

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

UNSTARRED QUESTION NO:64

ANSWERED ON:22.02.2013

CONTROL OF MALARIA CASES

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

- (a) the number of cases of malaria reported during each of the last three years and the current year, State/UT-wise;
- (b) the steps taken/proposed by the Government to deal with the malaria cases along with the achievements made as a result thereof;
- (c) whether the funds earmarked and allocated to deal with the malaria cases is sufficient to control the disease;
- (d) if so, the details thereof indicating the funds allocated and spent therefor during the said period, State/UT-wise; and
- (e) if not, the reasons therefor along with the corrective measures aken/proposed by the Government in this regard?

Answer

MINISTER OF HEALTH AND FAMILY WELFARE (SHRI GHULAM NABI AZAD)

(a) The State/UT-wise details indicating the number of cases reported due to malaria during the last three years 2009,2010,2011 and the year 2012, is at Annexure- I

(b) to (e) The Government of India is implementing the National Vector Borne Disease Control Programme (NVBDCP), through the States/UT Governments, for prevention & control of malaria. The Government of India provides technical support and supplements the efforts of the State Governments by providing funds and commodities as per the Programme parameters and requirements of the States as reflected in the Programme Implementation Plan (PIP) under National Rural Health Mission (NRHM).

The steps taken for prevention and control of Malaria include:

1. Intensified surveillance by involving ASHAs/community volunteers.
2. Effective management of severe cases in hospitals.
3. Co-ordination with IDSP for early detection and response to outbreak.
4. Vector control measures by Indoor Residual Spray (IRS), Long Lasting Insecticidal Nets (LLINs), Use of Larvicidies and source reduction measures.
5. Inter-sectoral co-ordination by involving community and other sectors.
6. Providing additional human resource in high burden areas to strengthen the system.

Monitoring of malaria in the States/ UTs is regularly undertaken and reports are received through structured reporting format by the public health facilities on monthly basis. These show a decrease in reported malaria cases from 1563574 in 2009 to 1018729 cases in 2012.

State/UT wise details of financial assistance provided during the last three years and the current year are given in Annexure II