

**GOVERNMENT OF INDIA
MINISTRY OF HEALTH AND FAMILY WELFARE
DEPARTMENT OF HEALTH AND FAMILY WELFARE**

**LOK SABHA
UNSTARRED QUESTION NO. 2214
TO BE ANSWERED ON 10TH DECEMBER, 2021**

EXPECTANT MOTHERS

2214. SHRI RAJA AMARESHWARA NAIK:

DR. SUKANTA MAJUMDAR:

DR. JAYANTA KUMAR ROY:

SHRI BHOLA SINGH:

Will the **MINISTER OF HEALTH AND FAMILY WELFARE** be pleased to state:

- (a) Whether the Government is implementing any scheme to ensure health and wellbeing of expectant mothers and their children;
- (b) if so, the details thereof;
- (c) the details of initiatives taken/being taken by the Government to ensure protection and wellbeing of children below three years of age of working mothers; and
- (d) the steps being taken by the Government to reduce the mortality rate among children due to malnutrition in the country?

ANSWER

**THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND
FAMILY WELFARE
(DR. BHARATI PRAVIN PAWAR)**

(a), (b) and (c) Government of India implements various schemes under the National Health Mission, to ensure health and wellbeing of expectant mothers and their children, which also cover children below three years of age of working mothers. These schemes include:

1. **Janani Suraksha Yojana (JSY)**, a demand promotion and conditional cash transfer scheme which aims at promoting institutional delivery. Financial assistance under JSY is available to all pregnant women in those States/UTs which are categorized as Low Performing States. However, in remaining States/UTs where the levels of institutional delivery are satisfactory (categorized as High Performing States); pregnant women from BPL/SC/ST households only are entitled for JSY benefits. For home delivery, financial assistance under JSY is available to pregnant women from BPL households only.
2. **Janani Shishu Suraksha Karyakaram (JSSK)** entitles every pregnant woman to free delivery, including caesarean section, in public health institutions along with the provision of free transport, diagnostics, medicines, other consumables, diet and blood (if

required). Similar entitlements have been put in place for all sick infants accessing public health institutions for treatment

3. **Pradhan Mantri Surakshit Matritva Abhiyan (PMSMA)** provides fixed-day assured, comprehensive and quality antenatal care universally to all pregnant women in their 2nd / 3rd trimesters on the 9th of every month. As part of the Abhiyan, a minimum package of antenatal care services is provided by OBGY specialists/ Radiologist/ Physicians at government health facilities.
4. **Labour Room Quality Improvement Initiative (LaQshya)** aims to improve the quality of care in Labour room and Maternity operation theatres to ensure that pregnant women receive respectful and quality care during delivery and immediate post-partum
5. **Surakshit Matratva Ashwasan (SUMAN)** aims to provide assured, dignified, respectful and quality healthcare at no cost and zero tolerance for denial of services for every woman and newborn visiting the public health facility.
6. **Facility Based New Born Care-Sick New-born Care Units (SNCUs)** are established at District Hospital and Medical College level and New-born Stabilization Units (NBSUs) established at First Referral Units (FRUs)/ Community Health Centres (CHC) for care of sick and small babies.
7. Under **Home Based New-born Care (HBNC)** and **Home-Based Care of Young Children (HBYC)** program, home visits by ASHAs are conducted to improve child rearing practices and to identify sick new-born and young children in the community.
8. Early initiation and exclusive breastfeeding for first six months and appropriate **Infant and Young Child Feeding (IYCF)** practices are promoted under **Mothers' Absolute Affection (MAA)**.
9. **Social Awareness and Actions to Neutralize Pneumonia Successfully (SAANS)** initiative has been launched for reduction of Childhood morbidity and mortality due to Pneumonia.
10. **Universal Immunization Programme (UIP)** is implemented to provide vaccination to children against life threatening diseases such as Tuberculosis, Diphtheria, Pertussis, Polio, Tetanus, Hepatitis B, Measles, Rubella, Pneumonia and Meningitis caused by Haemophilus Influenzae B. The Rotavirus vaccination has also been rolled out in the country for prevention of Rota-viral diarrhoea. Pneumococcal Conjugate Vaccine (PCV) has been introduced in all the States and UTs.
11. Children from 0 to 18 years of age are screened for 30 health conditions (i.e. Diseases, Deficiencies, Defects and Developmental delay) under "**Rashtriya Bal Swasthya Karyakaram (RBSK)**" to improve child survival. District Early Intervention Centre (DEIC) at district health facility level are established for confirmation and management of children screened under RBSK.
12. **Nutrition Rehabilitation Centres (NRCs)** have been set up at public health facilities to treat and manage the children with Severe Acute Malnutrition (SAM) admitted with medical complications.
13. **Intensified Diarrhoea Control Fortnight / Defeat Diarrhoea (D2)** initiative has been launched for promoting ORS and Zinc use and for reducing diarrheal deaths.

14. Several capacity building programs of health care providers are conducted for improving maternal and child survival and health outcomes.

(d) The Ministry of Health and Family Welfare implements RMNCHA+N strategy under National Health Mission (NHM), which includes various activities related to improvement in nutritional status of children. The related program details are as under-

1. Appropriate **Infant and Young Child Feeding (IYCF)** practices including early initiation of breastfeeding within an hour of childbirth and exclusive breastfeeding for the first six months are promoted under **Mothers' Absolute Affection (MAA)** programme.
2. Treatment of sick children with Severe Acute Malnutrition (SAM) at special units called the **Nutrition Rehabilitation Centres (NRCs)**, set up at public health facilities.
3. **Vitamin A supplementation (VAS)** for children of 9 to 59 months age.
4. '**Anemia Mukh Bharat (AMB)**' for supplementation and treatment of anaemia through a life cycle approach i.e. in children, adolescents, pregnant and lactating women, and women of reproductive age group. This includes bi-weekly IFA syrup supplementation to children 6 – 59 months and weekly IFA tablet supplementation to children 5 – 10 years.
5. **National De-worming Day** as a fixed day strategy to administer Albendazole tablets to all the children in the age group of 1-19 years through the platform of AWCs and schools for good nutritional outcomes and prevention of anaemia.
6. **Prevention of childhood illness** such as diarrheal diseases which in turn prevents childhood malnutrition.