



# IAPPD Newsletter

A Quarterly Newsletter of Indian Association of Parliamentarians on Population and Development



## Striving towards a TB-free Telangana State One-day Sensitization Workshop for PRIs Bhongir District, Telangana, July 17, 2018

Health being an important responsibility of the Panchayati Raj Institutions (PRIs) in India, there are many opportunities for greater involvement of the PRIs for Tuberculosis (TB) control. Because the diagnosis and treatment of TB is complicated and takes longer duration, and mistreatment of TB and emergence of drug-resistant TB affects everybody in the community, the Panchayats should be involved in all aspects of TB control. The members of Panchayati Raj Institutions (PRIs) can facilitate good communication between facilities, public or private, that diagnose and treat TB and the communities, which they serve thus greatly helping in mobilizing community support for TB control. PRIs can help TB patient to link to other social welfare schemes, can help in nutritional and rehabilitation support, etc.

With the objective to sensitize the members of Panchayati Raj Institutions on the issue of Tuberculosis in Telangana and to discuss the role of PRI members in eliminating TB in their area, a 'One-day Sensitization Workshop for PRIs on Striving towards a TB-free



*Inauration of the Workshop.*

Telangana State' was organized by the Indian Association of Parliamentarians on Population and Development (IAPPD) in association with the Government of Telangana in Bhongir District, Telangana, on July 17, 2018.

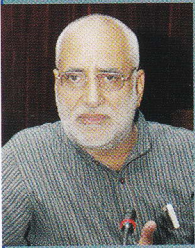
The meeting was attended by more than 400 members of Panchayati Raj Institutions and officials from the Department of Health and Family Welfare, Government of Telangana and representatives of various agencies working in the area of health and family welfare in the state.

*Contd. on page 3 ...*



*Participants attending the Workshop.*





According to the latest NSSO report (2014), 44 out of every 1,000 Indians end up getting hospitalized in a year. Indians are visiting hospitals in higher numbers than at any time in the past. A decade ago, about 31 out of every 1,000 Indians in urban areas were hospitalized (excluding childbirth) every year, according to the National Sample Survey Office's (NSSO) estimation in 2004. The trend is similar in rural India, and represents the expansion of healthcare facilities—both public and private—and the population's increasing ability to access such services.

86% of rural population and 82% of urban population are not covered under any scheme of health expenditure support in the country. Due to high out-of-pocket healthcare expenditure, about 7% population is pushed below the poverty threshold every year.

Healthcare is one of the fastest growing sectors in India and the Government of India has aggressive plans to develop India further. It presents a great opportunity for the growth of the entire health industry—medical devices, healthcare providers and pharmaceutical manufacturers. The government

has initiated a fundamental change in its role from being a care provider (hospitals) to also becoming an insurance provider, as is evident from the proposal in Union Budget 2018 of a health protection scheme of Rs. 5 lakh health insurance cover to 50 crore poor and vulnerable individuals, covering around 40% of the Indian population. The gap between the required and current growth in healthcare infrastructure and care-providing staff in India cannot be addressed through an incremental and linear approach.

Increased spending by the government on healthcare and greater participation by private players, coupled with tighter regulation, would help the healthcare sector gear up for effective implementation of National Health Protection Scheme (NHPS). With the NHPS enabling financing of healthcare for a large chunk of the population, there will be a big jump in the demand for healthcare. The government needs to ensure that the availability of infrastructure and healthcare professionals is spruced up to meet this increased demand.

Manmohan Sharma  
Executive Secretary, IAPPD

## 2nd National Summit on Sustainability

New Delhi, September 14, 2018

The 2nd National Summit on Sustainability was organized by the PHD Chamber of Commerce and Industries in collaboration with Environchip Synergy Partner and SDGs Partner, Global Compact Network India on September 14, 2018 in New Delhi.

The main objective of the Summit was to develop understanding on how sustainable development goals (SDGs) can be linked with Corporate Social Responsibility (CSR) activities and discover how company values can be enhanced for sustainability practices.

The Summit was opened by Dr. D.K. Aggarwal, Vice President, PHD Chamber of Commerce and Industries

and the key note address was delivered by Dr. Bhaskar Chatterjee, former DG&CEO, Indian Institute of Corporate Affairs, Government of India. His Excellency Mr. Jozef Drofenik, Ambassador of the Republic of Slovenia was the Chief Guest on this occasion.

Mr. Manmohan Sharma, Executive Secretary, IAPPD, attended this Summit.

During the Summit inspirational addresses by eminent speakers on best sustainability practices were delivered and high quality case studies were discussed.



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Mr. Manmohan Sharma, Executive Secretary, IAPPD, welcomed all dignitaries and participants to the sensitization programme. He welcomed Dr. Narsiah Boora Goud, MP and other dignitaries and thanked Dr. Narsiah Boora Goud for his continued support to fight TB in India. He said that Hon'ble Prime Minister Mr. Narendra Modi is committed to eradicate TB from the country by the year 2025.



Dr. Narsiah Boora Goud, MP, addressing the participants.

In his inaugural address, Dr. Narsiah Boora Goud, Member of Parliament and Co-chair of India TB-Caucus, said that the situation of TB is grave in the country but there is treatment for this disease and the government is taking every possible step to completely eradicate this disease from the country by the year 2025.

He further said that there is National TB Control Programme and gave statistics of TB patients in India. He said that there are 140 lakh TB patients in India and at the existing rate every year it is expected that 15 lakh more people are exposed to this disease. Of all the TB affected Countries, India stands at 8th position. As compared with HIV/AIDS, there are more TB patients and it is going to be an issue of serious concern. Therefore, to have a TB free India we have to work hard and createmass awareness about tuberculosis among the masses.

He also informed that the government of Telangana gives Rs.500 a month to Tuberculosis (TB) patients to help them buy nutritious food and compensate them

for travel expenses until they are cured of the disease, irrespective of their income level.

Mrs. Anita Ramachandran, Collector, Bhongir District, informed that in this district there are 608 TB patients. They have to have nutritious food and it is the best way along with proper medication for treatment. Dr. Raja Ram, Joint Director, TB Telangana informed that to eradicate TB from the state, the government is taking rigorous steps. Dr. SambasivaR ao, District Medical Officer stated that the Department of Health is making considerable efforts to provide medicine and other health services to the TB affected people in the state.

A presentation on 'Spread, Control and Treatment of TB' was made by one of the medical-faculty member from the state.

Mr. Gadari Kishore, MLA, Thungathurthi; Dr. Anuradha; Dr. PapparaoElimenati Krishna Reddy; Mr. Amrender Gouda; Mrs. Sharada, District Lady and Female Officer; and Mr. Statya Reddy, Single Window Chairman also addressed the participants.

At the end of the meeting, PRIs pledged commitment to support for a TB – Free Telangana.



Speakers addressing the participants.



Participants with Chief Guest.



# South-East Asian Regional Parliamentarians Meeting – A Renewed Commitment to Women's, Children and Adolescent Health

July 26-27, 2018, New Delhi

Over 30 Parliamentarians from countries in WHO South-East Asia Region viz. India, Bangladesh, Bhutan, DPR Korea, Indonesia, Maldives, Myanmar, Nepal, Sri Lanka, Thailand, and Timor Leste gathered in New Delhi to discuss health and wellbeing of women, children and adolescents, to further reduce preventable diseases and deaths among them. The meeting was organized by the World Health Organization (WHO) on July 26-27, 2018. Also, senior officials from the Ministry of Health and Family Welfare, Government of India, representatives of partner organizations such as UNICEF, UNFPA, World Bank and representatives of Asian Forum and Indian Association of Parliamentarians on Population and Development (IAPPD) were among those who participated in the meeting.

In her welcome address, Dr. Poonam Khetrpal Singh, Regional Director, WHO South-East Asia, said that the health of women, children and adolescents is critical to sustainable development – economic as well as social development. This population should be at the center of our efforts to achieve universal health coverage – with quality health provided to everyone everywhere.

Adopting a 'Call to Action' at the end of the two-day 'South-Asia Regional Parliamentarians' Meeting – A Renewed Commitment to Women's, Children's and Adolescents' Health', the participants committed to contribute towards increasing national budgets for



*Mrs. Anupriya Patel, Minister of State for Health and Family Welfare, Government of India (centre) with other dignitaries during the inauguration of the meeting.*

health services for this key population; ensuring access to and financial protection for quality reproductive, maternal, newborn, child and adolescent health services within the provision of universal health coverage; and deploying skilled workforce, especially in rural areas.

Chalking out the next course of actions, the parliamentarians agreed to work towards introducing or amending and implementing laws to protect rights of women, children and adolescents, including preventing child marriage.

Working across all sectors like health, water, education, nutrition and commerce to address the various determinants of health for women, girls and



*Group Photo of the participants.*



adolescents, and promoting education, skill building and jobs.

The Regional Director said in a message to the meeting that the parliamentarians, who represent all sections of the society and cut across all political formations, can have the much needed influence in countries to make these changes happen.

The Region, which accounts for one-fourth of the global population, one-third of newborns, and has over 360 million adolescents, the largest number of young population ever, has been making progress in advancing health of women and children. Between 1990 and 2015, maternal mortality rates declined by 69%, deaths in children less than five years of age reduced by 67% and newborn deaths rates declined by 57%.



*Members of Parliament from India during the meeting.*

Region from preventable complications in pregnancy and childbirth. Nearly 3500 children die every day, mostly due to pneumonia, diarrhea and malaria, with malnutrition underlying 45% deaths.

Strengthening midwifery care for the mothers and newborns, making emergency services and family planning services available, facilitating good nutrition, empowering women and giving them equal opportunities, and addressing inequalities in healthcare, are among the key measures that the Parliamentarians are best positioned to address and promote, the Regional Director said.



*Interactive session during the meeting.*

The momentum picked up in recent years with WHO declaring 'reducing preventable maternal, child and neonatal deaths' as a flagship programme in South-East Asia Region in 2014.

However, despite progress, there is much to be done, as everyday nearly 170 women and girls die in the

From India, Dr. Vikas Mahatme, MP; Dr. Heena Vijaykumar Gavit, MP; Dr. K. Kamaraj, MP; Dr. Sanjay Jaiswal, MP; Mrs. Viplove Thakur, MP and Vice Chairperson, IAPPD; and Dr. Boora Narsaiah Goud, MP, participated in the meeting. Mr. Manmohan Sharma, Executive Secretary, IAPPD also attended this meeting.



*Group Photo of the participants.*



# Parliamentarians as Fourth Pillar for Achieving the 2030 Agenda: Population, Food Security and Sexual and Reproductive Health

Accra, Ghana, August 8-10, 2018

To provide a platform for Asian and African Parliamentarians to exchange their good practices and lessons learnt, promote parliamentary networking and further individual and collective supra-partisan actions to address population issues, a Parliamentarians' Meeting and Study Visit on "Parliamentarians as the Fourth Pillar for Achieving the 2030 Agenda: Population, Food Security and Sexual and Reproductive Health (SRH)" was organized in Accra, Ghana on August 8-10, 2018. The meeting was hosted by Asian Population and Development Association (APDA), Japan in association with Parliament of Ghana.



Mrs. Viplove Thakur, MP, during the meeting.

The meeting was attended by Mrs. Viplove Thakur, MP and Mr. Manmohan Sharma, Executive Secretary, IAPPD.

During the meeting, Mrs. Viplove Thakur, made a presentation on Building a Health Society: Universal Health Coverage (UHC) and Sexual and Reproductive Health (SRH).

In her presentation, she said that access to health services ensures healthier people, while financial risk protection prevents people from being pushed into poverty. Countries that invest in UHC make a sound investment in their human capital. She further said that India's health indicators have made improvements. UHC is a priority under the National Health Policy 2017 and the Government of India is steadily but surely progressing towards the goal of UHC. She informed the participants that the National Health Protection Scheme 'Ayushman Bharat' is world's largest health protection scheme launched in India recently and will cover 100 million poor and vulnerable families (500 million beneficiaries). Besides, 1.5 lakh sub-centres will be covered into Health and Wellness Centres providing comprehensive care, including non-communicable diseases and maternal and child health services. Her presentation was very well received by the group.

At the end of the meeting, the Parliamentarians in a joint statement recommended the following:

1. In order to achieve sustainable development, the mortality transition should proceed in tandem with



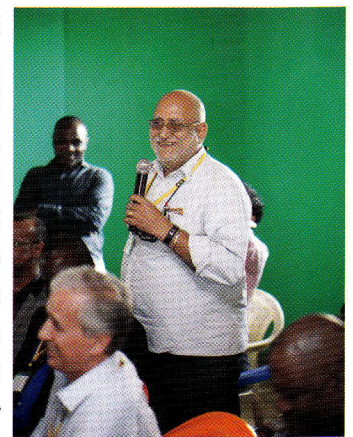
Group Photo of the participants.



the fertility transition. This requires promoting mortality transition by improving people's health through measures to combat communicable diseases and expanding primary health care and promoting fertility transition by making comparable efforts to ensure universal access to Reproductive Health (RH) services, as crucial components of Universal Health Coverage (UHC).

2. Having zero unwanted pregnancies is essential for fertility transition, which requires achieving universal access to RH services. We urge fellow Parliamentarians to legislate measures that are needed in their countries and to allocate funding to this end. We also urge the international community to reinforce support in this area.
3. In addition to further improvement in primary education, boys and girls should be given age appropriate comprehensive sexuality education, at the right time, based on accurate medical knowledge so that they can make responsible choices.
4. To make the increasing population an engine for social and economic development, there should be active investment in youth education and training up to par with the acceptable global standards.
5. To eradicate gender-based violence and ensure respect for human rights of women and girls, eradicate discrimination and other maltreatment, enable women and girls to fulfil their potential to contribute positively to social development, it is imperative to place high priority on investment in youth education particularly for girls.
6. As representatives of the people, Parliamentarians have a role to make known the people's traditional knowledge and wisdom to the government and the international community. Parliamentarians should recognize the importance of traditional foods, such as indigenous crops, and utilize science and technology to improve and enhance its quality and quantity and call attention to the potential of such foods in order to ensure food security for the increasing population.
7. Countries without legislation for reporting Official Development Assistance (ODA) to their Parliaments and also countries without sufficiently clear demarcation between their ODA budget and regular budget should take concrete steps towards achieving best global practices. Such efforts will promote mutual understanding between donor and

recipient countries and improve Transparency, Accountability and Good Governance (TAGG), providing a foundation for further assistance for development. As Parliamentarians, we urge our governments to prioritize SDG 3 and SDG 5 on Health and Gender respectively as well as adopt all international and regional policy instruments which are focused on improving the health and livelihoods of women.



*Mr. Manmohan Sharma sharing his views during the meeting.*

Such global partnership is premised on countries' internal efforts to realize Transparency, Accountability and Good Governance. It is important for Parliamentarians to strengthen their unique role in exercising oversight over their governments to further enhance TAGG in accordance with their respective situations.

Accordingly, to achieve the SDGs, it is essential for Parliamentarians to encourage inter-regional exchange, share information, and take stock of progress on population and development issues. For this purpose, it is important to promote Parliamentarians' activities in which Parliamentary groups in respective countries can actively engage. We urge the Asian Population and Development Association (APDA) and other independent public interest organizations to provide concrete evidence-based proposals in support of the activities of Parliamentarians.



*Participants during the discussion.*



## World Population Day:

### Family planning, migration and India's changing demographics

Falling fertility and ageing populations in developed states will create huge employment gaps that will be filled by migrants from underdeveloped north

All discussions on population growth revolve around the accompanying demographic dividend when the productive population (15 to 64 years old) is larger than the non-working population (under 14 years, 65 years and older) and boost economic growth potential. India is at that crossroad. More than a fourth (27%) of India's population is below 14 years and 64.7% of the population in the ages of 15-59 years, according to the National Health Profile 2018.

The focus on the young demographic and slowing population growth by lowering the total fertility rate (TFR), which is the average number of children a woman has in her lifetime, has taken the attention away from older people, who already constitute more than 10% of the population in Kerala (13.2%), Himachal Pradesh (11.1%), Tamil Nadu (10.5) and Punjab (10.4%). The percentage of older persons 60 years and above is projected to go up from 8.3% in 2016 to 19% in 2050, increasing three-fold from around 100 million to 300 million by 2050, according to UN Population Fund's India Ageing Report 2017.

#### DIVIDED WE FALL

Declining TFR, which fell from 2.7 in 2006 to 2.2 in 2016, has slowed growth but also fuelled a major demographic divide between states. A little more than half the country's population in 24 states have already achieved "replacement" TFR of 2.1 children per women, which is the desired family size when the population stops growing, shows countrywide data from the National Family Health Survey-4. Some states have showed stellar results. Kerala, Punjab and Chandigarh have a TFR of 1.6, which is comparable with western Europe.

But total fertility rate remains above replacement levels of 2.1 in the seven high-focus states, which together make up 44% of India's population. Bihar's average family size is 3.4, which is more than double that of Kerala and Punjab. Uttar Pradesh (2.7), Jharkhand (2.6), Rajasthan (2.4), Madhya Pradesh (2.3), Chhattisgarh (2.2) and Assam (2.2) are the other large and populous states pushing up the nation's average.

This means that even as India achieves replacement TFR of 2.1, its large youth bulge — 47.5% of India's population is 24 years old or less — mostly in the overpopulated Hindi-speaking belt, will continue to increase population that is projected to overtake China's by 2024.

"Around 26 million births annually will continue for some time because of the youth bulge in the high-focus states.

These young people will have children and keep population momentum high for some decades before it tapers off," said Shailaja Chandra, former executive director at National Population Stabilisation Fund and former chief secretary, Delhi. "This is worrying because if women in these states continue to be anaemic, malnourished and not in good health, they will give birth to malnourished children and the cycle of poverty will continue," said Chandra.

#### WINNERS LOSE

States that have delivered results and slowed population growth have expressed concern about losing a young workforce, with southern states protesting the Fifteenth Finance Commission, which lays out the roadmap for revenue sharing between the Centre and states beginning 2020, using 2011 Census of India as the terms of reference, instead of the 1971 census used earlier. This, they argued, will result in states with smaller populations getting a smaller share of national revenue.

"I used to advocate family planning. But now I am asking people to have more kids," Andhra Pradesh chief minister Chandrababu Naidu has said publically more than once. Recognising the validity of the argument, @PMOIndia tweeted on April 12: "The Union Government has suggested to the Finance Commission to consider incentivising states who have worked on population control. Thus, a state like Tamil Nadu, which has devoted a lot of effort, energy and resources towards population control would certainly benefit: PM".

Incentives, however, are not enough to make up the shortfall.

*Excerpts of the article by: Ms. Sanchita Sharma, published in Hindustan Times, New Delhi, July 11, 2018 (complete article is available on <https://www.hindustantimes.com/india-news/family-planning-migration-and-india-s-changing-demographics/story-M305mbXN4UjDOs4QjNn8kK.html>).*



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