

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

UNSTARRED QUESTION NO:2643
ANSWERED ON:04.12.2009
IMPLEMENTATION OF FAMILY WELFARE PROGRAMME
Singh Dr. Raghuvansh Prasad

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

- (a) the targets fixed during the last three years for effective implementation of Family Welfare Programme in various States;
- (b) the total amount allocated as loan and subsidy under the said programme during the above period, State-wise;
- (c) whether the Government has reviewed the implementation of Family Welfare Programmes in various States including Uttar Pradesh;
- (d) if so, the details and the outcome thereof;
- (e) whether some States have not utilised the funds provided to them under the programme; and
- (f) if so, the details thereof alongwith the reasons therefor and the action taken by the Union Government against such States?

Answer

THE MINISTER OF STATE FOR HEALTH & FAMILY WELFARE (SHRI DINESH TRIVEDI)

(a) & (b) : 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. However, since the unmet need for family planning is very high in most States, the States are exhorted to gear up their infrastructure and manpower to provide the family planning services to the people to meet the unmet demand.

(b): No amount has been allocated as loan and subsidy under the said programme.

(c) & (d): Government reviews the implementation of Family Welfare activities under National Rural Health Mission (NRHM) and RCH-II at different fora from time to time, with the States/UTs. Focussed attention has been given to the demographically weak performing states through provisioning of all kind of support including public awareness programmes under NRHM, for which the states are free to project their priorities depending on local needs in the states in their respective Project Implementation Plans (PIPs).

As a result the country has witnessed significant decline in both fertility and mortality. The crude birth rate, which was recorded at 40.8 per 1000 in 1951, has declined to 23.1 in 2007 (SRS). The crude death rate, which was recorded at 25.1 per 1000 in 1951, has declined to 7.4 in 2007. Infant mortality rate has come down from 146 in 1951-61 to 55 in 2007. Total Fertility rate has come down from 6.0 in 1951 to 2.7 in 2007.

(e): All the States/UTs have utilized the funds provided to them under the National Rural Health Mission. The rate of utilization of funds, however, varies from State to State depending upon their requirements, priorities, human resource and capacity to utilize.

(f): A statement showing the release and expenditure under NRHM including transfers through Treasury Route for the F.Ys. 2006-07 to 2008-09 is annexed. The funds remaining unutilized at the end of a Financial Year are revalidated and adjusted while releasing funds for the next Financial Year. The utilization of funds is monitored through a quarterly Financial Monitoring Report (FMR) received from the States/UTs, which are reviewed and underutilization, identified if any, is communicated to them for taking appropriate measures to improve their performance. In addition, the programme performance reviews are also undertaken by Common Review Mission, Joint Review Missions and also through statutory audit of the State/District Health Societies to suggest suitable measures.