

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

UNSTARRED QUESTION NO:3417
ANSWERED ON:12.12.2014
HEALTH INDICATORS
Kumar Shri Ashwini

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

- (a) whether as per a recent UNICEF review on child rights India fares very badly on health indicators;
- (b) if so, the details thereof and the reaction of the Government thereto; and
- (c) the corrective measures taken/being taken by the Government in this regard?

Answer

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI SHRIPAD YESSO NAIK)

(a) & (b): According to UNICEF, the concluding observation made by the Committee on Child Rights in 2014 included the following:

High level of neonatal mortality.

High level of chronic malnutrition (stunting), wasting (acute malnutrition) and underweight among children, in particular children under age 5 years.

Low level of breastfeeding within one-hour of the birth of the child and exclusive breastfeeding of children below 6 months;

Low level of immunization among the children;

High prevalence of communicable diseases among children, such as acute respiratory infections, diarrhoea and fever, including fever linked to malaria.

(c): Several interventions have been made by the Government under National Health Mission to improve the health condition of the Children. These include:

1. Focussed attention in 184 High Priority Districts for implementation of Reproductive Maternal Newborn Child Health+ Adolescent (RMNCH+A) interventions for achieving improved maternal and child health outcomes.
2. Name Based Web enabled Tracking of Pregnant Women to ensure antenatal, intranatal and postnatal care and Children for immunization to all the children.
3. Mother and Child Protection Card in collaboration with the Ministry of Women and Child Development to monitor service delivery for mothers and children.
4. Engagement of more than 8.9 lakhs Accredited Social Health Activists (ASHAs) to generate demand and facilitate accessing of health care services by the community including those for children.
5. Village Health and Nutrition Days in rural areas as an outreach activity, for provision of maternal and child health services.
6. Health and nutrition education to promote dietary diversification, inclusion of iron and folate rich food as well as food items that promote iron absorption.
7. Put in place similar entitlements for all sick infants accessing public health institutions for treatment.
8. Establishment of Newborn care corners at all health facilities where deliveries take place; Setting up of Special New Born Care Units and New Born Stabilization Units at appropriate facilities for the care of sick newborn including preterm babies.
9. Promotion of appropriate Infant and young child feeding practices such as early initiation of breastfeeding, exclusive breastfeeding and age appropriate complementary feeding among young children.
10. Launched India Newborn Action Plan to reduce neonatal mortality and stillbirths.
11. Intensified Diarrhoea Control Fortnight was observed in August 2014 focussing on ORS and Zine distribution for management of diarrhoea and feeding practices.
12. Integrated Action Plan for Pneumonia and Diarrhoea launched in four States (Uttar Pradesh, Madhya Pradesh, Bihar and Rajasthan) with highest Child Mortality.