

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

**LOK SABHA  
UNSTARRED QUESTION NO. 3404  
TO BE ANSWERED ON 8<sup>TH</sup> AUGUST, 2025**

**STATUS OF MATERNAL/INFANT MORTALITY IN RAJASTHAN**

**†3404 SHRI HARISH CHANDRA MEENA:**

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

- (a) the current status of maternal mortality, infant mortality and vaccination in Tonk-Sawai Madhopur of Rajasthan till June, 2025;
- (b) the details of the schemes implemented in this regard and the outcome thereof;
- (c) whether any pilot scheme like Sickie Cell Mission has been implemented and if so, the details thereof;
- (d) the steps taken by the Government to improve institutional delivery and nutrition; and
- (e) whether any partnership has been entered into with local NGO/community worker and if so, the details thereof?

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

(a): The Sample Registration System (SRS) released by the Registrar General of India (RGI) provides Maternal Mortality Ratio (MMR) and Infant Mortality Rate (IMR) at the National and State level. As per the SRS Special Bulletin on Maternal Mortality 2020-22, the MMR of Rajasthan is 87 per lakh live births. As per SRS 2022, IMR of Rajasthan is 30 per 1000 live births. The current status of vaccination in Tonk and Sawai Madhopur districts of Rajasthan is placed at Annexure.

(b): The Government of India has undertaken various initiatives under National Health Mission (NHM) to reduce the maternal and infant mortality and to improve the vaccination status of children across the country, key amongst which are as follows:

- **Janani Suraksha Yojana (JSY)** is a demand promotion and conditional cash transfer scheme for promoting institutional delivery.

- **Janani Shishu Suraksha Karyakram (JSSK)** entitles all pregnant women delivering in public health institutions to have free and no-expense delivery, including caesarean section. The entitlements include free drugs and consumables, free diet during the stay, free diagnostics, free transportation and free blood transfusion, if required. Similar entitlements are also in place for sick infants.
- **Pradhan Mantri Surakshit Matritva Abhiyan (PMSMA)** provides pregnant women a fixed day, free of cost, assured and quality antenatal checkup by a Specialist/Medical Officer on the 9th day of every month.  
**Extended PMSMA strategy** focuses on quality antenatal care (ANC) for pregnant women, especially high-risk pregnant (HRP) women and individual HRP tracking with financial incentivization for the identified high-risk pregnant women and accompanying Accredited Social Health Activists (ASHAs) for extra 3 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 a public health facility, to end all preventable maternal and newborn deaths.
- **Optimizing Postnatal Care** aims to strengthen the quality of post-natal care by laying emphasis on detection of danger signs in mothers and incentivization of ASHAs for prompt detection, referral & treatment of such high-risk postpartum mothers.
- The establishment of Special Newborn Care Units (SNCUs) and Newborn Stabilization Units (NBSUs) under **Facility Based Newborn Care (FBNC)** program to provide specialized care to sick and small newborns at district and sub-district levels, addressing neonatal health complications.
- ASHAs conduct scheduled home visits under **Home-Based Newborn Care (HBNC)** and **Home-Based Care of Young Children (HBYC)**, improving child-rearing practices and identifying sick newborns and young children for timely referral and care.
- The **Social Awareness and Actions to Neutralize Pneumonia Successfully (SAANS)** initiative targets pneumonia-related childhood morbidity and mortality through enhanced awareness and early intervention.
- **STOP Diarrhoea** campaign is implemented for promoting use of ORS and Zinc and for reducing morbidity and mortality due to childhood diarrhoea.
- Children from 0 to 18 years of age are screened for 32 health conditions (i.e. Diseases, Deficiencies, Defects and Developmental delay) under **Rashtriya Bal Swasthya Karyakram (RBSK)** to improve child survival. **District Early Intervention Centres (DEICs)** at district health facility level are established for confirmation and management of children screened under RBSK.
- **UWIN** the digital platform for name-based digital recording, tracking and monitoring of all the eligible beneficiaries across the country, has been rolled out across the country to improve immunization coverage.
- **Mission Indradhanush** is special catch-up vaccination campaign under the Universal Immunization Programme conducted in areas of low immunization coverage to

vaccinate left out and dropped out children and pregnant women including remote and underserved areas.

- **Special vaccination campaigns** such as National Immunization Days (NIDs), as part of the Pulse Polio programme are carried out every year.
- Strategic interventions like advocacy, social mobilization, community engagement, interpersonal communication at family level and media engagement are undertaken to improve immunization coverage.
- The State Task Force on Immunization (STFI) and the District Task Force on Immunization (DTFI) enable effective implementation of the program.

(c): Under National Health Mission (NHM), the Ministry of Health and Family Welfare is implementing **National Sickle Cell Anaemia Elimination Mission** (NSCAEM) to provide affordable, accessible and quality care to all patients of Sickle Cell Disease (SCD). The objective of the mission is to reduce the prevalence of SCD through awareness creation, targeted screening of 7 crore people in the age group of 0-40 years till 2025-26 in affected districts of tribal areas and counselling through collaborative efforts. As on 28<sup>th</sup> July 2025, a total of 6,04,50,683 population in the 17 identified tribal dominated states including Rajasthan, have been screened and 2,62,67,997 genetic counselling ID cards have been distributed including 16,97,638 cards in Rajasthan.

The patients living with SCD are provided with services to improve the quality of life including frequent follow-ups, counselling on lifestyle management, pre-marriage and pre-natal decisions, nutrition support through folic acid distribution, conducting yoga and wellness sessions and management of crisis symptoms and referrals to higher-level facilities through Ayushman Arogya Mandir (AAM).

(d): The Government of India has taken various steps under NHM to improve the institutional delivery and nutritional status of women and children, key amongst which are as follows:

- **Janani Suraksha Yojana (JSY)** is a demand promotion and conditional cash transfer scheme for promoting institutional delivery.
- **Janani Shishu Suraksha Karyakram (JSSK)** entitles all pregnant women delivering in public health institutions to have free and no-expense delivery, including caesarean section. The entitlements include free drugs and consumables, free diet during the stay, free diagnostics, free transportation and free blood transfusion, if required. Similar entitlements are also in place for sick infants.
- **Pradhan Mantri Surakshit Matritva Abhiyan (PMSMA)** provides pregnant women a fixed day, free of cost, assured and quality antenatal checkup by a Specialist/Medical Officer on the 9th day of every month.

**Extended PMSMA strategy** focuses on quality antenatal care (ANC) for pregnant women, especially high-risk pregnant (HRP) women and individual HRP tracking with financial incentivization for the identified high-risk pregnant women and accompanying Accredited Social Health Activists (ASHAs) for extra 3 visits over and above the PMSMA visit.

- **LaQshya – Quality Improvement Initiative** improves 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.
- **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 a public health facility, to end all preventable maternal and newborn deaths.
- **Anemia Mukh Bharat (AMB)** Programme is implemented to reduce anemia among six beneficiaries age group - children (6-59 months), children (5-9 years), adolescents (10-19 years), pregnant and lactating women and in women of reproductive age group (15-49 years) in life cycle approach through implementation of six interventions via robust institutional mechanism.
- **Nutrition Rehabilitation Centres (NRCs)** are set up at public health facilities to provide in-patient medical and nutritional care to children under 5 years suffering from Severe Acute Malnourishment (SAM) with medical complications.
- **Mothers' Absolute Affection (MAA)** Programme is implemented to improve breastfeeding coverage in children which includes early initiation of breastfeeding and exclusive breastfeeding for first six months followed by counselling on age-appropriate complementary feeding practices.
- **Comprehensive Lactation Management Centres (CLMC)** are established to ensure availability of safe, pasteurized Donor Human Milk for feeding of sick, preterm and low birth weight babies admitted in Neonatal Intensive Care Units and Special Newborn Care Units.
- **Village Health Sanitation and Nutrition Days (VHSNDs)** are observed for provision of maternal and child health services and creating awareness on maternal and child care including nutrition in convergence with Ministry of Women and Child Development.

(e): As per the information received from the State of Rajasthan, there is no partnership with the local NGO/community worker.

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**Annexure referred to in reply to part (a) of Lok Sabha Unstarred Question No 3404 to be answered on 08.08.2025**

**Annexure**

<b>Current status of vaccination in Tonk and Sawai Madhopur districts of Rajasthan</b>		
<b>District</b>	<b>Total no. of children vaccinated</b>	<b>Achievement (%)</b>
Tonk	6811	94.2
Sawai Madhopur	7262	86.1
Source: HMIS (April 2025 to June 2025)		