

India witnesses drop in infant mortality rate

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There was no increase in infant mortality rate between the period 2003-08. India's infant mortality rate in 2003 was 60 per 1000 live births (SRS 2003) and which has decreased to 53 per 1000 live births (SRS 2008) in 2008. Sharing this information, Mr Abu Hasem Khan Choudhury, Minister of State for Health and Family Welfare, Government of India said, "Government has taken measures under National Rural Health Mission (NRHM) to reduce the infant mortality rate in the country. Besides there are other schemes such as Integrated Child Development Services (ICDS)."

Under National Rural Health Mission, the government has taken many steps to reduce infant mortality rate in the country. Some of the programs under the scheme include:

- Promotion of institutional delivery through Janani Suraksha Yojana (JSY) and Janani Shishu Suraksha Karyakram (JSSK): Promoting institutional delivery to ensure skilled birth attendance is key to reducing both maternal and neonatal mortality. JSY incentivizes pregnant women to opt for institutional delivery and provides for cash assistance. JSSK entitles all pregnant women to absolutely free and zero expense delivery including caesarean section operation in government health facilities and provides for free transport, food, drugs and diagnostics. Similar entitlements have also been put in place for infants.
- Strengthening facility-based newborn care: Newborn Care Corners (NBCC) are being set up at all health facilities where deliveries take place to provide essential newborn care at birth to all new born babies; Special New Born Care Units (SNCUs) at district hospitals and New Born Stabilization Units (NBSUs) at FRUs are being set up for the care of sick newborn. As on date 401 SNCUs, 1542 NBSUs and 11508 NBCCs are functional across the country.
- Home-Based Newborn Care (HBNC): Home-Based Newborn Care through ASHA has recently been initiated to improve new born care practices at the community level and for early detection and referral of sick new born babies.
- Capacity building of health care providers: Various trainings are being conducted under National Rural Health Mission

(NRHM) to build and upgrade the skills of doctors, nurses and ANM for early diagnosis and case management of common ailments of children and care of newborn at time of birth. These trainings include Integrated Management of Neo-natal and Childhood Illness (IMNCI) and Navjaat Shishu Surakshta Karyakaram (NSSK). A total of 5.88 lakh health care workers have been trained in IMNCI in 505 districts and 89,962 health workers in NSSK so far.

- Management of malnutrition: Emphasis is being laid on reduction of malnutrition which is an important underlying cause of child mortality. 605 nutritional rehabilitation centers have been established for management of Severe Acute Malnutrition (SAM). Iron and Folic Acid are also provided to children for prevention of anaemia. Recently, weekly Iron and Folic Acid distribution has been initiated for adolescent population. As breastfeeding reduces infant mortality, exclusive breastfeeding for first six months and appropriate infant and young child feeding practices are being promoted in convergence with Ministry of Woman and Child Development.
- Village Health and Nutrition Days (VHNDs) are also being organized for imparting nutritional counselling to mothers and to improve child care practices.
- Universal Immunization Program (UIP): Vaccination against seven diseases is provided to all children under UIP. Government of India supports the vaccine program by the supply of vaccines and syringes, cold chain equipments and provision of operational costs. UIP targets to immunize 2.7 crore infants against seven vaccine preventable diseases every year. Second dose of Measles has also been incorporated in UIP and pentavalent vaccine has also been introduced in seven states. Year 2012-13 has been declared as 'Year of intensification of Routine Immunization'.
- Mother and Child Tracking System: A name based Mother and Child Tracking System has been put in place which is web based to enable tracking of all pregnant women and newborns so as to monitor and ensure that complete services are provided to them. States are encouraged to send SMS alerts to beneficiaries reminding them of the dates on which services are due and generate beneficiary-wise due list of services with due dates for ANMs on a weekly basis.

In addition to NHRM, the government of India has been making efforts to reduce the infant mortality. Under the ICDS scheme, a self selecting scheme, there are 7,025 operational projects and 13.31 lakh operational Anganwadi Centers (AWCs) in the entire country as on January 2013. Each and every child below six years and pregnant and lactating mothers are eligible and have access to the services under the scheme. However, as the scheme is self-selecting, 927.66 lakh beneficiaries which include 746.81 lakh children (6 months to 6 years) and 180.85 lakh pregnant and lactating mothers (January 2013) have availed the services. Thus as per current reports and calculations, about 55 percent of children under six years are availing the ICDS services.