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

LOK SABHA UNSTARRED QUESTION NO. 910 TO BE ANSWERED ON 29/11/2024

PRADHAN MANTRI SURAKSHIT MATRITVA ABHIYAN

910. SHRI CHUDASAMA RAJESHBHAI NARANBHAI:

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

- (a) the total number of maternal deaths, stillbirths and newborn deaths during the last five years, State/UT- wise;
- (b)whether the Government is organizing awareness camps and regularpregnancy related healthcamps in rural areas across the country as almost 16 percent of Indian womenare not receiving any form of healthcare during their pregnancy; if so, the details thereof;
- (c) if so, the details of the budgetary expenditure under the Pradhan Mantri Surakshit Matritva Abhiyan (PMSMA) for the last five years; and
- (d) the total number of beneficiarie sunder the PMSMA during the last five years, State/year-wise?

ANSWER THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SMT. ANUPRIYA PATEL)

(a) As per the report of Sample Registration System (SRS) released by Registrar General of India (RGI) in 2018-20, Maternal Mortality Ratio (MMR) of India is 97 per 100,000 live births. India has accomplished the National Health Policy (NHP) target for MMR of less than 100/lakh live birth. The details of State/UT wise MMR during the last five years is placed at Annexure-I.

As per Sample Registration System of Registrar General of India (RGI) 2020, the Still Birth Rate (SBR) of India is 3 per 1000 total births and Neonatal Mortality Rate (NMR) of India is 20 per 1000 live births. States/ UTs wise SBR and NMRduring last five years is placed at Annexure II and Annexure III respectively.

- (b) Government of India has implemented following schemes/steps for creating awareness and regular health check-up camps for pregnantwomen across the country including rural areas;
- 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. Obstetrician and Gynaecologist / Radiologist/
 Doctor 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.

- Surakshit Matritva Aashwasan (SUMAN) aims to provide assured, dignified, respectful and quality healthcare at no cost and zero tolerance for denial of services for every woman and newborn visiting the public health facility.
- 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.
- Monthly Village Health, Sanitation and Nutrition Day (VHSND) 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 Mandirteams organize camps on a periodic basis, to reach the marginalized, support treatment compliance and follow-up pregnant women and newborn etc.
- 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.
- IEC/BCC campaigns: One of the key focus areas of Maternal Health is to generatedemand through Information Education and Communication (IEC), InterpersonalCommunication (IPC) and Behaviour Change Communication (BCC) activities.

- (c)The budgetary expenditure under Pradhan Mantri Surakshit Matritva Abhiyan (PMSMA) during the last five years is placed at Annexure-IV
- (d)Since inception, more than 5.59 crore pregnant women have received Comprehensive ANC under PMSMA programme across all states and UTs. The number of beneficiaries, state/UT-wise and year-wise, under PMSMA during the last five yearsis placed at Annexure-V.

Annexure referred in reply to part (a) of Lok Sabha Unstarred Question No. 910 to be answered on 29.11.2024

Annexure - I

Maternal Mortality Ratio (MMR): India & States								
Name of State	2014-16	2015-17	2016-18	2017-19	2018-20			
INDIA	130	122	113	103	97			
Assam	237	229	215	205	195			
Bihar	165	165	149	130	118			
Jharkhand	NA	76	71	61	56			
Madhya Pradesh	173	188	173	163	173			
Chhattisgarh	NA	141	159	160	137			
Odisha	180	168	150	136	119			
Rajasthan	199	186	164	141	113			
Uttar Pradesh	201	216	197	167	167			
Uttarakhand	NA	89	99	101	103			
Andhra Pradesh	74	74	65	58	45			
Telangana	81	76	63	56	43			
Karnataka	108	97	92	83	69			
Kerala	46	42	43	30	19			
Tamil Nadu	66	63	60	58	54			
Gujarat	91	87	75	70	57			
Haryana	101	98	91	96	110			
Maharashtra	61	55	46	38	33			
Punjab	122	122	129	114	105			
West Bengal	101	94	98	109	103			

(Source: RGI: Special Bulletin on MMR)

Annexure referred in reply to part (a) of Lok Sabha Unstarred Question No. 910 to be answered on 29.11.2024

Annexure-II

Status of Still Birth Rate (SBR) in India and Bigger States/ UTs								
	2016	2017	2018	2019	2020			
India	4	5	4	3	3			
Andhra Pradesh	3	3	3	1	1			
Assam	2	2	2	2	3			
Bihar	3	2	2	1	1			
Chhattisgarh	10	13	9	9	6			
Delhi	4	5	5	1	0			
Gujarat	6	5	4	3	4			
Haryana	5	9	6	5	7			
Himachal Pradesh	24	12	7	5	4			
Jammu & Kashmir	2	1	1	1	3			
Jharkhand	0	1	1	1	2			
Karnataka	6	6	5	5	3			
Kerala	6	7	5	3	4			
Madhya Pradesh	8	6	5	6	5			
Maharashtra	4	5	5	3	3			
Odisha	13	12	10	8	10			
Punjab	6	5	5	3	3			
Rajasthan	3	8	6	3	4			
Tamil Nadu	3	3	4	4	2			
Telangana	1	1	2	0	2			
Uttar Pradesh	3	3	3	2	4			
Uttarakhand	9	11	8	3	6			
West Bengal	3	5	5	5	4			

Source: Sample Registration System (SRS) Report of Registrar General of

India (RGI)
Unit: Per 1000 births

Annexure referred in reply to part (a) of Lok Sabha Unstarred Question No. 910 to be answered on 29.11.2024

Annexure-III

Status of Neonatal Mortality Rate (NMR) in India and Bigger States/ UTs								
	2016	2017	2018	2019	2020			
India	24	23	23	22	20			
Andhra Pradesh	23	23	21	18	17			
Assam	23	22	21	20	19			
Bihar	27	28	25	23	21			
Chhattisgarh	26	26	29	28	26			
Delhi	12	14	10	8	9			
Gujarat	21	21	19	17	16			
Haryana	22	21	22	19	19			
Himachal Pradesh	16	14	13	13	13			
Jammu & Kashmir	18	17	17	15	12			
Jharkhand	21	20	21	19	17			
Karnataka	18	18	16	16	14			
Kerala	6	5	5	5	4			
Madhya Pradesh	32	33	35	33	31			
Maharashtra	13	13	13	13	11			
Odisha	32	32	31	30	28			
Punjab	13	13	13	12	12			
Rajasthan	28	27	26	25	23			
Tamil Nadu	12	11	10	10	9			
Telangana	21	20	19	17	15			
Uttar Pradesh	30	30	32	30	28			
Uttarakhand	30	24	22	19	17			
West Bengal	17	17	16	15	14			

Source: Sample Registration System (SRS) Report of Registrar General of India (RGI)

Unit: Per 1000 live births

Annexure referred in reply to part (c) of Lok Sabha Unstarred Question No. 910 to be answered on 29.11.2024

Annexure IV

State/UT wise SPIP Expenditure towards Pradhan Mantri Surakshit Matritva Abhiyan (PMSMA) Activities under RCH Flexible Pool under NHM from F.Y. 2019-20 to 2023-24

(Rs. In Lakh)

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S.N.	State/UT	2019-20	2020-21	2021-22	2022-23	2023-24
1	Andaman and Nicobar Islands	0.19	0.11	0.38	1.13	1.02
2	Andhra Pradesh	_	-	-	-	26
3	Arunachal Pradesh	2.63	11.78	10.7	99.23	-
4	Assam	31.34	28.89	32.4	51.34	91.43
5	Bihar	533.31	263.06	419	597.09	570.85
6	Chandigarh	2.04	1.55	1.65	0.82	3.68
7	Chhattisgarh	-	1.63	1.51	395.4	439.36
	Dadra & Nagar Haveli	0.55				
8	Daman & Diu	-	0.3		-	-
9	Delhi	3.96	1.02	0.41	4.78	9.95
10	Goa	0.08	0.09	0.1	0.61	0.1
11	Gujarat	39.32	39.45	28.04	445.52	1,497.15
12	Haryana	28.53	24.49	30.44	23.03	62.71
13	Himachal Pradesh	-	-	23.46	32.62	36.1
14	Jammu and Kashmir	2.15	1.69	0.83	1.94	1.07
15	Jharkhand	96.23	93.85	85.1	559.31	1,941.47
16	Karnataka	28.16	14.61	18.08	11.82	200.19
17	Kerala	8.6	2.43	0.95	19.54	40.67
18	Ladakh	-	1.46	0.92	1.3	2.04
19	Lakshadweep	0.01	0.18	0.22	0.05	0.06
20	Madhya Pradesh	6.16	0.61	23.12	551.12	438.78

S.N.	State/UT	2019-20	2020-21	2021-22	2022-23	2023-24
21	Maharashtra	21.85	11.65	11.24	7.35	184.42
22	Manipur	20.12	10.42	5.29	14.8	10.92
23	Meghalaya	8.9	5.7	3.56	38.94	15.27
24	Mizoram	2.61	7.05	4.6	5.95	6.25
25	Nagaland	-	-	1.12	5.92	4.52
26	Odisha	12.6	14.58	12.95	202.96	576.25
27	Puducherry	-	-	-	-	0.14
28	Punjab	16.46	3.86	1.82	38.43	999.4
29	Rajasthan	22.5	21.3	54.25	75.47	139.24
30	Sikkim	1.12	-	0.48	1.62	1.48
31	Tamil Nadu	1.23	1.13	0.68	-	-
32	Telangana	1.89	1.79	1.03	2.52	2.07
33	Tripura	2.21	2.97	11.8	29.17	45.77
34	Uttar Pradesh	31.44	44.66	34.21	721.25	708.97
35	Uttarakhand	-	2.79	3.2	39.4	32.03
36	West Bengal	46.46	20.29	112.21	220.66	222.69

Note:

- 1. The above data is as per available Financial Management Reports submitted by the States/UTs.
- 2. Expenditure includes expenditure against Central Release, State release & unspent balances at the beginning of the year. Expenditure is as per FMRs submitted by States/UTs and is provisional.
- 3. After the Reorganisation of the State of Jammu and Kashmir (J&K) into the Union Territory of J&K and Union Territory of Ladakh, NHM funds to the UT of Ladakh were disbursed for the first time during 2020-21.

Annexure referred in reply to part (d) of Lok Sabha Unstarred Question No. 910 to be answered on 29.11.2024

Annexure-V
Total Number of pregnant women received Antenatal care under PMSMA

S. N.	State	2019-20	2020-21	2021-22	2022-23	2023-24
	India	5471828	3203202	4748613	7357992	9352058
1	Andaman and Nicobar Islands	4574	3594	3190	3257	3631
2	Andhra Pradesh	467299	272895	461251	905747	838348
3	Arunachal Pradesh	4648	3466	4940	3462	3655
4	Assam	61162	20244	33620	60289	59866
5	Bihar	746382	493947	537892	809779	855352
6	Chandigarh	8252	6237	6560	7953	8419
7	Chhattisgarh	188707	36165	83269	268221	313777
8	Dadra And Nagar Haveli and Daman & Diu	0	0	8691	27515	22859
9	Delhi	86644	31251	44875	52098	64346
10	Goa	8696	5255	2975	6170	18872
11	Gujarat	200674	165918	229520	257732	282449
12	Haryana	256619	172068	238182	337817	383612
13	Himachal pradesh	38024	30664	45152	56224	57239
14	Jammu and kashmir	33563	9314	28153	55768	65282
15	Jharkhand	174815	101079	98188	149758	181550
16	Karnataka	204286	67232	42093	224946	539450
17	Kerala	8152	2766	2907	3364	3572
18	Ladakh	1420	828	1001	2820	2597
19	Lakshadweep	1346	883	893	827	962
20	Madhya pradesh	555042	1374	530716	200906	352412
21	Maharashtra	302291	73361	74357	292033	280538
22	Manipur	12416	2305	4104	9859	9282
23	Meghalaya	6202	1648	3620	58902	63561

S. N.	State	2019-20	2020-21	2021-22	2022-23	2023-24
24	Mizoram	3802	8954	6768	7161	8034
25	Nagaland	3762	1961	2285	2859	2032
26	Odisha	191793	78074	141197	270561	376993
27	Puducherry	0	0	0	99	2849
28	Punjab	109031	53504	69523	115905	178813
29	Rajasthan	239423	150797	153439	522258	528944
30	Sikkim	419	890	950	1290	953
31	Tamil Nadu	355815	307627	346309	329832	330575
32	Telangana	223943	215277	247737	296112	259543
33	Tripura	2787	2057	19519	22161	28301
34	Uttar Pradesh	875170	837508	1135849	1680849	2833784
35	Uttarakhand	10922	11645	23702	28339	24267
36	West Bengal	83747	32414	115186	285119	365339