

1	2	3
29	A&N Islands	1075
30	Chandigarh	1750
31	D&N Haveli	281
32	Daman and Diu	200
33	Delhi	22961
34	Lakshadweep	120
35	Puducherry	2103
TOTAL		1376013

\* National Health Profile 2012

\*\* Some States have also included data of PHCs

#### MMR and IMR

1327. SHRI Y. S. CHOWDARY: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the details of Maternal Mortality Rate and Infant Mortality Rate (MMR/IMR) for the last three years;

(b) whether it is a fact that MMR and IMR rate is on much higher side in India as compared to other countries; and

(c) the steps taken or being taken by Government to reduce the MMR and IMR?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI GHULAM NABI AZAD): (a) The Registrar General of India - Sample Registration System (RGI-SRS) provides MMR for the country and major States at 3-year intervals.

As per the latest data on maternal mortality in the country, available from the report of RGI-SRS 2007-09, the Maternal Mortality Ratio (MMR) of India is 212 per 100,000 live births.

As per the latest data on Infant Mortality Rate available from the report of Registrar General of India-Sample Registration System (RGI-SRS) 2012, Infant Mortality Rate (IMR) in the country is 42 per 1000 live births. Data on IMR for the years 2010, 2011 and 2012 is placed below

	SRS, 2010	SRS, 2011	SRS, 2012
IMR	47	44	42

(b) As per the information provided in the Maternal Mortality Estimation Inter-Agency Group (MMEIG) report, "Trends in Maternal Mortality: 1990 to 2010" released in the year 2012 by WHO, UNICEF, UNFPA and the World Bank, 54 countries have higher MMR than India as given in the Statement-I (*See below*).

As per the information provided in "The State of the World's Children 2013 - Children with Disabilities" released by UNICEF, 43 countries have higher IMR than India as given in Statement-II (*See below*)

(c) The National Rural Health Mission (NRHM) and under its umbrella, the Reproductive and Child Health Programme Phase II, seeks to improve the availability of and access to quality health care including Maternal and Child Health services particularly to rural population throughout the country. Under this programme, the steps taken by the Government to accelerate the pace of reduction in maternal & infant mortality are:

- Demand promotion through Janani Suraksha Yojana (JSY), a conditional cash transfer scheme to promote institutional deliveries
- Providing resources for operationalization of sub-centers, Primary Health Centers, Community Health Centers and District Hospitals for providing 24x7 basic and comprehensive obstetric care, neonatal, infant and child care services
- Strengthening of Facility based newborn care by setting up Newborn care corners (NBCC) in all health facilities where deliveries take place; Special New Born Care Units (SNCUs) at District Hospitals and New Born Stabilization Units (NBSUs) at First Referral Units for the care of sick newborn.
- Capacity building of health care providers through training programmes in basic and comprehensive obstetric care, skilled attendance at birth, Integrated Management of Neo-natal and Childhood Illness (IMNCI) and Navjaat Shishu Suraksha Karyakaram (NSSK), facility & home based newborn care, etc.
- Name Based web enabled tracking of pregnant women & children to ensure optimal antenatal, intranatal and postnatal care to pregnant women and care to new-borns, infants and children.
- Under the National Iron+ Initiative, Iron and Folic Acid supplementation to pregnant, lactating women and to children and adolescents for prevention and treatment of anaemia.

- Identifying the severely anaemic cases in pregnant women and children at sub centres and PHCs for their timely management.
- To tackle the problem of anaemia due to malaria particularly in pregnant women and children, Long Lasting Insecticide Nets (LLINs) and Insecticide Treated Bed Nets (ITBNs) are being distributed in endemic areas.
- Exclusive breastfeeding for first six months and promotion of appropriate infant and young child feeding practices.
- Engagement of more than 8.8 lakhs Accredited Social Health Activists (ASHAs) to generate demand and facilitate accessing of health care services by the community.
- Home Based Newborn Care (HBNC) has been initiated through ASHA to improve new born care practices at the community level and for early detection and referral of sick new born babies.
- Village Health and Nutrition Days in rural areas as an outreach activity, for provision of maternal and child health services and creating awareness on maternal and child care including health and nutrition education.
- Universal Immunization Program (UIP) against seven diseases for all children.
- Vitamin A supplementation for children aged 6 months to 5 years.
- Janani Shishu Suraksha Karyakaram (JSSK) has been launched in 2011, which entitles all pregnant women delivering in public health institutions to absolutely free and no expense delivery including Caesarean section. The initiative stipulates free drugs, diagnostics, blood and diet, besides free transport from home to institution, between facilities in case of a referral and drop back home. Similar entitlements are available for sick newborns and infants accessing public health institutions for treatment.

**Statement-I**

*MMR Estimates 2010- "Trends in Maternal Mortality 1990-2010"  
(Estimates developed by WHO, UNICEF, UNFPA and the World Bank)*

Sl. No.	Country	MMR
1	2	3
1	Chad	1100
2	Somalia	1000
3	Central African Republic	890

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1	2	3
4	Sierra Leone	890
5	Burundi	800
6	Guinea-Bissau	790
7	Liberia	770
8	Sudan	730
9	Cameroon	690
10	Nigeria	630
11	Lesotho	620
12	Guinea	610
13	Niger	590
14	Zimbabwe	570
15	Congo	560
16	Democratic Republic of the Congo	540
17	Mali	540
18	Mauritania	510
19	Mozambique	490
20	Lao People's Democratic Republic	470
21	Afghanistan	460
22	Malawi	460
23	United Republic of Tanzania	460
24	Angola	450
25	Zambia	440
26	Cote d'Ivoire	400
27	Senegal	370
28	Gambia	360

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1	2	3
29	Kenya	360
30	Benin	350
31	Ethiopia	350
32	Ghana	350
33	Haiti	350
34	Rwanda	340
35	Swaziland	320
36	Uganda	310
37	Burkina Faso	300
38	South Africa	300
39	Timor-Leste	300
40	Togo	300
41	Comoros	280
42	Guyana	280
43	Pakistan	260
44	Cambodia	250
45	Bangladesh	240
46	Equatorial Guinea	240
47	Eritrea	240
48	Madagascar	240
49	Gabon	230
50	Papua New Guinea	230
51	Indonesia	220
52	Myanmar	200
53	Namibia	200
54	Yemen	200
55	<b>India</b>	<b>200</b>

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***Statement-II****International comparison of the Infant Mortality Rate*

As per the UNICEF report "The State of the world's children 2013-Children with Disabilities", Infant mortality rate of India stands at 47 per 1000 live births. There are 43 countries which has IMR higher than the India. The details are given below:

Sl. No.	Countries	Infant Mortality Rate, 2011
1	2	3
1	Sierra Leone	119
2	Democratic Republic of the Congo	111
3	Somalia	108
4	Central African Republic	108
5	Mali	98
6	Guinea-Bissau	98
7	Chad	97
8	Angola	96
9	Burundi	86
10	Burkina Faso	82
11	Cote d'Ivoire	81
12	Equatorial Guinea	80
13	Cameroon	79
14	Guinea	79
15	Nigeria	78
16	South Sudan	76
17	Mauritania	76
18	Togo	73
19	Afghanistan	73

1	2	3
20	Djibouti	72
21	Mozambique	72
22	Swaziland	69
23	Benin	68
24	Niger	66
25	Congo	64
26	Lesotho	63
27	Pakistan	59
28	Comoros	59
29	Liberia	58
30	Sao Tome and Principe	58
31	Uganda	58
32	Gambia	58
33	Yemen	57
34	Sudan	57
35	Haiti	53
36	Malawi	53
37	Tajikistan	53
38	Zambia	53
39	Ghana	52
40	Ethiopia	52
41	Gabon	49
42	Kenya	48
43	Myanmar	48
44	<b>India</b>	<b>47</b>

Source: The State of the world's children 2013-Children with Disabilities, UNICEF.