## GOVERNMENT OF INDIA HEALTH AND FAMILY WELFARE LOK SABHA

UNSTARRED QUESTION NO:799 ANSWERED ON:27.02.2015 FEMALE FOETICIDE Jadhav Shri Sanjay Haribhau

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

(a) whether the cases of female and infant foeticide have increased in the country during each of the last three years and the current year;

(b) if so, the details thereof, State/UTwise and the reasons therefor;

(c) whether the Government has sought report/ clarifications from States/UTs in this regard;

(d) if so, the details thereof, State/UTwise along with the status of such report/ clarifications; and

(e) the corrective steps taken/being taken by the Government to prevent female and infant foeticide across the country?

## Answer

## THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA)

(a) & (b): Yes. A total of 132 cases, 210 cases and 221 cases were reported under foeticide and a total of 63 cases, 81 cases and 82 cases were reported under infanticide during 2011, 2012 and 2013 respectively. State/UT-wise data relating to cases registered under foeticide and infanticide during 2011-2013, as maintained by the National Crime Record Bureau (NCRB) are at Annexure-I & II, respectively. Some of the reasons for neglect of girl child and low child sex ratio are son preference and the belief that it is only the son who can perform the last rites, that lineage and inheritance runs through the male line, sons will look after parents in old age, men are the bread winners etc. Exorbitant dowry demand is another reason for female foeticide/infanticide. Small family norm coupled with easy availability of sex determination tests may be a catalyst in the declining child sex ratio, further facilitated by easy availability of Pre-conception sex selection facilities.

(c) & (d): As per Quarterly Progress Reports (QPRs) submitted by States/ UTs, 50743 diagnostic facilities including Genetic Counselling Centre, Genetic Labo- ratory, Genetic Clinic, Ultrasound Clinic and Imaging Centre have been registered under the Preconception and Pre-natal Diagnostic Techniques (Prohibition of Sex Selection) Act, 1994. So far, a total of 1716 machines have been sealed and seized for violations of the PC & PNDT Act. A total of 2021 court cases have been filed by the concerned Appropriate Autho- rities and 206 convictions have so far been secured under the Act. Following conviction the medical licenses of 98 doctors have been suspended/ cancelled. The State/UT wise details are at Annexure-III.

(e): Government has adopted a multi-pronged strategy entailing schemes and programmes and awareness gene- ration/advocacy measures to build a positive envi- ronment for the girl child through gender sensitive policies, provisions and legislation. The measures include the following:-

# The Government has intensified effective implementation of the Pre-conception and Pre-natal Diagnostic Techniques (Prohibition of Sex Selection) Act, 1994 and amended various provisions of the Rules.

# The Government is rendering financial support to the States and UTs for operationalisation of PNDT Cells, Capacity Building, Orientation & Sensitisation Workshop, Information, Education and Communication campaigns and for strengthening structures for the implementation of the PC & PNDT Act under the National Rural Health Mission (NRHM).

# The Minister of Health and Family Welfare has requested all the State Governments to strengthen implementation of the Act and to ensure timely steps to stop illegal sex determination.

# Program review at the state level has been inte- nsified. Five regional review workshops for North, West, central, north east and Southern regions were organized at Srinagar, Pune, Hyderabad, Kolkata and Bhopal during 2013-14 to evaluate and review the progress of implementation of PCPNDT Act in the country. During the current financial year 2014-15, four review workshops for North, West, north east and Southern regions were organized.

# National campaign "Beti Bachao, Beti Padhao" was launched in 100 gender critical districts in par- thership with Ministry of Woman and Child Develo- pment and Human Recourse Development.

# Directions given vide Order dated 04.03.2013 by the Hon'ble Supreme Court in the matter of WP(C) 349/2006 were communicated to the States/ UTs at the level of Health Minister to Chief Ministers and Chief Secretaries to ensure immediate compliance.

# Inspections by the National Inspection and Monitoring Committee (NIMC) have been scaled up. In year 2014-15, 16 inspection visits have been completed in the states including Madhya Pradesh, Uttarakhand, Andhra Pradesh, Himachal Pradesh, Karnataka, Uttar Pradesh, Odisha, West Bengal, Delhi (Twice), Chhattisgarh, Bihar, Manipur, Jharkhand, Tamilnadu and Gujarat.

# States have been advised to focus on Districts/ Blocks/Villages with low Child Sex Ratio to ascertain the causes, plan appropriate behaviour change commu-nication campaigns and effectively implement provi-sions of the PC & PNDT Act.