

**GOVERNMENT OF INDIA  
HEALTH AND FAMILY WELFARE  
LOK SABHA**

UNSTARRED QUESTION NO:1825

ANSWERED ON:23.03.2012

**FEMALE FOETICIDE**

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

- (a) whether as per 2011 Census female sex ratio is on the decline in the country;
- (b) if so, the reasons therefor alongwith the ratio of male and female in the rural and urban areas during each of the last three years and the current year, State/UT-wise;
- (c) the number of cases of female foeticide reported from various States during the last three years and the current year, State/UT-wise;
- (d) the number of cases during the last three years where doctors have been convicted and the number of hospitals licenses cancelled by the Medical Council of India (MCI) under the Pre-conception and Pre-natal Diagnostic Techniques (Prohibition of Sex Selection) Act, 1994;
- (e) the details of monitoring mechanism to keep tight vigilance over the implementation of this Act; and
- (f) the corrective steps taken or proposed to be taken to make this Act more effective to prevent female foeticide?

**Answer**

MINISTER OF THE STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI SUDIP BANDYOPADHYAY)

(a) & (b) As per Census 2011(Prov) the sex ratio has increased from 933 in 2001 to 940 in 2011. However the child sex ratio (0-6 years) has declined from 927 in 2001 to 914 in 2011.

Reasons for neglect of girl child and low levels of sex ratio are son preference, low status of women, social and financial security associated with sons, socio-cultural practices including dowry and violence against women. Desire for a small family coupled with easy availability of sex determination tests may be a catalyst in the declining child sex ratio. The details of sex ratio in rural and urban areas, as per Census data is at Annexure I.

(c) As per the National Crime Record Bureau, 73, 123 and 111 cases of female foeticide have been reported during the years 2008, 2009 and 2010 respectively. State-wise details are at Annexure-II.

(d) As per Quarterly Progress reports (QPRs) received from the States, a total of 97 convictions have been secured against violators of the Act. Following conviction by courts, the licenses of 16 doctors have been cancelled by State Medical Councils.

(e) The steps taken to monitor effective implementation of the Act are as mentioned below:

# National Inspection and Monitoring Committee (NIMC) has been reconstituted and inspections of ultrasound diagnostic facilities have been intensified.

# A meeting of Health Secretaries 17 states with the most skewed child sex ratio was first convened on 20th April 2011, followed by several review meetings.

# Status of implementation of PC&PNDT Act was included in the TORs of the Joint Review Mission (JRM), Common Review Mission (CRM and Integrated Monitoring Visits for the current year so that teams can assess the situation on the ground.

# The Central Government is rendering financial support to the states to strengthen structures for the implementation of the Act under the National Rural Health Mission.

(f) The Pre-conception and Pre-natal Diagnostic Techniques (Prohibition of Sex Selection) Act,1994 as amended in 2003, prohibits sex selection before or after conception and regulates the misuse of medical diagnostic techniques for the purpose of sex determination.

The steps taken by Government of India for effective implementation of the PC & PNDT Act as per details mentioned below:

# Central Supervisory Board (CSB) under the PNDT Act has been reconstituted. The 17th and 18th meetings of CSB have been held at an interval of six months on 4th June, 2011 and 14th January 2012.

# Inspections by the National Inspection and Monitoring Committee have been scaled up. NIMC has been reconstituted and apart from inspections further empowered to oversee follow-up action by Appropriate Authorities against organizations found guilty of violations under the Act during inspections.

# Government of India has notified important amendments in rules under the Act, including:-

# Amendment to Rule 11 (2) of the PC & PNDT Rules, 1996 to provide for confiscation of unregistered machines and further punishment under the Act

# Amendment to regulate the use of portable ultrasound equipment and services offered by mobile genetic clinics.

# Operational guidelines for Grant in Aid to Non-Governmental Organizations have been revised to ensure targeted use of resources for awareness generation of the Act.

# States have been asked to take advantage of funding available under NRHM for strengthening infrastructure and augmentation of human resources required for effective implementation of the PC & PNDT Act.