facilities.
- Operationalization of Comprehensive Abortion Care Services and services for Reproductive Tract Infections and Sexually Transmitted Infections (RTI/STI).
- Mother and Child Tracking System (MCTS) and Mother and Child Tracking Facilitation Centre (MCTFC), a name-based web-enabled system to track every pregnant women and child.
- Operational guidelines for Universal screening of Gestational Diabetes Mellitus, screening for hypothyroidism for high risk group during pregnancy, training of General Surgeons for performing Caesarean Section, calcium supplementation & de-worming during pregnancy and promotion of birth companion during delivery have been disseminated.
- Monthly Village Health and Nutrition Days (VHND) are organized as an outreach activity at Anganwadi centres for provision of maternal and child care including nutrition.
- Over 10 lakhs Accredited Social Health Activists (ASHAs) have been engaged to facilitate access of healthcare services by the community, particularly pregnant women.
- Under the National Iron+ Initiative, iron and folic acid supplementation is given across life stages including pregnant, lactating women and adolescent girls.
- Regular IEC/BCC is conducted.

(c) & (d) As announced in the Union Budget for the year 2020-21, a Task Force has been constituted by the Government vide notification dated 4<sup>th</sup> June, 2020 to examine the correlation of age of marriage and motherhood with (i) health, medical well-being and nutritional status of mother and neonate/infant/child, during pregnancy, birth and thereafter, (ii) key parameters like Infant Mortality Rate (IMR), Maternal Mortality Rate (MMR), Total Fertility Rate (TFR), Sex Ratio at Birth (SRB), Child Sex Ratio (CSR) etc. and (iii) any other relevant points pertaining to health and nutrition in this context.

(e) The Committee has not submitted its report.

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**Annexure-1**

**Statement referred to in reply to part (b) of the Lok Sabha Unstarred Q. No. 993 for answer on 18.09.2020**

**Maternal Mortality Ratio: India and State wise (SRS, RGI)**

<b>S.No.</b>	<b>States</b>	<b>2014-16</b>	<b>2015-17</b>	<b>2016-18</b>
1	<b>India</b>	<b>130</b>	<b>122</b>	<b>113</b>
2	Assam	237	229	215
3	Bihar/Jharkhand	165	165	149
4	Madhya Pradesh/ Chhattisgarh	173	188	173
5	Odisha	180	168	150
6	Rajasthan	199	186	164
7	Uttar Pradesh/ Uttarakhand	201	216	197
8	Andhra Pradesh	74	74	65
9	Telangana	81	76	63
10	Karnataka	108	97	92
11	Kerala	46	42	43
12	Tamil Nadu	66	63	60
13	Gujarat	91	87	75
14	Haryana	101	98	91
15	Maharashtra	61	55	46
16	Punjab	122	122	129
17	West Bengal	101	94	98
18	Other States	97	96	85