GOVERNMENT OF INDIA HEALTH AND FAMILY WELFARE LOK SABHA

UNSTARRED QUESTION NO:2719 ANSWERED ON:06.12.2000 NATIONAL TECHNICAL COMMITTEE ON NEONATAL CASE A.K. PREMAJAM;RAGHURAJ SINGH SHAKYA;V. SAROJA

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

(a) whether the Union Government proposed to set up a National Technical Committee on neo-natal case;

(b) if so, the details thereof;

(c) whether the Government are aware of the alarming fall in the sex ratio;

(d) if so, the details of sex ratio during the last three years, State-wise;

(e) whether the pre-natal diagnosis technique (Regulation and prevention of Misuse Act) banning female foeticide is being implemented in all the States; and

(f) if not, the names of the States where this is not being implemented?

Answer

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI A. RAJA)

(a) Yes, Sir.

(b) A copy of the Order constituting the National Technical Committee on Child Health is given at Annexure-I.

(c) & (d) The State-wise sex ratio during 1991 Censuses as compared 1981 Census is given in Statement at Annexure - II.

(e) & (f) The Pre-Natal Diagnostic Techniques (Regulation and Prevention of Misuse) Act, 1994 came into force, since 1st January, 1996, in all States except Jammu and Kashmir, where the Act does not apply.

ANNEXURE - I

No. 1.13020/29/2000-CH Government of India Ministry of Health & Family Welfare

(Department of Family Welfare)

Nirman Bhavan, New Delhi. Dated the 11th June, 2000

ORDER

Subject:- National Population Policy - Constitution of National Technical Committee on Child Health.

In pursuance of the mandate of the National Population Policy neonatal care will be priority area for reduction of Infant Mortality Rate and Child Mortality Rate the Government of India has decided to set up a `National Technical Committee on Child Health` for achieving the goals of Infant Mortality Rate and Child Mortality Rate and also other Interventions of Child Health viz. Immunization, diarrhoea control, control of Acute Respiratory Infection and Nutrition.

Secretary (FW) - Chairman DG (ICMR) Joint Secretary (RCH), Department of Family Welfare Joint Secretary (Deptt. of Women & Child Development) Advisor (Health), Planning Commission Deputy Commissioner, Child Health, Department of Family Welfare Deputy Commissioner, Maternal Health, Department of Family Welfare Director, National Institute of Cholera and Enteric Diseases, Calcutta Director, National Institute of Public Cooperation and Child Development Programme Officers from UP, MP, Orissa, Rajasthan

b. PROFESSIONAL BODIES

President, Indian Academy of Paediatrics President, National Neonatology Forum President, Federation Obstetric & Gynological Society of India President, Indian Association of Public Health President, Nursing Council of India President, Medical Council of India President, Indian Medical Association

In case the Presidents are not able to come, their representative may attend the meeting.

c. EXPERTS

Dr. S.K. Bhargava, Consultant Neonatologist and Ex-Head of the Department (Pediatrics), Safdarjung Hospital, New Delhi. Dr. M.K. Bhan, Professor of Pediatrics and Head of Division of Pediatric Gastroentrology, AIIMS, New Delhi. Dr. A. Fernandis, ean, Lokmanya Tilak Municipal General Hospital, Mumbai Dr. (Mrs) Sheila Bhambal, Head of the Department (Pediatrics), Medical College, Bhopal Dr. Vinod Pal, WHO Collaborative Centre on Neonatology, All India Institute of Medical Sciences, New Delhi. Dr. Deoki Nandan, Professor of PSM, Medical College, Agra NON-GOVERNMENT ORGANISATIONS d

Dr. Shanti Ghosh, Consultant, MCH, Delhi

President, Child in Need Initiative, Calcutta President, Breastfeeding Promotion Network of India, Delhi President, Mamta, Delhi Dr. Ajay Bang, SEARCH, Gadchiroli (Maharashtra) The Terms of Reference for the Committee are:-

(i) Review the demographic indicators related to preinatal, infant and child mortality with a view to ascertaining regional differences if any and to define reasons for the prevailing high preinatal, neonatal and infant mortality on regional basis with a view to suggesting regions specific policy interventions.

(ii) Critically review exisiting intervention for child health and nutrition to ascertain their technical veracity and suggest measures for effecting implementation at the field level.

(iii) Critically review programme implementation in its various dimensions to suggest measures for improving effectiveness of existing interventions.

(iv) Suggest new/additional, cost-effective and implementable measures for accelerating the decline in infant and child mortality.

TA/DA of the non-official members will be met out of Government of India budgetary allocations according to entitlement/admissibility. TA/DA of all official members will be met out of the source from which salary is drawn.

Sd/-

(I.M. SONDHI) UNDER SECRETARY TO GOVT. OF INDIA Copy to:

1. All Members of the National Technical Committee on Child Health $% \mathcal{C}_{\mathrm{A}}$

2. All State Family Welfare Secretaries

3. Director, All India Institute of Medical Sciences

4. Director (P)

PPS to Secretary (FW) PS to DGHS PS to JS(RCH) PS to JS(P)

ANNEXURE-II

DISTRIBUTION OF POPULATION, SEX RATIO, CENSUS 1991

S	India/Stat	e/Union	n Sex ratio			
No	No Territory					
1981 1991						
1		2		3	4	
I	NDIA	934	927			
1	ANDHRA PRA	ADESH		975	972	
2	ARUNACHAL	PRADESH		862	859	
3	ASSAM			910	923	
4	BIHAR			946	911	

5	GOA	975	967
6	GUJARAT	942	934
7	HARYANA	870	865
8	HIMACHAL PRADESH	973	976
9	JAMMU & KASHMIR @	892	923
10	KARNATAKA	963	960
11	KERALA	1032	1036
12	MADHYA PRADESH	941	931
13	MAHARASHTRA	937	934
14	MANIPUR	971	958
15	Meghlaya	954	955
16	MIZORAM	919	921
17	NAGALAND	863	886
18	ORISSA	981	971
19 20 21 22 23 24 25 26 27 28 29 20	PUNJAB RAJASTHAN SIKKIM TAMIL NADU TRIPURA UTTAR PRADESH WEST BENGAL A & N ISLANDS CHANDIGARH D & N HAVELI DAMAN & DIU DELUI	879 919 835 977 946 885 911 760 769 974 1062	882 910 878 974 945 879 917 818 790 952 969
30	DELHI	808	827
31	LAKSHADWEEP	975	943
32	PONDICHERRY	985	979

SEX RATIO IS DEFINED AS NUMBER OF FEMALES PER 1.000 MALES

SOURCE: REGISTRAR GENERAL INDIA