

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

**LOK SABHA  
UNSTARRED QUESTION NO. 3391  
TO BE ANSWERED ON 7<sup>TH</sup> AUGUST 2026**

**MEASURES TO REDUCE C-SECTION DELIVERY RATES**

**†3391. SHRI BHAUSAHEB RAJARAM WAKCHAURE:**

Will the **MINISTER OF HEALTH AND FAMILY WELFARE** be pleased to state:

- (a) whether the Government is aware of the scientific research and outcomes of 10,000 successful deliveries using the 'Evidence-based Upright Indian Birthing Positions' developed by Dr. Prabodh Joshi from the Shirdi Parliamentary Constituency in Ahilyanagar District of Maharashtra, if so, the details thereof;
- (b) whether this research has proven effective in reducing cesarean (C-section) delivery rates and improving maternal and child health outcomes, if so, the details thereof;
- (c) whether the Government plans to replicate and implement this model across Primary Health Centres (PHCs) in rural areas of the country;
- (d) whether financial assistance is likely to be provided for training and the publication of literature to disseminate this research and if so, the details thereof; and
- (e) whether the Government proposes to integrate this methodology into the national policy for 'Safe Motherhood' Surakshit Matritva and if so, the details thereof?

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

(a) to (e) As per the information received from the state of Maharashtra, the District Health administration, Ahilyanagar has not received any official information regarding the development of evidence-based upright Indian birthing positions by a practicing doctor in Shirdi parliamentary constituency. The District Health administration has not conducted or received any evaluation report assessing the reduction in c-section delivery rates or improvement in maternal and neonatal health outcomes.

However, the Government of India has already circulated the "Guidelines on Operationalization of Midwifery Units" to all States/UTs, for the establishment of Midwifery-Led Care Units (MLCUs). These units promote physiological childbirth by offering women a choice of scientifically validated, evidence-based alternative birthing positions and are expected to contribute towards reducing unnecessary caesarean sections.

Further, under the National Health Mission (NHM), financial support is being provided to States/UTs for the establishment and operationalization of such Midwifery-Led Care Units, based on the proposals received by the respective State/UTs Programme Implementation Plans (PIPs).

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