

COMPARITIVE ANALYSIS OF MATERNAL HEALTH SITUATION IN RAJASTHAN AND MADHYA PRADESH USING STATE FACT SHEET OF NATIONAL FAMILY HEALTH SURVEY(NFHS) 3 &4.

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Introduction

- Maternal Health refers to women's health from the period of pregnancy, childbirth, and postnatal time.
- Globally 99% of maternal death occur in developing countries, most of the deaths are caused by hemorrhage, sepsis, hypertension, obstructed labour and abortion.
- Maternal Mortality Ratio of India for the year 2016-2018 is 113/100,000 live births(SRS).
- MMR of Rajasthan was 164/100,000 live births, as compared to 173/100,000 live births in Madhya Pradesh.
- India's SDG goal is to reduce MMR to under 70 per thousand live births by 2030

Literature Review:

S.NO.	Author	Title	Methodology	Objective	Key learning
1.	• “Bharat Ranadive • Vishal Diwan • Ayesha De Costa”	“India’s Conditional Cash Transfer Programme (the JSY) to Promote Institutional Birth: Is There an Association between Institutional Birth Proportion and Maternal Mortality?”	Sample Registration Survey of India’s data was analyzed	“Examine the association between (a) service uptake, i.e., institutional birth proportions and (b) health outcome, i.e., MMR.”	“Proportion of institutional births increased from a pre-programme average of 20% to 49% in 5 years” “analysis confirmed that JSY succeeded in raising institutional births significantly.” “This indicates that high institutional birth proportions that JSY has achieved are of themselves inadequate to reduce MMR”

2.	• “Sutapa Agrawal” • “Jasmine Fledderjohann” • “Sukumar Vellakkal” • “David Stuckler”	“Adequately Diversified Dietary Intake and Iron and Folic Acid Supplementation during Pregnancy Is Associated with Reduced Occurrence of Symptoms Suggestive of Pre-Eclampsia or Eclampsia in Indian Women”	“Cross-sectional data from India’s third National Family Health Survey (NFHS-3, 2005-06) was used for this study.”	“The association between adequately diversified dietary intake, iron and folic acid supplementation during pregnancy and symptoms suggestive of Pre-eclampsia or Eclampsia in Indian women.”	“Having a adequately diversified dietary intake and iron and folic acid supplementation in pregnancy was associated with a reduced occurrence of symptoms suggestive of PE or E in Indian women.”
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Research Question:

- What is the maternal health situation of Rajasthan and Madhya Pradesh according to NFHS-3 and NFHS-4?

Objective

- To assess the situation of maternal health in Madhya Pradesh and Rajasthan by using the NFHS-3 and NFHS-4 data

Methodology

- It is a Descriptive type study, which was done for the states of Rajasthan and Madhya Pradesh.
- NFHS 3 and 4 data was analyzed using state fact sheets for the respective states.

Result

Table 1- Percentage distribution of women getting financial assistance under JSY and incurring out of pocket expenditure.

State	NFHS-4
Percentage of Mother's who received financial assistance under JSY for births delivered in an institution	
Madhya Pradesh	61.1
Rajasthan	56.1
Average out of pocket expenditure per delivery in public health facility (Rs)	
Madhya Pradesh	1481
Rajasthan	3052

Table 2- Percentage of women receiving ANC

State	NFHS-3	NFHS-4
Women who received ANC in the first trimester		
Madhya Pradesh	39.3	53
Rajasthan	34	63
Women who had at least 4 ANC visits		
Madhya Pradesh	22.3	35.7
Rajasthan	23.4	38.5
Women who received full ANC package		
Madhya Pradesh	4.7	11.4
Rajasthan	6.3	9.7

Table 3- Percentage of women who are protected against neonatal tetanus and anemia

State	NFHS-3	NFHS-4
Percentage of women whose last birth was protected against neonatal tetanus		
Madhya Pradesh	70.7	89.8
Rajasthan	65.2	89.7
Mothers who consumed iron folic acid for 100 days or more when they were pregnant (%)		
Madhya Pradesh	7.1	23.5
Rajasthan	8.7	17.3

Table 4- Percentage of women who received post-natal care from any health personnel within two days of delivery

State	NFHS-3	NFHS-4
Madhya Pradesh	24.9	54.9
Rajasthan	26.9	63.7

Table 5

State	NFHS-3	NFHS-4
Children born at home who were taken to a health facility for check-up within 24 hours of birth (%)		
Madhya Pradesh	0.2	2.5
Rajasthan	0.1	1.2
Children who received a health check after birth from health personnel within 2 days of birth (%)		
Madhya Pradesh	N/A	17.5
Rajasthan	N/A	22.6

Table 7- Percentage of Delivery Care		
State	NFHS-3	NFHS-4
Percentage of institutional deliveries		
Madhya Pradesh	26.2	80.8
Rajasthan	29.6	84.0
Percentage of institutional births in public facilities		
Madhya Pradesh	18.4	69.4
Rajasthan	19.0	63.5
Percentage of Home delivery conducted by skilled health personnel		
Madhya Pradesh	6.6	2.3
Rajasthan	11.5	3.2
Percentage of births assisted by health personnel		
Madhya Pradesh	32.7	78.0
Rajasthan	41.0	86.6
Births delivered by caesarean section		
Madhya Pradesh	3.5	8.6
Rajasthan	3.8	8.6
Births in a private health facility delivered by caesarean section		
Madhya Pradesh	28.8	40.8
Rajasthan	14.9	23.2
Births in a public health facility delivered by caesarean section		
Madhya Pradesh	6.8	5.8
Rajasthan	11.7	6.1

Discussion:

- The states of Rajasthan and Madhya Pradesh has shown improvement in the maternal health indicators from NFHS 3 to NFHS 4, but the results are not as expected.
- It is mandatory to have at least 4 antenatal check ups during different stages of labour to avoid complications during pregnancy.
- NFHS 4 data clearly shows that the number of institutional deliveries is not acceptable, and the number of home deliveries done by skill birth attendant is extremely poor.

Discussion:

- Caesarean Section deliveries increased from NFHS 3 to NFHS 4 for both the states in private health facility whereas there is a decline in the number of caesarean section deliveries in the public health facilities, could be for the purpose of making money.
- The low utilization of maternal health services in both the states are due certain factors, like religion, education, age at marriage, income and wealth distribution

Conclusion:

- Materna health care in India, specially in BIMARU states needs improvement, a lot of effort is being made and steps are being taken to achieve the set goals, but there is a lot that must be done still.
- There is dire need to strengthen the health system of India.
- The median age of marriage in both Rajasthan and Madhya Pradesh is lower than the median age of marriage in India which means early marriage and early pregnancy which leads to more complications.
- To improve maternal health situation in the states of Rajasthan and Madhya Pradesh there is need to have community participation and stronger political will to improve the maternal health situation in both the states

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Thank you

