

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

**LOK SABHA  
STARRED QUESTION NO. 66  
TO BE ANSWERED ON THE 29<sup>TH</sup> NOVEMBER, 2024**

**QUALITY OF ANTENATAL CARE IN RAJASTHAN**

**\*66. SHRI RAHUL KASWAN:**

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

- (a) the specific measures taken/being taken by the Government to improve both the quantity and quality of Antenatal Care (ANC) services in Rajasthan, particularly in Churu district to meet the WHO-recommended guideline of eight ANC visits;
- (b) whether the Government has any plan to incorporate indicators in the NITI Aayog Health Index for measuring the quality/content of ANC services being provided at healthcare facilities in Rajasthan;
- (c) the mechanisms/interventions put in place to address disparities in ANC utilization and educational levels in Churu district of Rajasthan with the aim to reduce maternal and infant mortality rates; and
- (d) the steps taken under schemes such as the National Health Mission (NHM), Janani Shishu Suraksha Karyakram (JSSK), Janani Suraksha Yojana (JSY), and Pradhan Mantri Surakshit Matritva Abhiyan (PMSMA) to bridge service delivery gaps and reduce regional disparities in Rajasthan?

**ANSWER  
THE MINISTER OF HEALTH AND FAMILY WELFARE  
(SHRI JAGAT PRAKASH NADDA)**

(a) to (d) A Statement is laid on the Table of the House.

**STATEMENT REFERRED TO IN REPLY TO LOK SABHA  
STARRED QUESTION NO. 66 FOR 29<sup>TH</sup> NOVEMBER, 2024**

**(a)** Government of India in collaboration with States /Union Territories (UTs) has already rolled out comprehensive antenatal care (ANC) check-ups across India including Churu district in Rajasthan. This includes four regular ANC visits along with one quality checkup by specialist Doctor under Pradhan Mantri Surakshit Matritva Abhiyan (PMSMA), and three additional follow-up visits for high-risk pregnancies under the Extended PMSMA.

**(b)** The Government of India (GoI) captures data on quality services of ANC, including NITI Aayog Health Index indicators, measuring the quality/content of ANC services across all the States/UTs including Rajasthan.

**(c) As per information received from the State of Rajasthan;**

In order to reduce the Maternal Mortality Ratio (MMR) and Infant Mortality Rate (IMR) and address disparities, pregnant women in the State of Rajasthan, including Churu district are systematically tracked by name through the Government of India Pradhan Mantri Surakshit Matritva Abhiyan (PMSMA) portal and the State specific Pregnancy, Child Tracking and health services (PCTS) portal/ Reproductive and Child Health Portal. Priority is given to registering pregnancies during the first trimester, with a focus on delivering high-quality ANC services in healthcare facilities. Beneficiaries are regularly sent SMS reminders to access healthcare services at the nearest public healthcare facilities as per their due dates. Additionally, area –specific health workers are informed every 15 days via SMS to ensure the timely delivery of services.

**(d)** Under the National Health Mission, several initiatives have been undertaken, including Janani Shishu Suraksha Karyakram (JSSK), Janani Suraksha Yojana (JSY), and the Pradhan Mantri Surakshit Matritva Abhiyan (PMSMA), to address service delivery gaps and reduce regional disparities in Rajasthan.

- **Janani Suraksha Yojana (JSY)** promotes institutional delivery among pregnant women especially with weak socio-economic status i.e. women from Scheduled Castes, Scheduled Tribes and BPL households. All Pregnant Women are incentivized after delivery through Direct Benefit Transfer (DBT) in case of institutional delivery.

- **Janani Shishu Suraksha Karyakram (JSSK)** entitles all pregnant women delivering in public health institutions to have absolutely free and no expense delivery, including caesarean section. The entitlements include free drugs, consumables, free diet during stay, free diagnostics and free blood transfusion, if required, and free transport from home to institution and vice versa, starting from prenatal period up to post-natal period (up to 42 days after delivery). Similar entitlements are also provided for sick infants up to 1 year of age.
- **Pradhan Mantri Surakshit Matritva Abhiyan (PMSMA)** provides pregnant women a fixed day, free of cost assured and quality antenatal check up by a Specialist/Medical Officer on the 9th day of every month. Obstetricians and Gynaecologists / Radiologists/ Doctors working in the private sector are encouraged to provide voluntary services at designated public healthcare facilities.

**Extended PMSMA strategy** was launched to ensure quality ANC to pregnant women, especially to high-risk pregnancy (HRP) women and individual HRP tracking until a safe delivery is achieved by means of financial incentivization for the identified high-risk pregnant women and accompanying ASHA for extra three visits over and above the PMSMA visit.

- **Monthly Village Health, Sanitation and Nutrition Day** is an outreach activity at Anganwadi centers for provision of maternal and child care including nutrition in convergence with the ICDS.
- **Outreach camps** are provisioned for improving the reach of health care services especially in tribal and hard to reach areas. This platform is used to increase the awareness for the Maternal and Child health services, community mobilization as well as to track high risk pregnancies.
- **Ayushman Arogya Mandir** teams organize camps on a periodic basis, to reach the marginalized, support treatment compliance and follow-up pregnant women and newborn etc.
- **Reproductive and child health (RCH) portal** is a name-based web-enabled tracking system for pregnant women and newborn so as to ensure seamless provision of regular and complete services to them including antenatal care, institutional delivery and post-natal care.
- **Maternal and Child Protection (MCP) Card and Safe Motherhood Booklet** are distributed to the pregnant women for educating them on diet, rest, importance of antenatal care and postnatal care visits, danger signs of pregnancy, benefit schemes and institutional deliveries.

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