GOVERNMENT OF INDIA HEALTH AND FAMILY WELFARE LOK SABHA

UNSTARRED QUESTION NO:6903 ANSWERED ON:07.05.2010 POPULATION CONTROL Rawat Shri Ashok Kumar

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

(a) whether the United Nations Population Fund have spent several million dollars in India for the population control;

(b) if so, the details thereof;

(c) whether the outcome regarding population control is not satisfactory despite spending so much of funds; and

(d) if so, the steps taken/proposed to be taken by the Government in this regard?

Answer

MINISTER OF THE STATE IN THE MINISTRY OF HEALTH & FAMILY WELFARE (SHRI DINESH TRIVEDI)

(a) & (b) Contribution of United Nations Population Fund during last four years to the Reproductive Child Health Program which is mainly financed by domestic budget of Government of India is as under:

(Rs. In Crores)

FY 2006-07 FY 2007-08 FY 2008-09 FY 2009-10 Total

31.32 31.78 0.00 39.01 102.11

(c) India is following the demographic transition pattern of the developing countries from the initial levels of "high birth rate-high death rate" to the intermediate transition stage of "high birth rate- low death rate" which manifests in high rates of population growth, before attaining "low birth rate- low death rate". Presently, more than 50% of the population is in the reproductive age of 15-49 years, which imparts momentum to the population growth.

(d) Government has adopted National Population Policy in February, 2000 which provides for holistic approach for achieving population stabilization in the country. The policy affirms the commitment of Government towards voluntary and informed choice and consent of citizens while availing of reproductive health care services. Some of the initiatives taken by the Ministry for stabilising population in the country are as under:

i. Fixed day-Fixed Place Family Planning Services round the year through growing number of 24 x 7 Primary Health Centres (PHCs) and better functioning Community Health Centre (CHCs) and other health facilities under National Rural Health Mission (NRHM).

ii. Promoting Intra-uterine Device (IUD-380A) intensively as a spacing method because of its longevity of 10 years and advantage over other IUDs.

iii. Promotion of acceptance of No Scalpel Vasectomy to ensure male participation has also been part of NRHM strategy on population stabilization.

iv. Increasing the basket of choice by systematically and carefully introducing new and effective contraceptives in the programme.

v. National Family Planning Insurance Scheme has been started since November, 2005 to compensate the sterilization acceptors for failures, complications and deaths and also to provide indemnity insurance cover to doctors.

vi. Compensation package for sterilisation was increased in September 2007, i.e., in vasectomy from Rs. 800/- to Rs. 1500/- and in Tubectomy from Rs. 800/- to 1000/- in public facilities and to uniform amount of Rs.1500/- in accredited private health facilities for all categories.

vii. The outreach activities through the institution of ASHAs and Monthly Village Health and Nutrition Days under NRHM also helps towards population stabilization.

viii. The Santushti strategy implemented through Janasankhya Sthirata Kosh (JSK) provides private sector gynaecologists and vasectomy surgeons an opportunity to conduct sterilisation operations in Public Private Partnership (PPP).

ix. The Prerana Strategy (Responsible Parenthood Practices) of JSK aims at promotion of delayed marriage (after the legal age) among girls, by rewarding and publically honouring the women who marry after the legal age and ensure proper spacing in the birth of their children.

x. A Call Centre operated by JSK on Reproductive, Family Planning and Child Health provides guidance/ authentic information on issues related to reproductive and child health.