

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

UNSTARRED QUESTION NO:262  
ANSWERED ON:23.11.2012  
VECTOR BORNE DISEASE CONTROL PROGRAMME  
Vijayan Shri A.K.S.

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

- (a) whether the Government has launched the National Vector-Borne Disease Control Programme (NVBDCP) with World Bank assistance;
- (b) if so, the details thereof along with the activities taken thereunder;
- (c) the number of malaria prone districts included in the programme, State/ UT-wise including Tamil Nadu;
- (d) the impact of the programme in these districts in various States; and
- (e) the funds allocated and spent under the programme during each of the last three years and the current year, State/UT-wise?

**Answer**

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (ABU HASEM KHAN CHOUDHURY)

(a) No. National Vector Borne Disease Control Programme (NVBDCP) is implemented throughout the country for prevention and control of Malaria, Dengue, Chikungunya, Japanese Encephalitis and elimination of Kalaazar & Lymphatic Filariasis.

The World Bank assisted project is being implemented to provide additional inputs to the identified high endemic districts for malaria in 9 States and kala-azar in 3 states for 5 years since 2009.

(b) The Govt. of India provides central assistance in the form of cash and kind to the States/UTs as per their technical requirement on approved programme norms. The assistance is released to the States/UTs is for prevention and control of VBDs. The activities supported are strengthening disease surveillance, case management, epidemic containment, monitoring & evaluation, capacity building, vector control & environmental management, IEC/BCC for community awareness and inter-sectoral convergence.

Under the World Bank supported project, the concerned States are being provided following additional inputs:

1. Rapid Diagnostic Test (RDT) Kits for detection of malaria and kala azar cases at community level.
2. ACT- Artemisinin based combination therapy to treat all Pf cases and artemisinin injection for treatment of severe malaria cases and Miltefosine for kala azar.
3. Long Lasting Insecticidal Nets (LLIN) for vector control.
4. Technical Human Resource at state, district and sub-district level, capacity building and IEC/BCC activities.
5. Support for operational research.

(c) All the areas in the country below 500 feet Mean Sea Level (MSL), are endemic for malaria, however, all the districts in the country are covered under programme including all districts of Tamil Nadu.

The number of malaria prone districts included under World Bank supported project are 124 in 9 states. The state wise details are as under:

State	Number
Andhra Pradesh	6
Chhattisgarh	16
Gujarat	12
Jharkhand	22
Karnataka	7
Madhya Pradesh	19
Maharashtra	5
Orissa	30
West Bengal	7

(d) Impact of the programme is evidenced by the fact that overall reported Malaria cases in the country have declined from 15.64 lakh cases in 2009 to 13.11 lakh cases in 2011. The state-wise malaria cases since 2009 till 2012 (upto 2.11.12) is enclosed at Annexure-I.

(e) The funds allocated and spent under the programme including World Bank support during each of the last three years and the current year, State/UT-wise is placed at Annexure-II.