GOVERNMENT OF INDIA HEALTH AND FAMILY WELFARE LOK SABHA

UNSTARRED QUESTION NO:1471 ANSWERED ON:15.07.2009 POPULATION CONTROL Thakur Shri Anurag Singh

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

- (a) the details of the targets fixed for population control and the results achieved as a result thereof, State-wise;
- (b) the details of the financial assistance provided to the States for this purpose during the last three years and the current year, Statewise and year-wise; and
- (c) the concrete steps taken or being taken by the Government to check population growth?

Answer

MINISTER OF THE STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI GHULAM NABI AZAD)

- (a):- No targets are fixed as the Family Welfare Programme in India is voluntary in nature, which enables a couple to adopt the family planning methods, best suited to them according to their choice, without any compulsion. Population stabilization is one of the objectives of National Rural Health Mission (NRHM).
- (b):- The details of the financial assistance provided during the last three years and the current year, State-wise and year-wise; is annexed.
- (c) The approach of government under NRHM is to provide quality health services in remote rural areas along with a wide range of contraceptive choices to meet the unmet demands for reproductive health services which includes delivery, safe abortions, treatment of reproductive tract infections and family Planning Services. The NRHM also includes the second phase of reproductive and Child Health Programme (RCH.II), which intends to improve the performance of family welfare by reducing total fertility rate, maternal and infant morbidity and mortality, and unwanted pregnancies. The following steps have been taken to encourage acceptance of Family Planning and to give protection to providers: -
- i) National Family Planning Insurance Scheme has been started since November, 2005 to compensate the sterilization acceptors for failures, complications and deaths and also provides indemnity insurance cover to doctors.
- ii) Increasing Compensation Package for Sterilization was introduced in October, 2006 and further revision in the compensation package to acceptors of sterilization with particular boost to male participation in family planning i.e. Vasectomy from existing Rs.800/- to Rs. 1500/- and tubectomy from Rs.800/- to Rs.1000/- in public facilities and to a uniform amount of Rs.1500/- in accredited private health facilities for all categories in all States for vasectomy.
- iii) Specific action points/strategies have been incorporated in the States Project Implementation Plans (PIPs) under NEHM from current year to address the up gradation of Family Planning Services.
- iv) Promoting Acceptance of No Scalpel Vasectomy to ensure male participation.
- v). Promoting ILJD 380A intensively as a spacing method because of its longevity of 10 years and advantages over other IUDS.
- vi) Fixed day Fixed Place Family Planning Services round the year-made possible on account of growing number of 24x7 PHCs and better functioning CHCs and other health facilities under NRHM.
- vii) Increasing the basket of choice by systematically and carefully introducing new and effective contraceptives in the programme. The outreach activities through the institution of ASHAs and Monthly Health and Nutrition Days under NRHM have also helped.