

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

**LOK SABHA
UNSTARRED QUESTION NO. 2257
TO BE ANSWERED ON 29TH JULY, 2016**

PREGNANCY/DELIVERY DEATHS

2257. SHRI PANKAJ CHAUDHARY:

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

- (a) whether Government is aware of the increasing number of pregnancy/delivery deaths across the country;
- (b) if so, the details thereof;
- (c) whether the Primary Health Centres (PHCs) functioning in States and UTs are short of facilities/equipments for performing safer deliveries, if so, the details thereof; and
- (d) the steps taken by the Government in this regard to bring down delivery deaths?

**ANSWER
THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND
FAMILY WELFARE
(SHRI FAGGAN SINGH KULASTE)**

- (a): As per the latest report of the Registrar General of India, Sample Registration System (RGI-SRS), Maternal Mortality Ratio (MMR) of India has shown a decline from 212 per 100,000 live births in the period 2007-09 to 167 per 100,000 live births in the period 2011-13. India's rate of decline of MMR between 2007-09 and 2011-13 is 5.7%. If the MMR declines at the same pace, India will achieve the Millennium Development Goal(MDG) target of an MMR of 139 per 100,000 live births.
- (b): Does not arise in view of the above.
- (c): Under National Health Mission(NHM), funds are allocated for strengthening of Primary Health Centers(PHCs) with priority being given to Delivery points in terms of infrastructure and requisite equipment's for conducting safe deliveries as per gap analysis and specific proposals given by the respective States/UTs in their Annual Project Implementation Plans.
- (d): Under the National Health Mission, the key steps taken by Government of India to address the issue of maternal deaths and to accelerate the pace of reduction of MMR across all states including SC/ST are as below:
 - Promotion of institutional deliveries through Janani Suraksha Yojana (JSY) wherein JSY incentive is being given to all BPL/SC/ST pregnant women delivering in Government health facilities/accredited private institutions in both High performing State(HPS) and Low Performing State(LPS) regardless of age of mother and number of children.

- Janani Shishu Suraksha Karyakaram (JSSK) entitles all pregnant women delivering in public health institutions to absolutely free and no expense delivery, including caesarean section. Similar entitlements have been put in place for all sick infants accessing public health institutions for treatment.
- Operationalization of Sub-Centers, Primary Health Centers, Community Health Centers and District Hospitals for providing 24x7 basic and comprehensive obstetric care.
- Capacity building of health care providers in basic and comprehensive obstetric care with a strategic initiative “Dakshata” to enable service providers in providing high quality services during childbirth at the institutions.
- Mother and Child Protection Card in collaboration with the Ministry of Women and Child Development to monitor service delivery for mothers and children.
- Mother and Child Tracking System is being implemented to ensure antenatal, intranatal and postnatal care along-with immunization services.
- Engagement of more than 9.15 lakh Accredited Social Health Activists (ASHAs) to generate demand and facilitate accessing of health care services by the community.
- Village Health and Nutrition Days in rural areas as an outreach activity, for provision of maternal and child health services.
- Identifying the severely anaemic cases of pregnant women at sub centres and PHCs for their timely management.
- Operationalization of Safe Abortion Services and Reproductive Tract Infections and Sexually Transmitted Infections (RTI/STI) at health facilities with a focus on “Delivery Points”.
- Maternal Death Review (MDR) is being implemented across the country both at facilities and in the community. The purpose is to take corrective action at appropriate levels and improve the quality of obstetric care.
- Establishing Maternal and Child Health (MCH) Wings at high caseload facilities to improve the quality of care provided to mothers and children.
- Under National Iron Plus Initiative (NIPI), through life cycle approach, age and dose specific IFA supplementation programme is being implemented.
- To tackle the problem of anaemia due to malaria particularly in pregnant women and children, Long Lasting Insecticide Nets (LLINs) and Insecticide Treated Bed Nets (ITBNs) are being distributed in endemic areas.

- Setting up of Skill Labs with earmarked skill stations for different training programs to enhance the quality of training in the states.
- A new initiative of “Prevention of Post-Partum Hemorrhage (PPH) through Community based advance distribution of Misoprostol” by ASHAs/ANMs for high home delivery districts has been implemented.
- Newer interventions to reduce maternal mortality and morbidity- Diagnosis & management of Gestational Diabetes Mellitus, Hypothyroidism during pregnancy, Training of General Surgeons for performing Caesarean Section, Calcium supplementation during pregnancy and lactation, De-worming during pregnancy, Maternal Near Miss Review, Screening for Syphilis during pregnancy and Dakshata guidelines for strengthening intra-partum care.
- The Pradhan Mantri Surakshit Matritva Abhiyan (PMSMA) has been introduced with the aim of conducting special ANC checkups for pregnant women (in their 2nd / 3rd Trimesters of pregnancy) in the country on 9th of every month by Medical Officer/OBGY specialist in the government health facilities and also through Private sector on voluntary basis.
