

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

UNSTARRED QUESTION NO:401

ANSWERED ON:06.12.2013

DEATH OF CHILDREN DUE TO PNEUMONIA AND DIARRHOEA

Dome Dr. Ram Chandra;Thamaraiselvan Shri R.

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

(a) whether as per the Pneumonia and Diarrhoea Progress Report, 2013 published by the International Vaccine Access Centre (IVAC), India continues to lose more than 4,00,000 children before their fifth birthday due to preventable diseases viz. pneumonia and diarrhoea and many children do not have access to life saving treatment and preventive measures;

(b) if so, the details of the facts reported therein and the reaction of the Government thereto;

(c) the details of the deaths occurred due to these diseases along with the funds allocated/ spent to overcome the problem during each of the last three years and the current year, State /UT-wise; and

(d) the corrective measures taken by the Government to check high child mortality rate in the country and ensure access to life saving treatment including creation of awareness through electronic media and print media in this regard?

**Answer**

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI GHULAM NABIAZAD)

(a) & (b).

# As per the Pneumonia and Diarrhoea Progress Report, 2013 published by the International Vaccine Access Centre (IVAC), it is estimated that India has 4,36,000 under-five deaths due to Pneumonia and Diarrhoea, annually.

# The reasons attributed for these deaths in the report are non-introduction of Hib, PCV and rotavirus vaccine, low coverage of DPT and measles vaccine, low coverage of children receiving appropriate treatment for suspected pneumonia cases (69% taken to health facility and 13% received antibiotics for 2007-12), low coverage of receiving ORS during diarrhoea (26% for 2007-12) and low coverage of exclusive breastfeeding rates up to 6 months (46% for 2007-012) etc.

# The Government is implementing several strategies for control of pneumonia and diarrhoea in children. Under National Rural Health Mission, the progress of various interventions for prevention of morbidity and mortality due to diarrhea and pneumonia have been noted. This is evident in recently held Annual Health Survey 2010-11 in all EAG states. (Annexure I). Recently, Hib vaccine as Pentavalent vaccine has been initiated in eight States and UTs.

# Use of PCV and Rotavirus in National Immunization programmes is not yet the policy of Government of India.

(c). The details of the deaths occurred due to these diseases in children are not being maintained at the central level. The funds allocated to overcome the problem of diarrhea and pneumonia are provided under the RCH programme of NRHM. The details of the funds allocated state/UT during the last three years are at Annexure II.

(d). Under the National Rural Health Mission, the steps taken by the Government for prevention and control of pneumonia and diarrhoea in children are as follows:

# The Universal Immunisation Programme that covers 2.7 crore children in India each year, includes vaccines that prevent child hood pneumonia. These vaccines are DPT, Measles and BCG that protect against diphtheria, pertussis, measles and tuberculosis.

# Vaccine against Haemophilus Influenzae Type B (Hib) infection as Pentavalent vaccine has been introduced in the national immunization schedule for infants in eight states and UTs.

# Second Dose of measles is now being administered in all the States and UTs. This will bring down mortality due to pneumonia those results from common infections.

# Promotion of early and exclusive breastfeeding offers protection against common childhood illnesses including diarrhoea and pneumonia. Infant And Young Child Feeding Practices are being promoted through the national health programme.

# Vitamin A Supplementation programme covers children up to the age of 5 years and offers protection against diarrhoea and pneumonia by improving the immunity and is used as a preventive measure.

# Promoting use of Zinc and ORS is one of the priority activities for child survival. Low osmolality Oral Rehydration Salt (ORS) packets and zinc tablets are made available free of cost and mothers are taught how to use them.

# Awareness is being created amongst mothers on sanitation and hygiene and in the communities about the causes and treatment of diarrhoea through health education.

# Antibiotics for treatment of pneumonia and dysentery are made available through the public health system.

# The community health workers and facility based health service providers are trained in the management of diarrhoea and pneumonia through the IMNCI (Integrated Management of Neonatal and Childhood Illnesses) programme across the country.

# Surveillance activities to detect outbreaks of Diarrhoea and Pneumonia through Integrated Disease Surveillance Programme (IDSP) are also carried out.