

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

UNSTARRED QUESTION NO:3592

ANSWERED ON:11.12.2009

POPULATION GROWTH

Dharmshi Shri Babar Gajanan;Lal Shri Kirodi ;Saroj Smt. Sushila;Singh Kunwar Rewati Raman

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

- (a) whether the population of the country is increasing rapidly and it is likely to surpass the population of China in near future;
- (b) if so, the details of population growth rate in the country at present;
- (c) whether the Government propose to consider the population policy from a new perspective to check the population growth;
- (d) if so, the details thereof;
- (e) whether the Government is contemplating to discuss the matter with the States/Union Territories for the effective implementation of the population policy; and
- (f) if so, the details thereof?

Answer

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

(a)& (b):- Yes. At the current rate, India's population is expected to exceed that of China to become the most populous country in the World.

The rate of population growth in India is given below: -

Census Year	Population (In Crores)	DecadalGrowth (%)	Average Annual (%)
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1971	54.8	24.80	2.20
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1981	68.6	24.66	2.22
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1991	84.3	23.87	2.14
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2001	102.87	21.54	1.93
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(c)&(d):- The National Population Policy, 2000 provides a policy framework for advancing goals and prioritising strategies to meet the reproductive and child health needs of the people toward ultimately achieving population stabilization. The strategy is based upon the need to simultaneously address issues of child survival, maternal health and contraception while increasing outreach and coverage of a comprehensive package of reproductive and child health services with government, industry and the voluntary non-government sector, working in partnership.

In line with the National Population Policy, 2000 the Government has launched the National Rural Health Mission (NRHM) on 12th April, 2005 throughout the country. Population stabilization is one of the objectives of NRHM. It provides a thrust for reduction of child and maternal mortality and reduction of the fertility rates. The approach to population stabilization is through providing quality health services in remote rural areas along with a wide range of contraceptive choices to meet the unmet demands for these services, while ensuring full reproductive choices to women. The strategy also is to promote male participation in Family Planning. The approach of the 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.

(e) to (f):- Government reviews the implementation of Family Welfare activities under the RCH-II programme under the umbrella of National Rural Health Mission (NRHM) 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). The following steps have been taken to stabilize population:-

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) Compensation Package for Sterilization was increased in September, 2007 from Rs.800/- to Rs.1500/- for vasectomy and from Rs.800/- to Rs.1000/- for tubectomy 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 NRHM to address the up-gradation of Family Planning Services.

iv) Promoting acceptance of No Scalpel Vasectomy to ensure male participation.

v) Promoting IUD 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.