

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

STARRED QUESTION NO:281

ANSWERED ON:30.08.2013

INFANT MORTALITY

Kumar Shri Kaushalendra;Shivanagouda Shri Shivaramagouda

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

(a) whether as per the recent report of an independent organisation for children `Save the Children`, more than three lakh children die within 24 hours of their birth in the country every year;

(b) if so, the details thereof and the reasons therefor including the reaction of the Government thereto; and

(c) the corrective steps taken by the Government to address the issues including providing training to the frontline workers viz. Auxiliary Nurse, Midwives and Accredited Social Health Activists in the use of simple and effective techniques to ensure timely life saving interventions including access to affordable medicines in order to reduce new born mortality in the country?

Answer

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

(a)to (c):A statement is laid on the Table of the House.

STATEMENT REFERRED TO IN REPLY TO LOK SABHA STARRED QUESTION NO. 281 FOR 30TH AUGUST, 2013

(a)& (b) As per the report published by "Save the Children", more than three lakh children die in India each year on the day they are born and 80 percent of these newborn deaths are due to prematurity, sepsis and birth asphyxia.

As per the Registrar General of India, Sample Registration System (SRS) 2011, the neonatal mortality in India has come down from 47/1000 live births in 1990 to 31/1000 live births in 2011 and the annual rate of reduction in neonatal mortality has also accelerated from 2.9% in 2010 to 6.1% in 2011.

(c)The following actions are carried out under National Rural Health Mission (NRHM) to address neonatal mortality in the country :

(1) Promotion of Institutional Delivery through Janani Suraksha Yojana (JSY) and Janani Shishu Suraksha Karyakram (JSSK) to reduce both maternal and neo-natal mortality. JSY incentivizes pregnant women to opt for institutional delivery and provides for cash assistance. JSSK entitles all pregnant women and sick infants to absolutely free and no expense treatment in Government health facilities and provides for free to and fro transport, food, drugs and diagnostics.

(2) Strengthening Facility based newborn care through establishment of Newborn care corners (NBCC)at all delivery points, New Born Stabilization Units (NBSUs) at FRUs and Special New Born Care Units (SNCUs) at district hospital.

(3) ASHAs have been trained and are being incentivised to carry out Home Based Newborn Care (HBNC). The aim is to improve new born care practices at the community level and early detection and referral of sick new born babies.

(4) Capacity building of health care providers is carried out to upgrade their skills for care of mother during pregnancy and delivery and early diagnosis and case management of common ailments of children including newborns. These trainings are Integrated Management of Neonatal and Child Illness (IMNCI), Navjat Shishu Suraksha Karyakram (NSSK), Skilled Birth Attendant training and Basic and Emergency Obstetric training and Life saving anaesthesia skill training.

(5) Dedicated maternal and child health wings have been sanctioned at high case load facilities for quality maternal and newborn care.