

**A COMPARATIVE ANALYSIS OF
MATERNAL HEALTH SITUATION IN 22
STATES AND UNION TERRITORIES:
USING FACTSHEETS OF NATIONAL
HEALTH SURVEY 5 AND 4**

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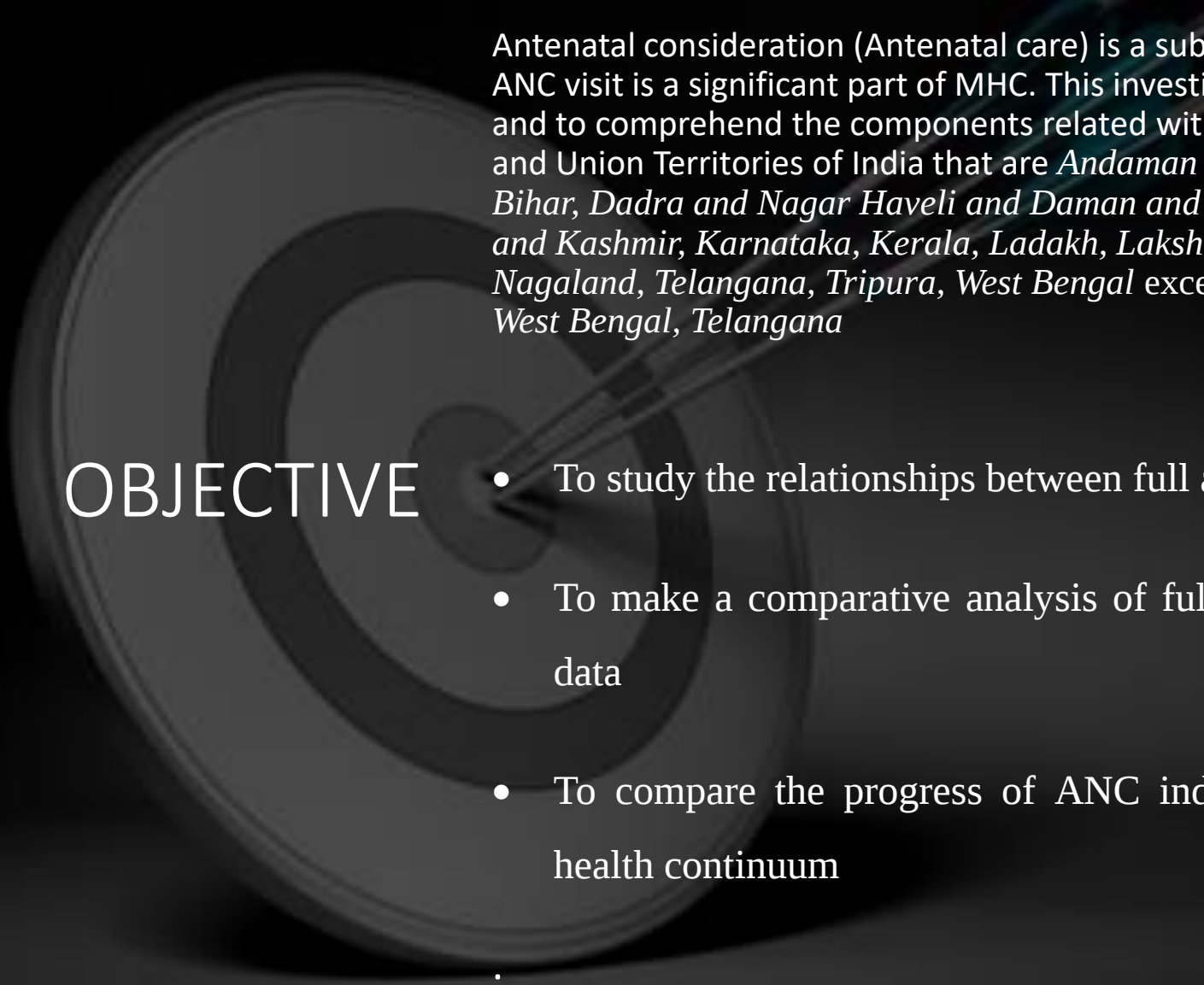
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Introduction

Worldwide, Indian women have less access to maternity healthcare than women in other industrialized or emerging countries, subsequent in deprived health and a high rate of maternal fatalities. This proportionate study focuses on the availability and operation of maternal healthcare facilities for Indian women of reproductive age (15-49) across India's key contributing states. According to evidence from various studies and a few articles on maternal health facilities in India shows that Indian women face numerous challenges and issues in accessing maternal healthcare facilities, primarily through pregnancy, childbirth, post-natal care, and antenatal checkups, representing inequity and little accessibility.



Antenatal consideration (Antenatal care) is a substantial determinant of maternal death and ANC visit is a significant part of MHC. This investigation is done to analyze the utilization of MHC and to comprehend the components related with usage of antenatal care benefits in 22 States and Union Territories of India that are *Andaman and Nicobar Island, Andhra Pradesh, Assam, Bihar, Dadra and Nagar Haveli and Daman and Diu, Goa, Gujrat, Himachal Pradesh, Jammu and Kashmir, Karnataka, Kerala, Ladakh, Lakshadweep, Maharashtra, Manipur, , Mizoram, Nagaland, Telangana, Tripura, West Bengal except Lakshadweep, Sikkim, Meghalaya, Mizoram, West Bengal, Telangana*

OBJECTIVE

- To study the relationships between full antenatal care and Women empowerment.
- To make a comparative analysis of full ANC across states using NFHS 4 and 5 data
- To compare the progress of ANC indicators with other indicators of maternal health continuum

Comparison between Women who had full antenatal check-up in the first trimester as per NFHS-5 and NFHS-4 facts sheet

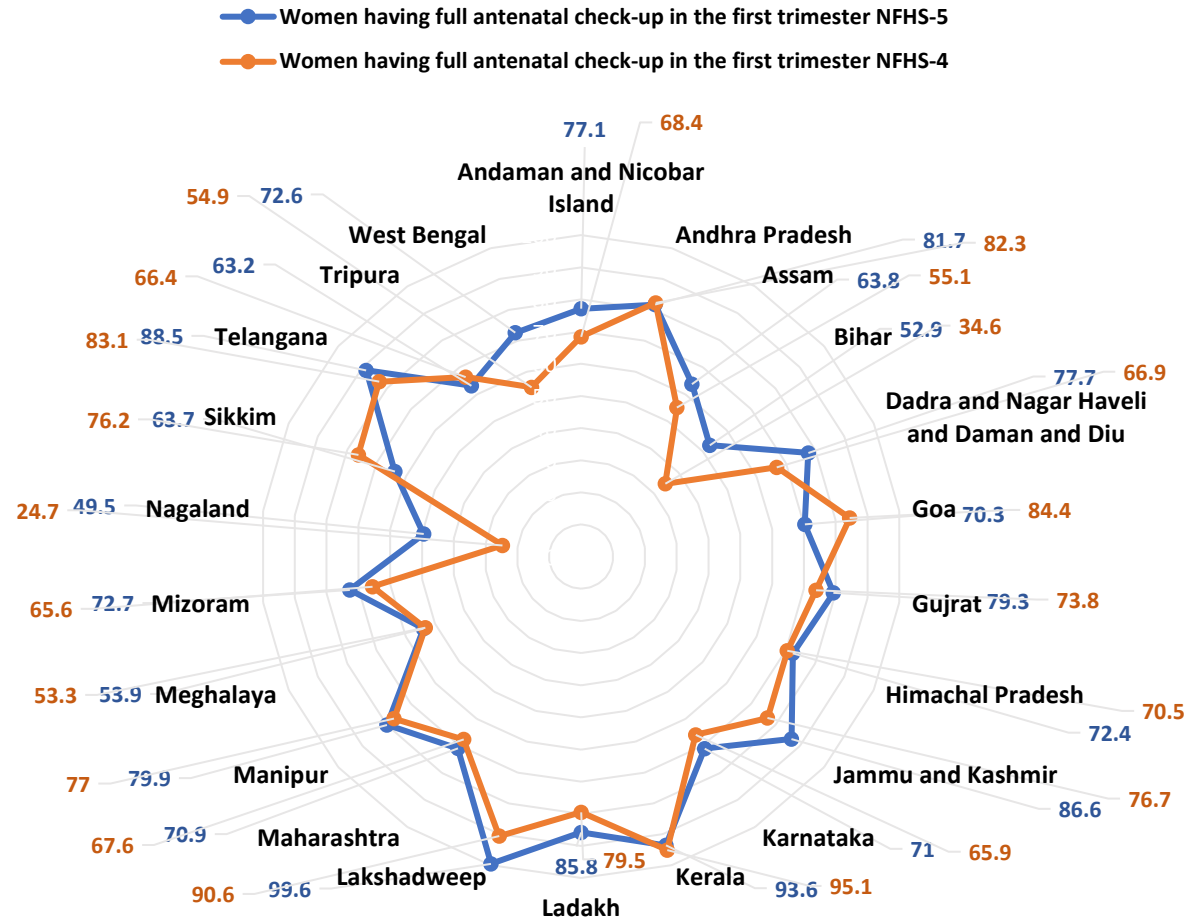
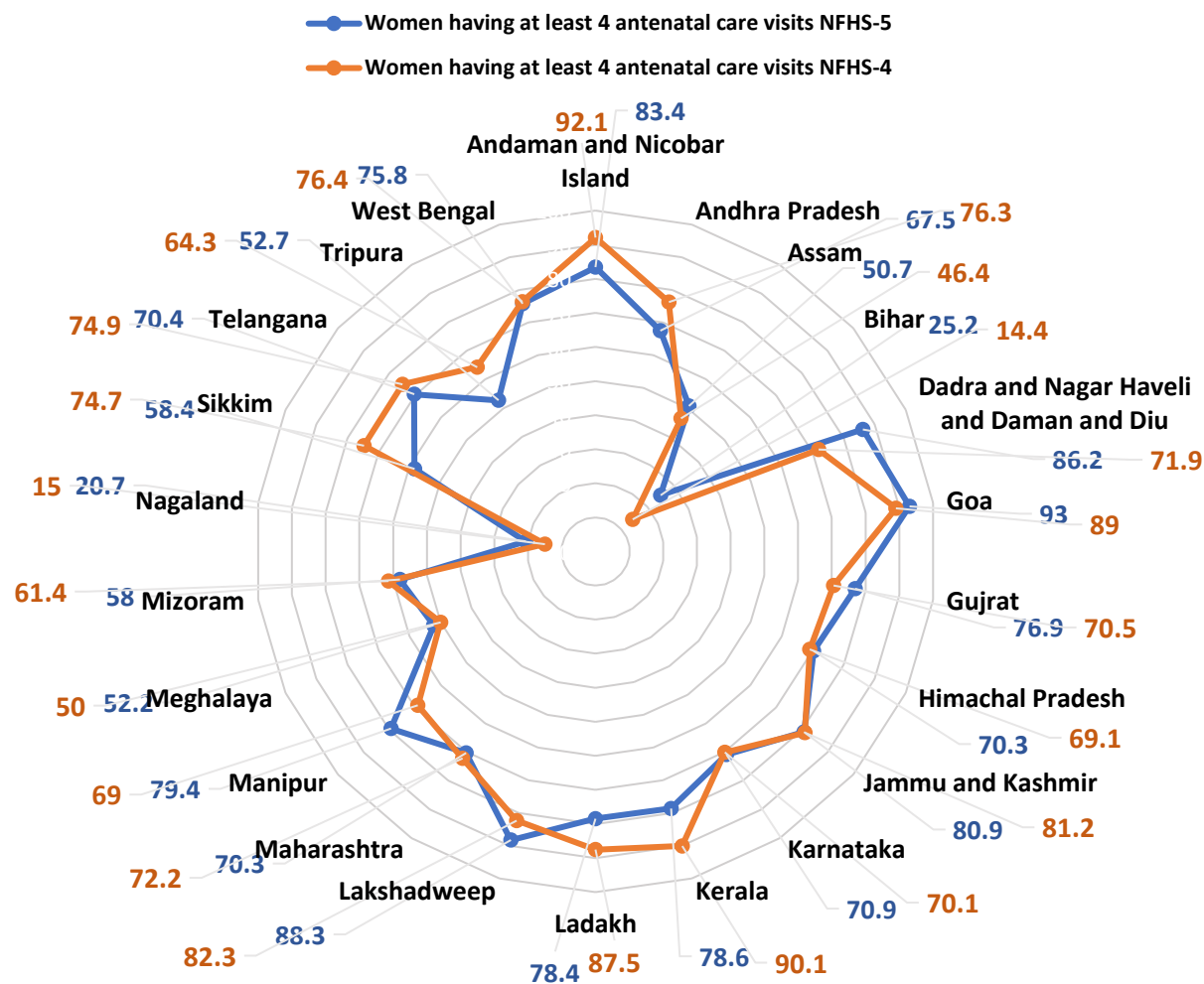


Figure1 shows the percent resource of women who had received ANC facilities. In Nagaland, the proportion of women who had received ANC check-up in their first trimester has bloated to 50 per cent in NFHS-5 from 24.7 per cent in NFHS-4, while that in Sikkim it to 63.7 per cent in NFHS-5 from 76.2 per cent in NFHS-4. The proportion decreased of women receiving at least four ANC visits has diminished in Andaman and Nicobar Island, Andhra Pradesh, Kerala, Ladakh, Maharashtra, Mizoram, Sikkim, Telangana, Tripura from NFHS-4 to NFHS-5, while that in Bihar, Assam, Dadra and Nagar Haveli and Daman and Diu, Goa, Lakshadweep, Manipur, Nagaland had increased from NFHS-4 to NFHS-5.

Figure 1: Women having full antenatal check-up in the first trimester

Comparison between Women having at least 4 antenatal care visits as per NFHS-5 and NFHS-4 facts sheet



In Figure 2: The percentage decreased of women receiving at least four ANC visits has decreased in Andaman and Nicobar Island, Andhra Pradesh, Kerala, Ladakh, Maharashtra, Mizoram, Sikkim, Telangana, Tripura from NFHS-4 to NFHS-5, while that in Bihar, Assam, Dadra and Nagar Haveli and Daman and Diu, Goa, Lakshadweep, Manipur, Nagaland had increased from NFHS-4 to NFHS-5. A lowest of four antenatal visits, one Tetanus Toxoid (TT) injection, and IFA capsules/syrup for at minimum 100 days are measured to be a full ANC package for the pregnancy maintenance

Figure 2: Women who had at least 4 antenatal care visits

Comparison between Percent of women who had their last birth was protected against neonatal tetanus as per NFHS-5 and NFHS-4 facts sheet

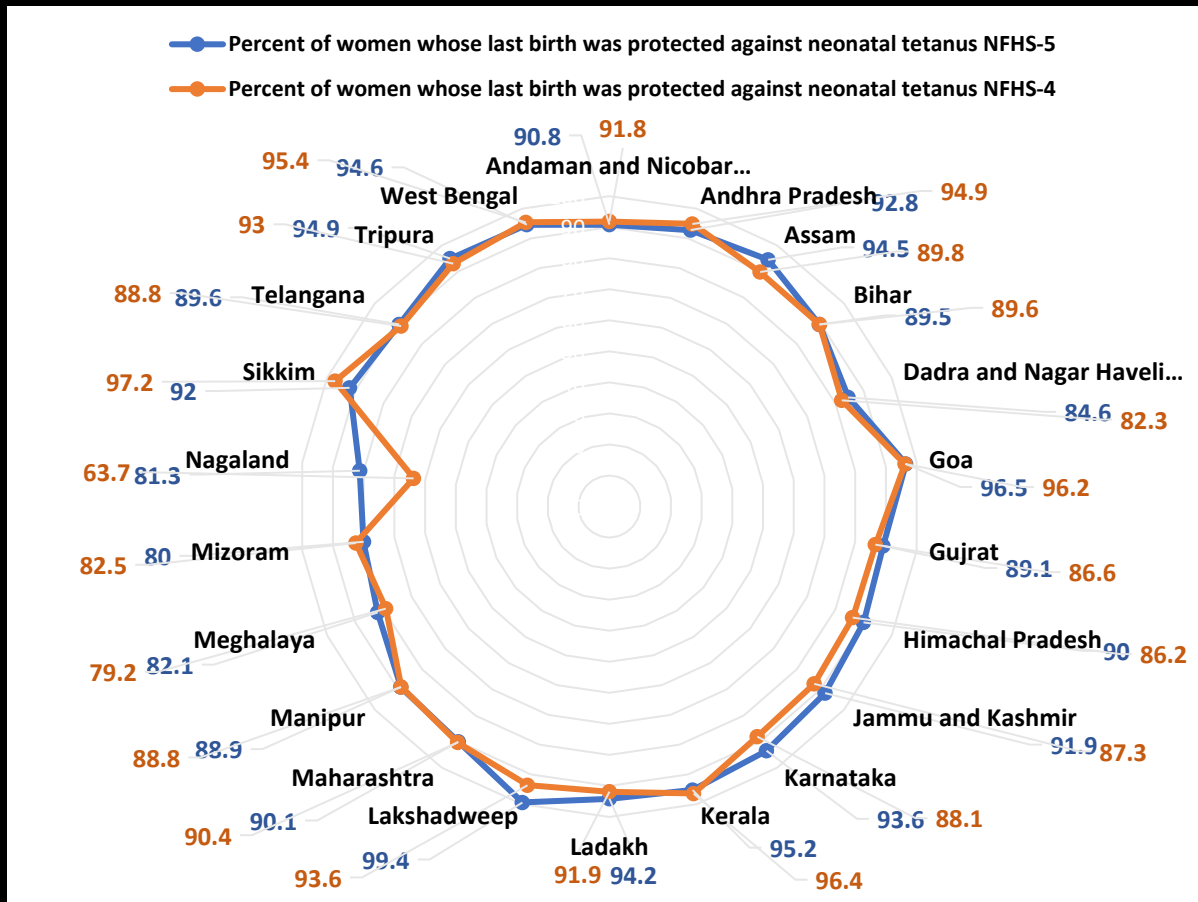


Figure 3 displays the percent of women's distribution who were immunized against neonatal tetanus and given IFA doses for the stoppage of anemia. The women in Nagaland whose last birth was sheltered against neonatal tetanus has increased to 81.3 per cent in NFHS-5 from 63.7 per cent in NFHS-4, while in Sikkim it has been declined to 92 per cent in NFHS-5 from 97.2 in NFHS-4.

Figure 3: Percent of women who had their last birth was protected against neonatal tetanus

Comparison between Percent of women who had taken IFA for one hundred days when they have been pregnant as per NFHS-5 and NFHS-4 facts sheet

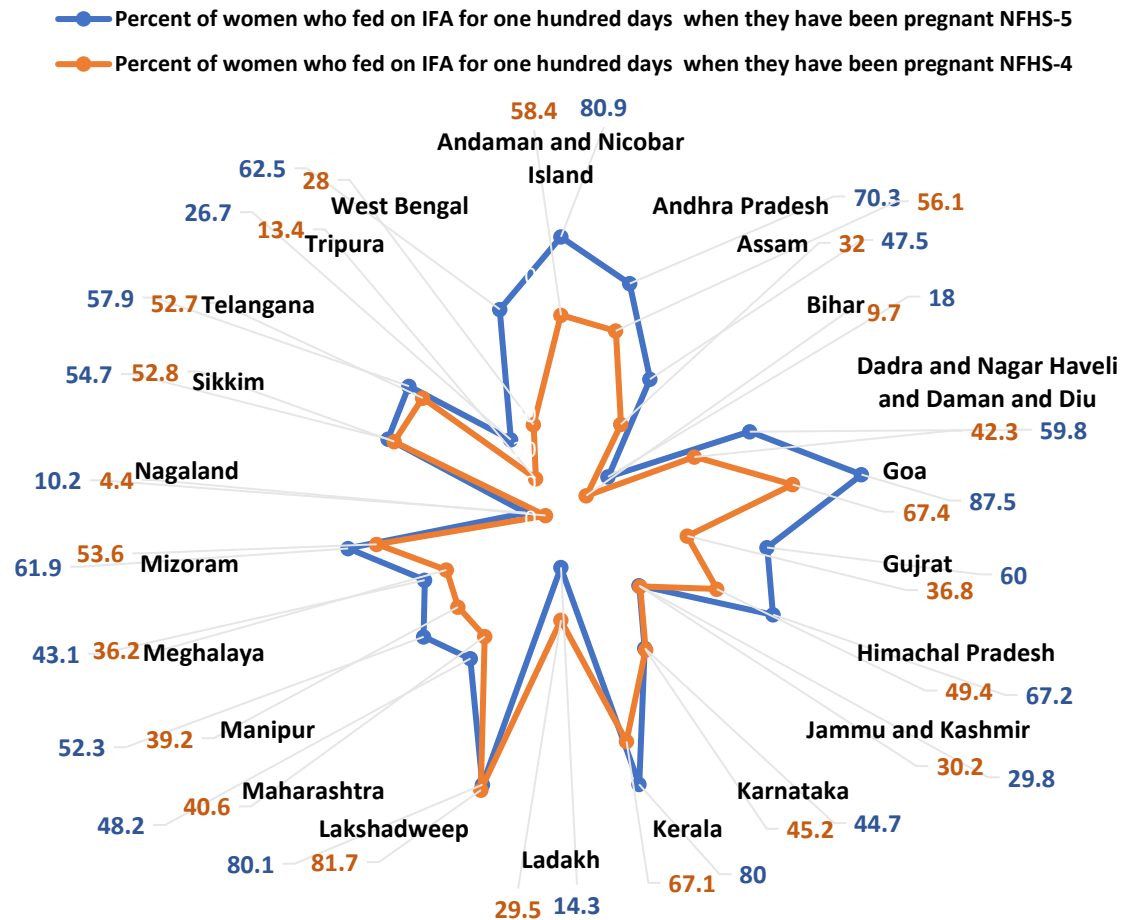


Figure 4 expressions are of percentage of women who nourished on IFA for one hundred days when they have been pregnant in Bihar and West Bengal has increased to 18 per cent and 62.5 per cent in NFHS-5 correspondingly that was folded from 9.7 and 28 per cent respectively in NFHS-5 where as in Ladakh it was reduced to 14.3 from 29.3 per cent in NFHS-5.

Figure 4: Percent of women who had taken IFA for one hundred days when they have been pregnant

Comparison between Percent of women who had taken IFA for one hundred eighty days when they have been pregnant as per NFHS-5 and NFHS-4 facts sheet

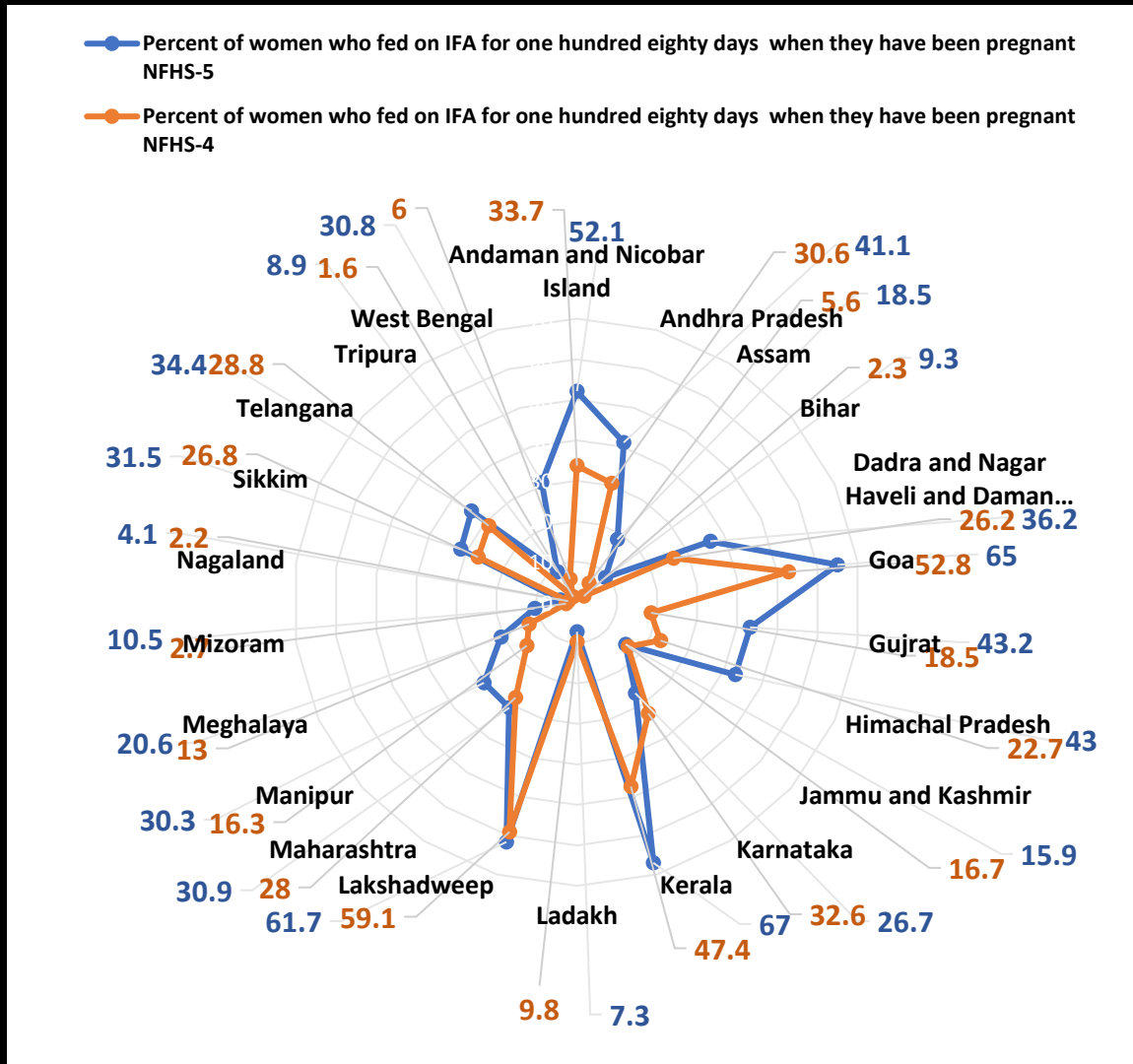
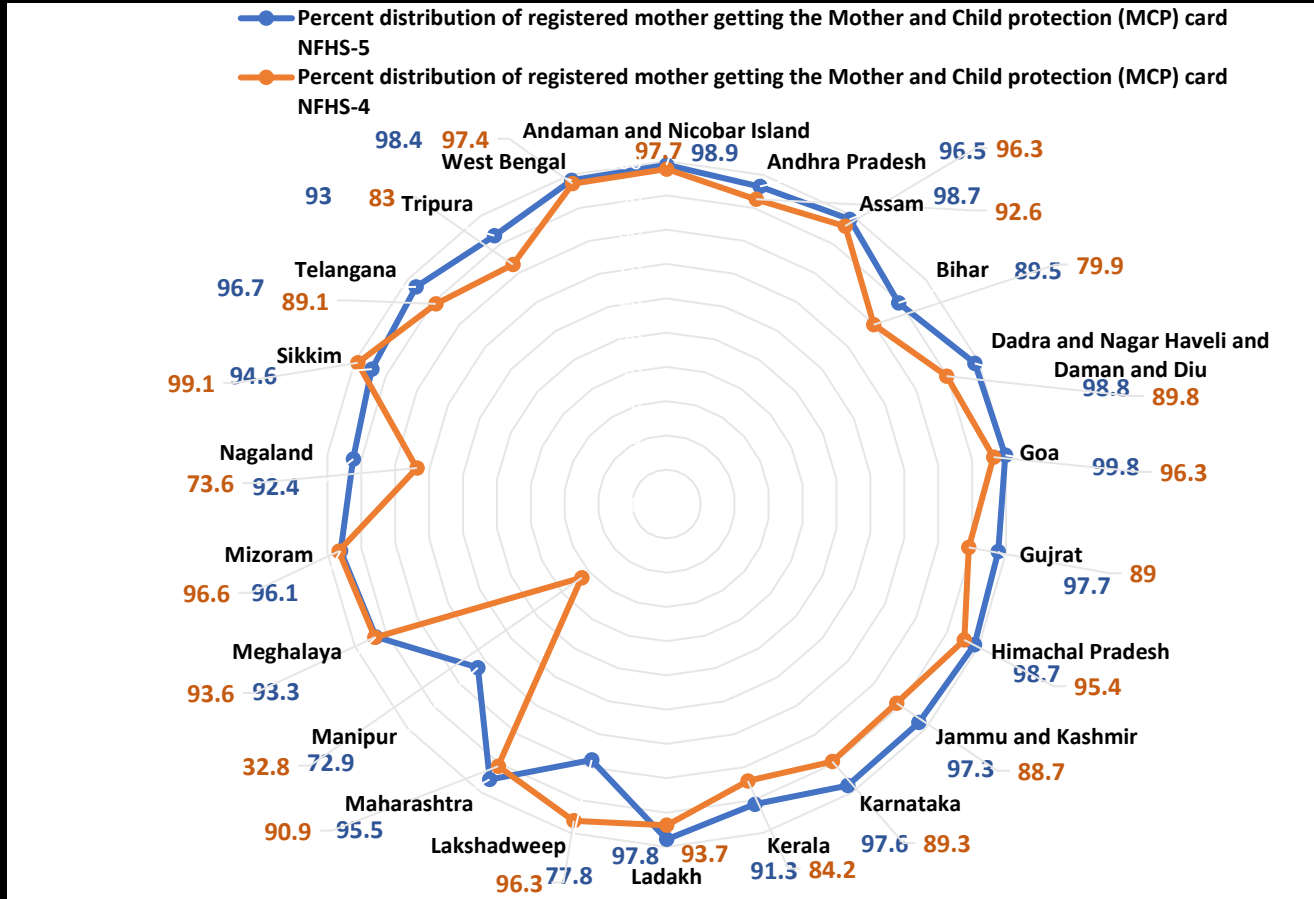


Figure 5 shows Percentage of women who had taken IFA for one hundred days when they have been pregnant in West Bengal has increased to 30 per cent in NFHS-5 that was 6 times higher than from NFHS-4 where as in Jammu and Kashmir and Karnataka it was decreased to 15.9 and 26.7 per cent from 16.7 and 32.6 per cent in NFHS-4 respectively.

Figure 5: Percent of women had taken IFA for one hundred eighty days when they have been pregnant

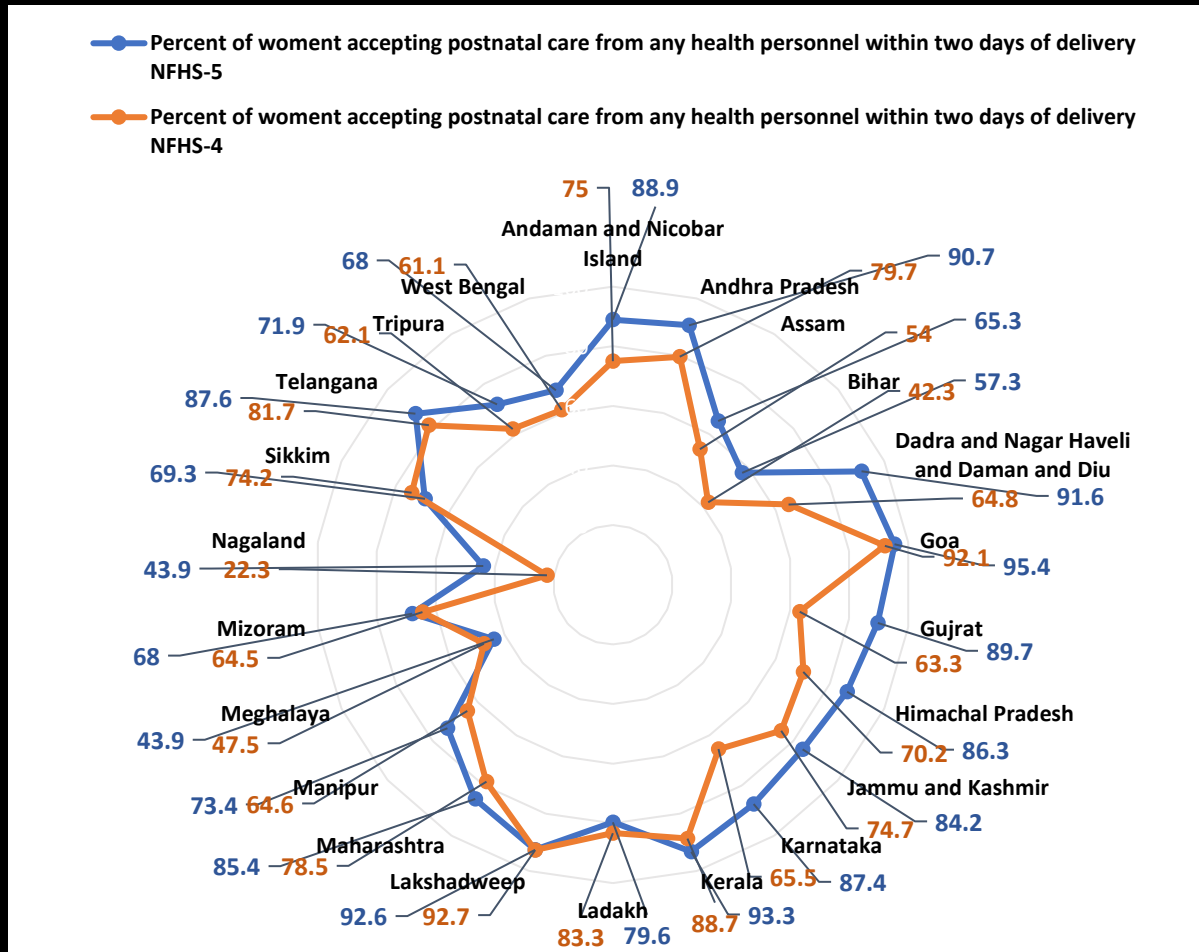
Comparison between Percent distribution of registered mother getting the mother and Child protection (MCP) card as per NFHS-5 and NFHS-4 facts sheet



The Mother and Child Protection (MCP) card is chiefly envisioned for more rigorous nursing of maternal health. As a result, assessing the utilization of the MCP card in NFHS-4 data would assess record custody and care compliance. In Manipur it has amplified to 72.9 per cent in NFHS-5 from 32.8 per cent in NFHS-4 whereas in Lakshadweep it has lessened to 77.8 per cent in NFHS-4 from 96.3 per cent in NFHS-5. The data is shown in Figure 6.

Figure 6: Percent distribution of registered mother getting the mother and Child protection (MCP) card

Comparison between Percent of women accepted postnatal care from any health personnel within two days of delivery as per NFHS-5 and NFHS-4 facts sheet



Accepting post-natal care during the first two days after delivery, according to Aspen, reduces maternal sadness and mortality. Figure 7 depicts the percentage of women who receive postnatal care. It shows that the percentage of women accepted postnatal care from any doctors or nurses within two days of delivery is greatest in both NFHS-4 and NFHS-5 in the state of Kerala. Both Kerala and Bihar have reported improvements in postnatal care from doctors or nurses, moving from NFHS-5 to NFHS-4.

Figure 7: Percent of women accepting postnatal care from any health personnel within two days of delivery

Comparison between Percent of new born delivered at home who were taken to health facility for check-up within 24 hours of birth as per NFHS-5 and NFHS-4 facts sheet

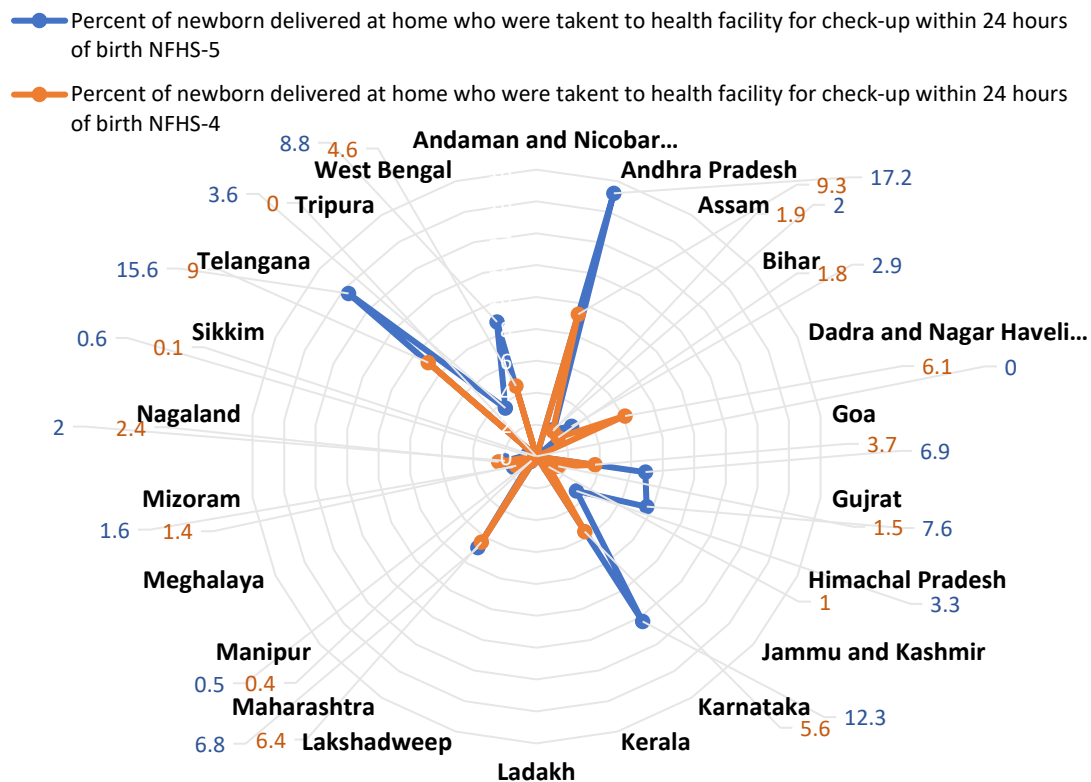
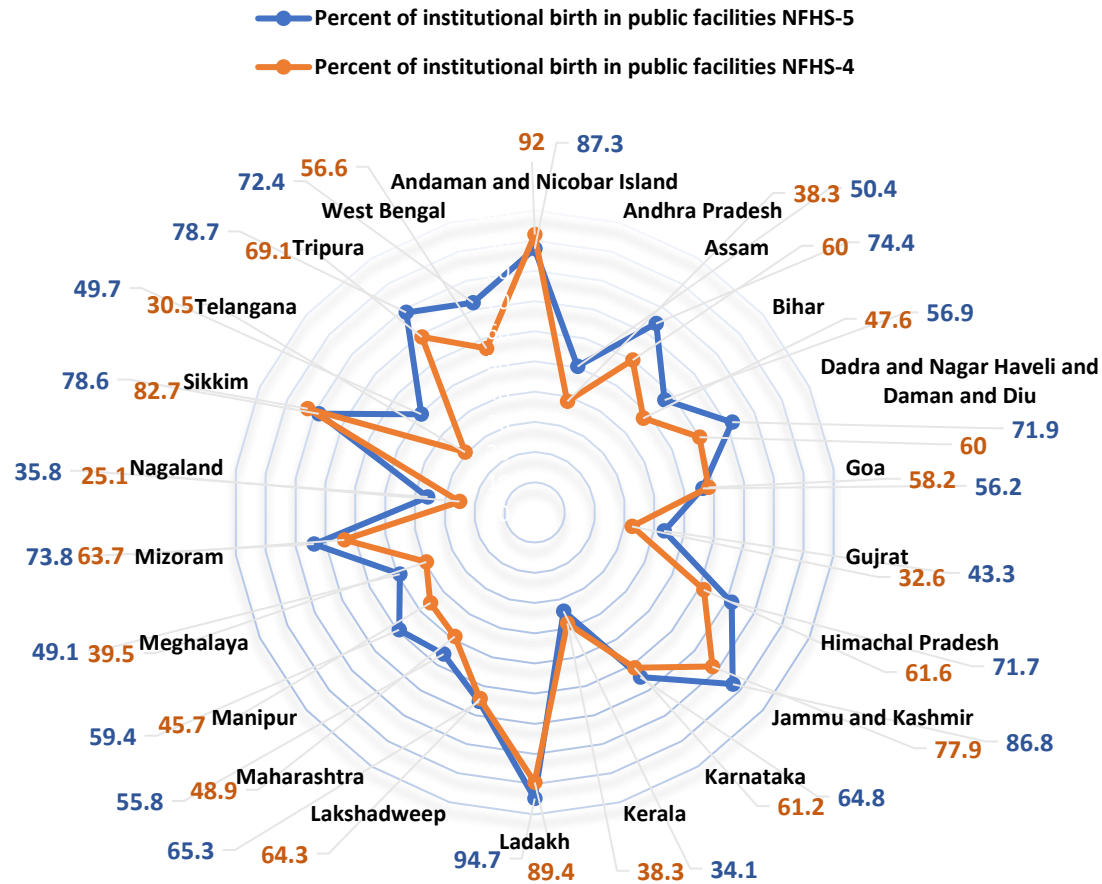


Figure 8 depicts the percentage of newborns who are cared for by trained medical workers. In places like Assam and Bihar, only a small percentage of newborns delivered at home were sent to a health center for an examination within 24 hours of birth. The growth is minute within NFHS-4 and NFHS-5 While it per cent doubled in Gujrat from 6.9 per cent in NFHS-5 from 3.7 per cent in NFHS-4 increased twice in Jammu and Kashmir, Telangana, Karnataka and approximately increased 5 times in Himachal Pradesh and in Tripura it improved from 0 per cent to 3.6 as per NFHS-5 as compared to NFHS-4. Within two days of delivery, a healthcare expert gives consideration. The NFHS-5 indicator Percent of new born receiving a health check-up after birth from a healthcare professional within two days of delivery and by skilled health care is a new addition. In Figure 8, you can see a point-by-point pattern.

Figure 8: Percent of new born delivered at home who were taken to health facility for check-up within 24 hours of birth

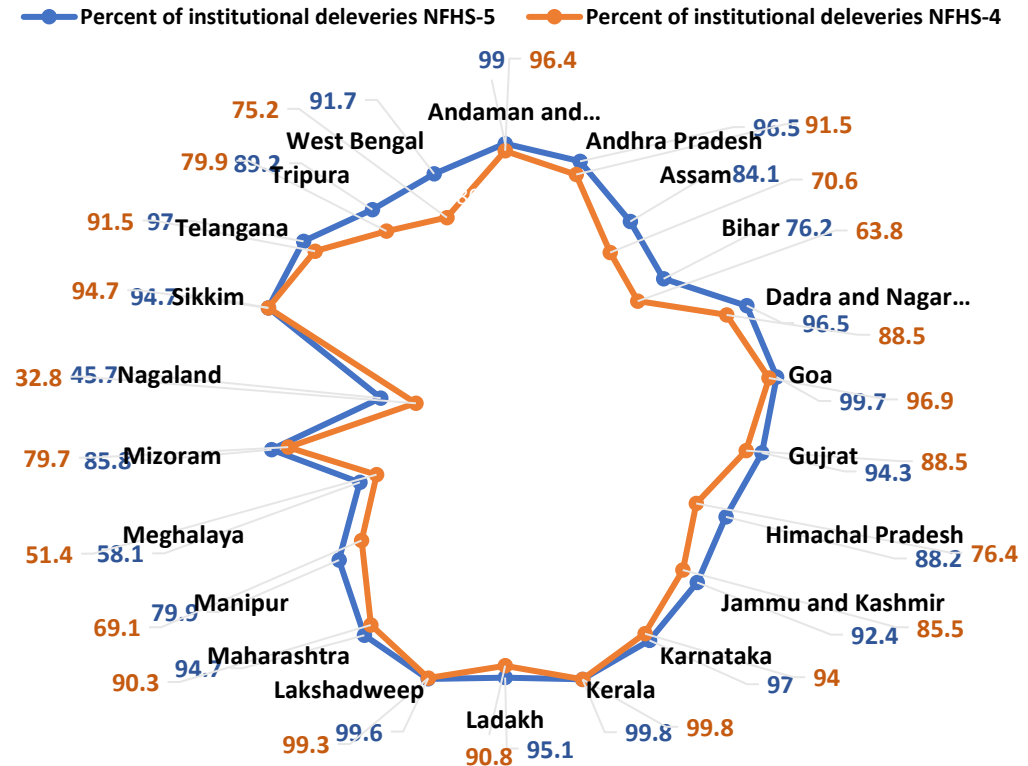
Comparison between Percent of institutional birth in public facilities as per NFHS-5 and NFHS-4 facts sheet



The information on per cent of official deliveries in public amenities presented the analogous pattern, in Kerala in both NFHS-4 and NFHS-5 data reports. The percentage of home distributions were wilted in all 22 states and Union Territories.

Figure 9: Percent of institutional birth in public facilities

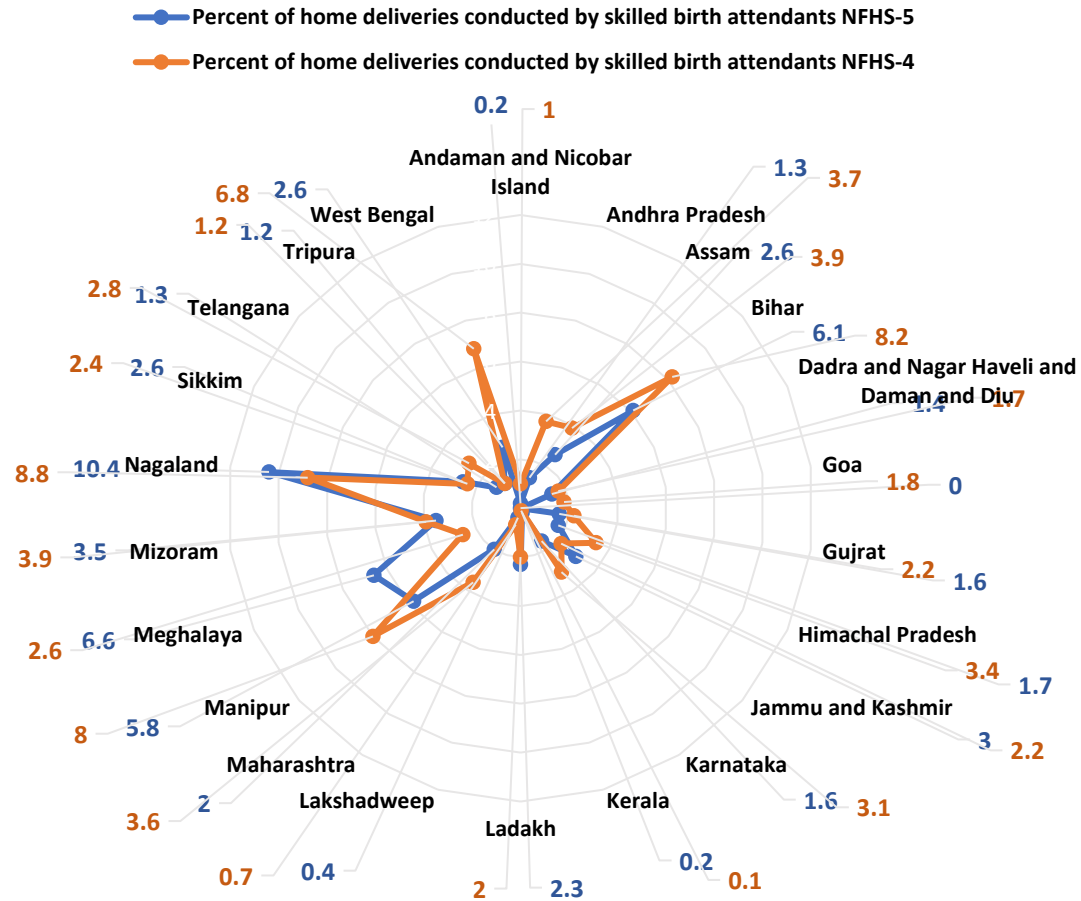
Comparison between Percent of institutional deliveries as per NFHS-5 and NFHS-4 facts sheet



The percent distribution of delivery care is depicted in Figure 9. As noted in NFHS-5, institutional delivery has accelerated significantly in all 22 states and Union territories, in contrast to NFHS-4, which increased during the study period, the NFHS-4 and NFHS-5 data reports that Kerala was ahead in per cent of institutional deliveries among all 22 states and Union territories.

Figure 10: Percent of institutional deliveries

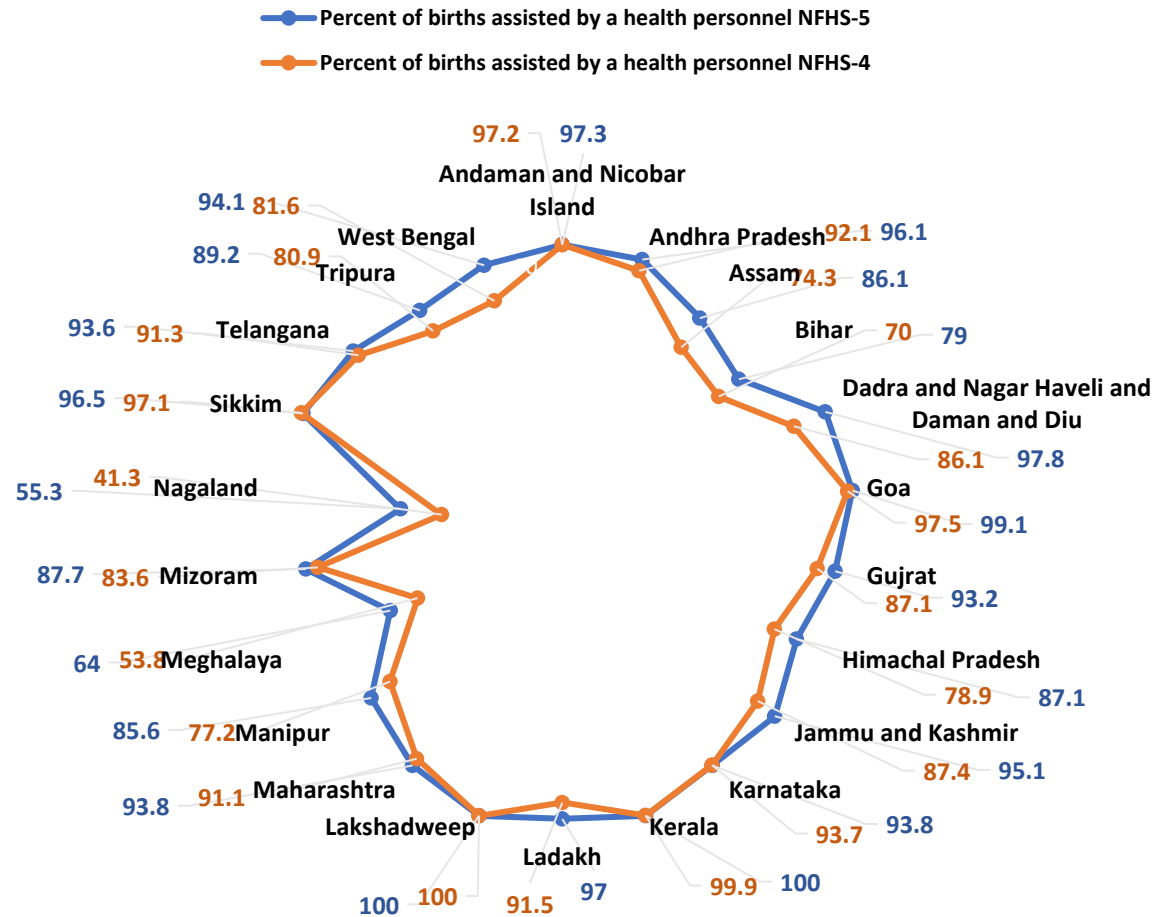
Comparison between Percent of home deliveries conducted by skilled birth attendants as per NFHS-5 and NFHS-4 facts sheet



The percentage of home deliveries conducted by skilled birth attendants decreased in percentage in most of the states in NFHS-5 as compared to NFHS-4.

Figure 9: Percent of home deliveries conducted by skilled birth attendants

Comparison between Percent of births assisted by a health personnel as per NFHS-5 and NFHS-4 facts sheet



The percentage of deliveries assisted by health personnel showed an increase in most of the states in NFHS-5 as compared to NFHS-4.

Figure 11: Percent of births assisted by a health personnel

Comparison between Percent of total caesarean section deliveries as per NFHS-5 and NFHS-4 facts sheet

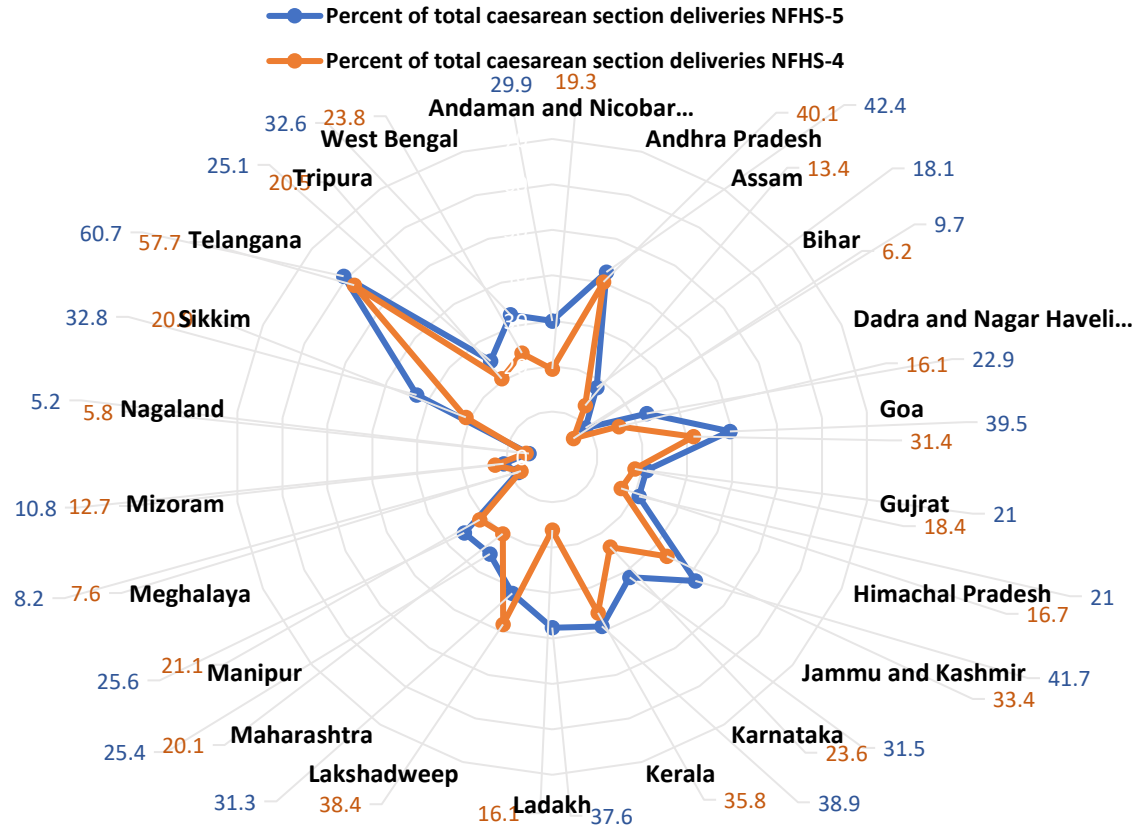


Figure 11: Percent of total caesarean section deliveries

Figure 12: Percent of total caesarean section deliveries

Table 1: Full antenatal care of NFHS-5 and NFHS-4

Full antenatal care NFHS-5 and NFHS-4								
	Women having at least 4 antenatal care visits		Percent of women whose last birth was protected against neonatal tetanus		Percent of women who fed on IFA for one hundred days when they have been pregnant		average (Full antenatal care %)	
	NFHS-5	NFHS-4	NFHS-5	NFHS-4	NFHS-5	NFHS-4	NFHS-5	NFHS-4
Andaman and Nicobar Island	83.4	92.1	90.8	91.8	80.9	58.4	85.03	80.77
Andhra Pradesh	67.5	76.3	92.8	94.9	70.3	56.1	76.87	75.77
Assam	50.7	46.4	94.5	89.8	47.5	32	64.23	56.07
Bihar	25.2	14.4	89.5	89.6	18	9.7	44.23	37.9
Dadra and Nagar Haveli and Daman and Diu	86.2	71.9	84.6	82.3	59.8	42.3	76.87	65.5
Goa	93	89	96.5	96.2	87.5	67.4	92.33	84.2
Gujrat	76.9	70.5	89.1	86.6	60	36.8	75.33	64.63
Himachal Pradesh	70.3	69.1	90	86.2	67.2	49.4	75.83	68.23
Jammu and Kashmir	80.9	81.2	91.9	87.3	29.8	30.2	67.53	66.23
Karnataka	70.9	70.1	93.6	88.1	44.7	45.2	69.73	67.8
Kerala	78.6	90.1	95.2	96.4	80	67.1	84.6	84.53
Ladakh	78.4	87.5	94.2	91.9	14.3	29.5	62.3	69.63
Lakshadweep	88.3	82.3	99.4	93.6	80.1	81.7	89.27	85.87
Maharashtra	70.3	72.2	90.1	90.4	48.2	40.6	69.53	67.73
Manipur	79.4	69	88.9	88.8	52.3	39.2	73.53	65.67
Meghalaya	52.2	50	82.1	79.2	43.1	36.2	59.13	55.13
Mizoram	58	61.4	80	82.5	61.9	53.6	66.63	65.83
Nagaland	20.7	15	81.3	63.7	10.2	4.4	37.4	27.7
Sikkim	58.4	74.7	92	97.2	54.7	52.8	68.37	74.9
Telangana	70.4	74.9	89.6	88.8	57.9	52.7	72.63	72.13
Tripura	52.7	64.3	94.9	93	26.7	13.4	58.1	56.9
West Bengal	75.8	76.4	94.6	95.4	62.5	28	77.63	66.6

Below 50% : **Red** . 50-69 :% **Orange** , 70-84% :**yellow** , 85+% : **green**

In Table 1 Average of women having at least 4 antenatal care visits, Percent of women whose last birth was protected against neonatal tetanus, Percent of women who had taken IFA for one hundred days when they were pregnant was taken to take out full antenatal care.

Table 2: Composite data of women empowerment NFHS-5

composite data of women empowerment NFHS-5									
States	Women who are literate ⁴ (%)	25%	Currently married women who usually participate in three household decisions ²⁵ (%)	25%	Women having a bank or savings account that they themselves use (%)	25%	Women having a mobile phone that they themselves use (%)	25%	100%
Andaman and Nicobar Island	86	21.5	94.5	23.625	89.2	22.3	80.8	20.2	87.63
Andhra Pradesh	68.6	17.15	84.1	21.025	81.8	20.45	48.9	12.225	70.85
Assam	84.3	21.075	92.1	23.025	78.5	19.625	57.2	14.3	78.03
Bihar	57.8	14.45	86.5	21.625	76.7	19.175	51.4	12.85	68.1
Dadra and Nagar Haveli	93.4	23.35	91.9	22.975	83.6	20.9	60.5	15.125	82.35
Goa	93	23.25	93.1	23.275	88.3	22.075	91.2	22.8	91.4
Gujrat	76.5	19.125	92.2	23.05	70	17.5	48.8	12.2	71.88
Pradesh	91.7	22.925	93.9	23.475	83.1	20.775	79.5	19.875	87.05
Jammu and Kashmir	77.3	19.325	81.6	20.4	84.9	21.225	75.2	18.8	79.75
Karnataka	76.7	19.175	82.7	20.675	88.7	22.175	61.8	15.45	77.48
Kerala	98.3	24.575	94.1	23.525	78.5	19.625	86.6	21.65	89.38
Ladakh	76.8	19.2	80.4	20.1	88.4	22.1	81.2	20.3	81.7
Lakshadweep	96.5	24.125	92.2	23.05	66.9	16.725	84	21	84.9
Maharashtra	84.6	21.15	89.8	22.45	72.8	18.2	54.8	13.7	75.5
Manipur	87.6	21.9	94.8	23.7	74	18.5	72.2	18.05	82.15
Meghalaya	88.2	22.05	92.3	23.075	70.4	17.6	67.5	16.875	79.6
Mizoram	94.4	23.6	98.8	24.7	80.7	20.175	82.3	20.575	89.05
Nagaland	85.8	21.45	99.2	24.8	63.7	15.925	82.5	20.625	82.8
Sikkim	88.9	22.225	89.7	22.425	76.4	19.1	88.6	22.15	85.9
Telangana	66	16.5	87.2	21.8	84.4	21.1	60	15	74.4
Tripura	80.6	20.15	90.9	22.725	76.9	19.225	53.1	13.275	75.38
West Bengal	76.1	19.025	88.9	22.225	76.5	19.125	50.1	12.525	72.9

In Table 2 Proportionate of 25% each were taken of NFHS-5 Women who are literate⁴ (%), Currently married women who usually participate in three household decisions²⁵ (%), Women having a bank or savings account that they themselves use (%), Women having a mobile phone that they themselves use (%) for Composite data of women empowerment NFHS-5.

Table 3: Composite data of women empowerment NFHS-4

composite data of women empowerment NFHS-4									
States	Women who are literate4 (%)	25%	Currently married women who usually participate in three household decisions25 (%)	25%	Women having a bank or savings account that they themselves use (%)	25%	Women having a mobile phone that they themselves use (%)	25%	100%
Andaman and Nicobar Island	84.1	21.025	92.6	23.15	81.8	20.45	66.9	16.725	81.35
Andhra Pradesh	62.9	15.725	79.9	19.975	66.3	16.575	36.2	9.05	61.33
Assam	63	15.75	87.4	21.85	45.4	11.35	46	11.5	60.45
Bihar	37	9.25	75.2	18.8	26.4	6.6	40.9	10.225	44.88
Dadra and Nagar Haveli and Daman and	83.1	20.775	81.5	20.375	46.5	11.625	46	11.5	64.28
Goa	83.6	20.9	93.8	23.45	82.8	20.7	80.9	20.225	85.28
Gujrat	63.8	15.95	85.4	21.35	48.6	12.15	47.9	11.975	61.43
Himachal Pradesh	79.5	19.875	90.8	22.7	68.8	17.2	73.9	18.475	78.25
Jammu and Kashmir	53.9	13.475	84	21	60	15	53.9	13.475	62.95
Karnataka	59.7	14.925	80.4	20.1	59.4	14.85	47.1	11.775	61.65
Kerala	93	23.25	92.1	23.025	70.6	17.65	81.2	20.3	84.23
Ladakh	74	18.5	87.6	21.9	75.9	18.975	71.2	17.8	77.18
Lakshadweep	95.6	23.9	82.1	20.525	74.4	18.6	64.9	16.225	79.25
Maharashtra	70.3	17.575	89.3	22.325	45.3	11.325	45.6	11.4	62.63
Manipur	72.6	18.15	96.2	24.05	34.8	8.7	63.1	15.775	66.68
Meghalaya	69.5	17.375	91.4	22.85	54.4	13.6	64.3	16.075	69.9
Mizoram	94	23.5	96	24	57.1	14.275	77	19.25	81.03
Nagaland	75.2	18.8	97.4	24.35	38.8	9.7	70.4	17.6	70.45
Sikkim	72.3	18.075	95.3	23.825	63.5	15.875	79.8	19.95	77.73
Telangana	65.5	16.375	81	20.25	59.5	14.875	47.4	11.85	63.35
Tripura	68.5	17.125	91.7	22.925	59.2	14.8	43.9	10.975	65.83
West Bengal	58.8	14.7	89.9	22.475	43.5	10.875	41.8	10.45	58.5

In Table 3 Proportionate of 25% each were taken of NFHS-4 Women who are literate4 (%), Currently married women who usually participate in three household decisions25 (%), Women having a bank or savings account that they themselves use (%), Women having a mobile phone that they themselves use (%) for Composite data of women empowerment NFHS-4.

NFHS Correlations																					
		Women Empowerment Composite Index		Women Who had Full ANC during First Trimester		Women Having at least 4 ANC during Pregnancy		Proportion of Women who fed on IFA for 100 days during their pregnancy		Proportion of Institutional Deliveries		Women age 15-24 years who use hygienic methods of protection during their menstrual period		Pregnant women age 15-49 years who are anaemic - NFHS 5		Proportion of ever-married women age 18-49 years who have experienced physical violence during any pregnancy - NFHS 5		Proportion of Women having Full ANC - NFHS 5		Percent of women accepting PNC from any health personnel within two days of delivery	
		NFHS-5	NFHS-4	NFHS-5	NFHS-4	NFHS-5	NFHS-4	NFHS-5	NFHS-4	NFHS-5	NFHS-4	NFHS-5	NFHS-4	NFHS-5	NFHS-4	NFHS-5	NFHS-4	NFHS-5	NFHS-4	NFHS-5	NFHS-4
Women Empowerment Composite Index	Pearson Correlation	1	1	0.192	.465*	0.344	.507**	.428*	.561**	0.1	-.566**	.647**	0.304	-.553**	.794**	-.584**	-.637**	0.398	.536*	0.191	.472*
	Sig. (2-tailed)			0.392	0.029	0.117	0.016	0.047	0.007	0.657	0.006	0.001	0.169	0.008	0.00	0.004	0.001	0.067	0.01	0.396	0.027
Women Who had Full ANC during First Trimester	Pearson Correlation	0.192	.465*	1	1	.786**	.882**	.500*	.785**	.717**	0.064	.533*	.842**	-0.07	.558**	-0.09	-0.17	.711**	.914**	.784**	.939**
	Sig. (2-tailed)	0.392	0.029			0.00	0.00	0.018	0.00	0.00	0.777	0.011	0.00	0.77	0.007	0.696	0.456	0.00	0.00	0.00	0.00
Women Having at least 4 ANC during Pregnancy	Pearson Correlation	0.344	.507**	.786**	.882**	1	1	.664**	.702**	.772**	0.056	.600**	.848**	0.043	.538**	0.031	-0.09	.902**	.934**	.829**	.896**
	Sig. (2-tailed)	0.117	0.016	0.00	0.00			0.001	0.00	0.00	0.804	0.003	0.00	0.848	0.01	0.893	0.683	0.00	0.00	0.00	0.00
Proportion of Women who fed on IFA for 100 days during their pregnancy	Pearson Correlation	.428*	.561**	.500*	.785**	.664**	.702**	1	1	.583**	0.07	.699**	.719**	-0.28	.796**	-0.09	-0.12	.910**	.892**	.634**	.799**
	Sig. (2-tailed)	0.047	0.007	0.018	0.00	0.001	0.00			0.004	0.757	0.00	0.00	0.208	0.00	0.693	0.586	0.00	0.00	0.002	0.00
Proportion of Institutional Deliveries	Pearson Correlation	0.1	-.566**	.717**	0.064	.772**	0.056	.583**	0.07	1	1	.492*	0.191	0.264	-0.19	0.195	.746**	.774**	0.065	.893**	0.088
	Sig. (2-tailed)	0.657	0.006	0.00	0.777	0.00	0.804	0.004	0.757			0.02	0.394	0.235	0.388	0.383	0.00	0.00	0.776	0.00	0.697
Women age 15-24 years who use hygienic methods of protection during their menstrual period	Pearson Correlation	.647**	0.304	.533*	.842**	.600**	.848**	.699**	.719**	.492*	0.191	1	1	-0.41	0.401	-0.11	0.078	.696**	.886**	.603**	.907**
	Sig. (2-tailed)	0.001	0.169	0.011	0.00	0.003	0.00	0.00	0.00	0.02	0.394			0.057	0.064	0.639	0.73	0.00	0.00	0.003	0.00
Pregnant women age 15-49 years who are anaemic	Pearson Correlation	-.553**	.794**	-0.07	.558**	0.043	.538**	-0.28	.796**	0.264	-0.19	-0.41	0.401	1	1	0.376	-0.32	-0.118	.644**	0.072	.542**
	Sig. (2-tailed)	0.008	0.00	0.77	0.007	0.848	0.01	0.208	0.00	0.235	0.388	0.057	0.064			0.085	0.153	0.601	0.001	0.749	0.009
Proportion of ever-married women 18-49 years who have experienced physical violence during any	Pearson Correlation	-.584**	-.637**	-0.09	-0.17	0.031	-0.09	-0.09	-0.12	0.195	.746**	-0.11	0.078	0.376	-0.32	1	1	-0.031	-0.095	0.122	-0.12
	Sig. (2-tailed)	0.004	0.001	0.696	0.456	0.893	0.683	0.693	0.586	0.383	0.00	0.639	0.73	0.085	0.153			0.891	0.674	0.588	0.583
Proportion of Women having Full ANC	Pearson Correlation	0.398	.536*	.711**	.914**	.902**	.934**	.910**	.892**	.774**	0.065	.696**	.886**	-0.12	.644**	-0.03	-0.1	1	1	.815**	.942**
	Sig. (2-tailed)	0.067	0.01	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.776	0.00	0.00	0.601	0.001	0.891	0.674			0.00	0.00
Percent of women accepting PNC from any health personnel within two days of delivery	Pearson Correlation	0.191	.472*	.784**	.939**	.829**	.896**	.634**	.799**	.893**	0.088	.603**	.907**	0.072	.542**	0.122	-0.12	.815**	.942**	1	1
	Sig. (2-tailed)	0.396	0.027	0.00	0.00	0.00	0.00	0.002	0.00	0.00	0.697	0.003	0.00	0.749	0.009	0.588	0.583	0.00	0.00		
*. Correlation is significant at the 0.05 level (2-tailed).																					
**. Correlation is significant at the 0.01 level (2-tailed).																					
Note:			Significant Positive Correlation																		
			Significant Negative Correlation																		

Table 4: Correlation between women empowerment composite index and other maternal health indicators as per NFHS-5 and NFHS-4 facts sheet

Table 4 shows Correlation between women empowerment composite index and other maternal health indicators as per NFHS-5 and NFHS-4 facts sheet where Correlation is significant at or below 0.05 level. Significant Positive correlation is marked with green and Negative correlation with red color

Comparison between full antenatal care and composite data index of women empowerment NFHS-5 and NFHS-4

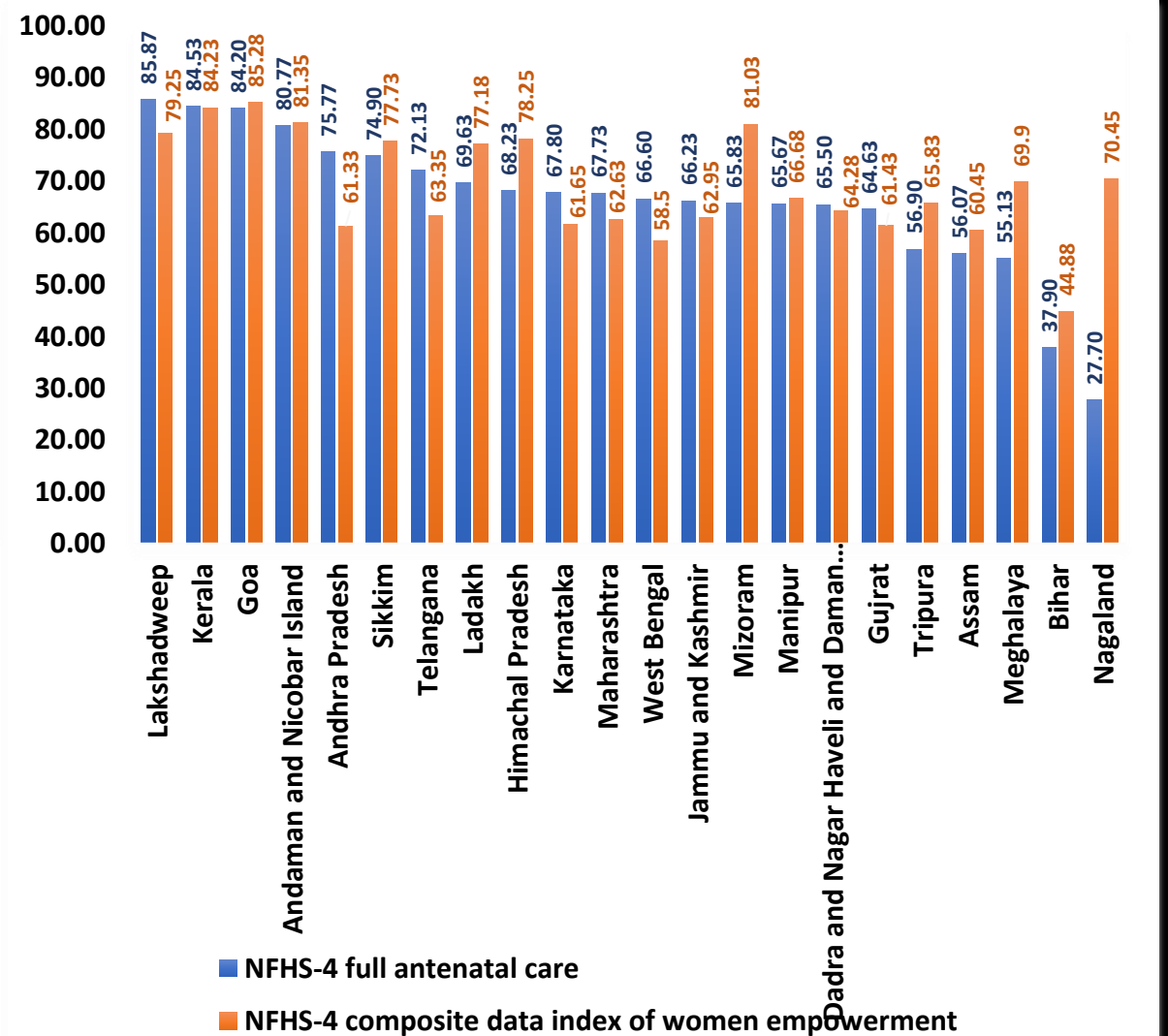
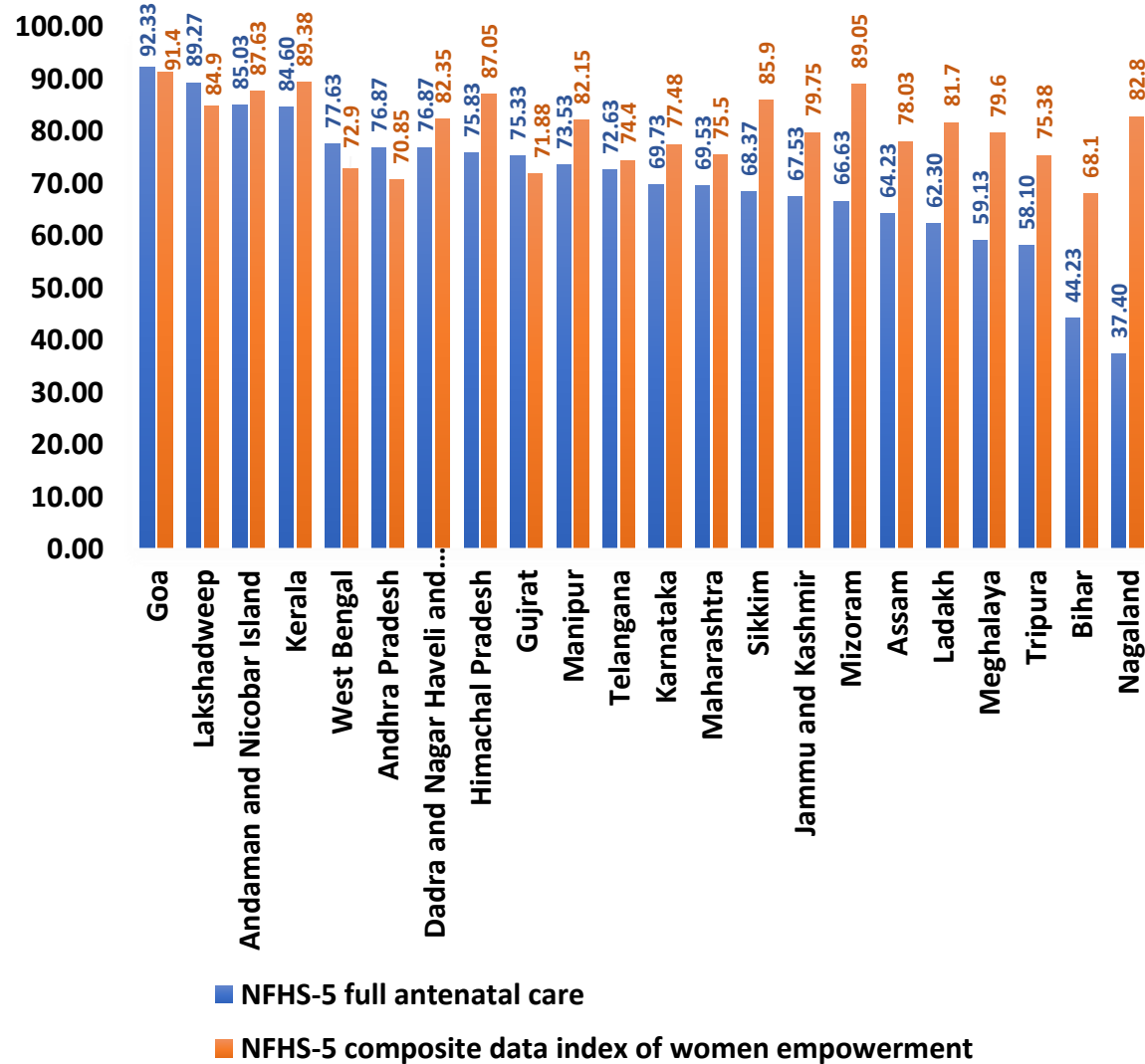


Figure 14: Comparison between full antenatal care and composite data index of women empowerment NFHS-5 and NFHS-4

Comparison between full antenatal care and Percent of Women age 15-24 years who use hygienic methods of protection during their menstrual period26 (%) NFHS-5 and NFHS-4

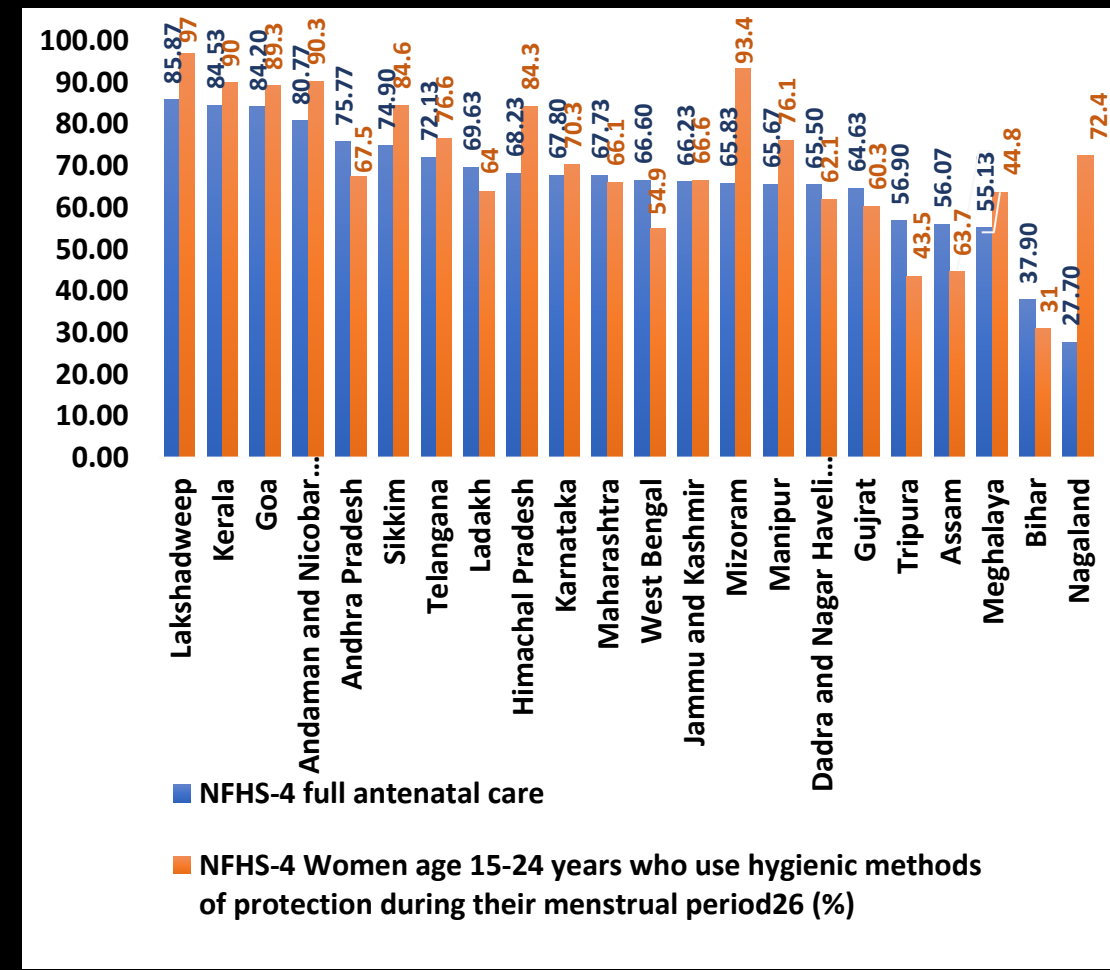
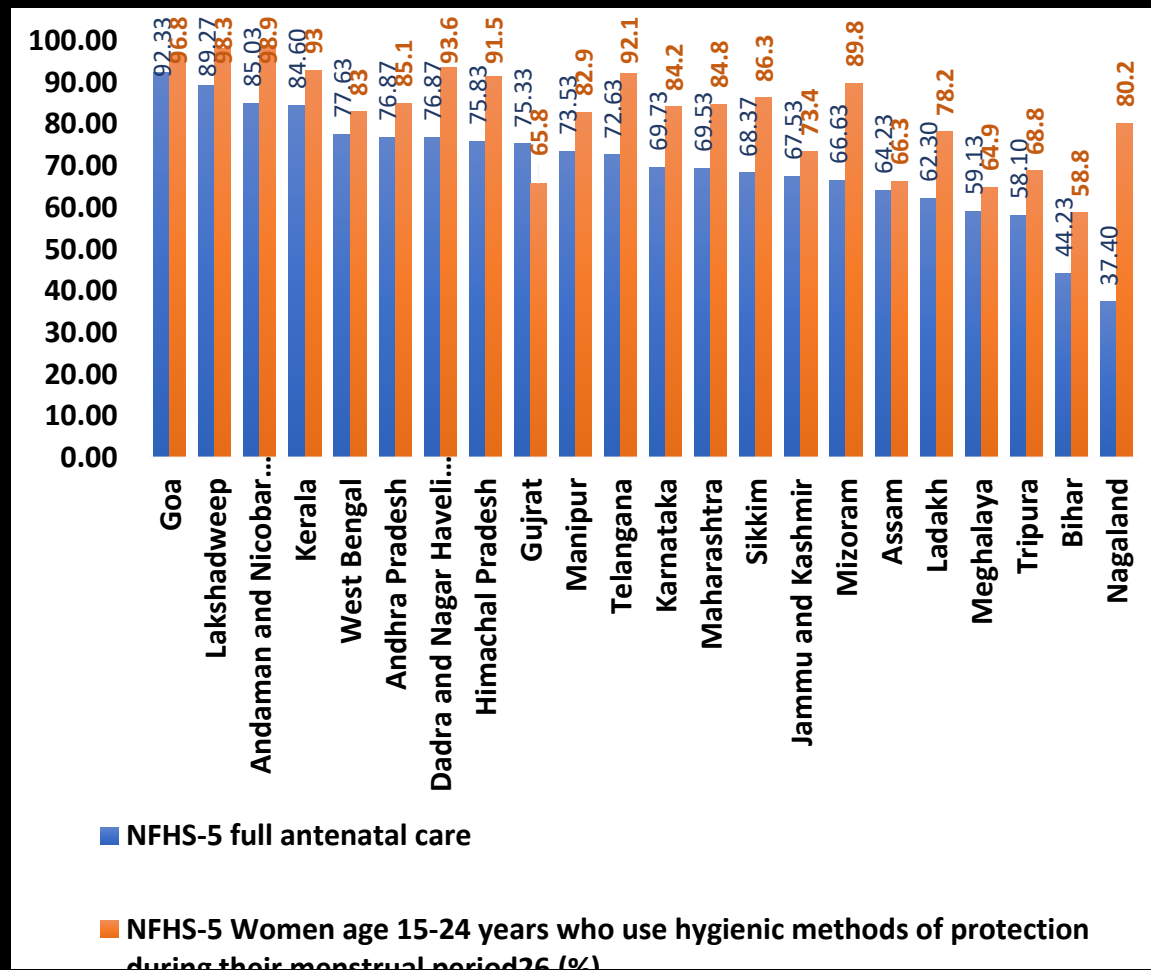


Figure 15: Comparison between full antenatal care and Women age 15-24 years who use hygienic methods of protection during their menstrual period26 (%) NFHS-5 and NFHS

Comparison between full antenatal care and Percent of women accepted postnatal care from any health personnel within two days of delivery NFHS-5 and NFHS-4

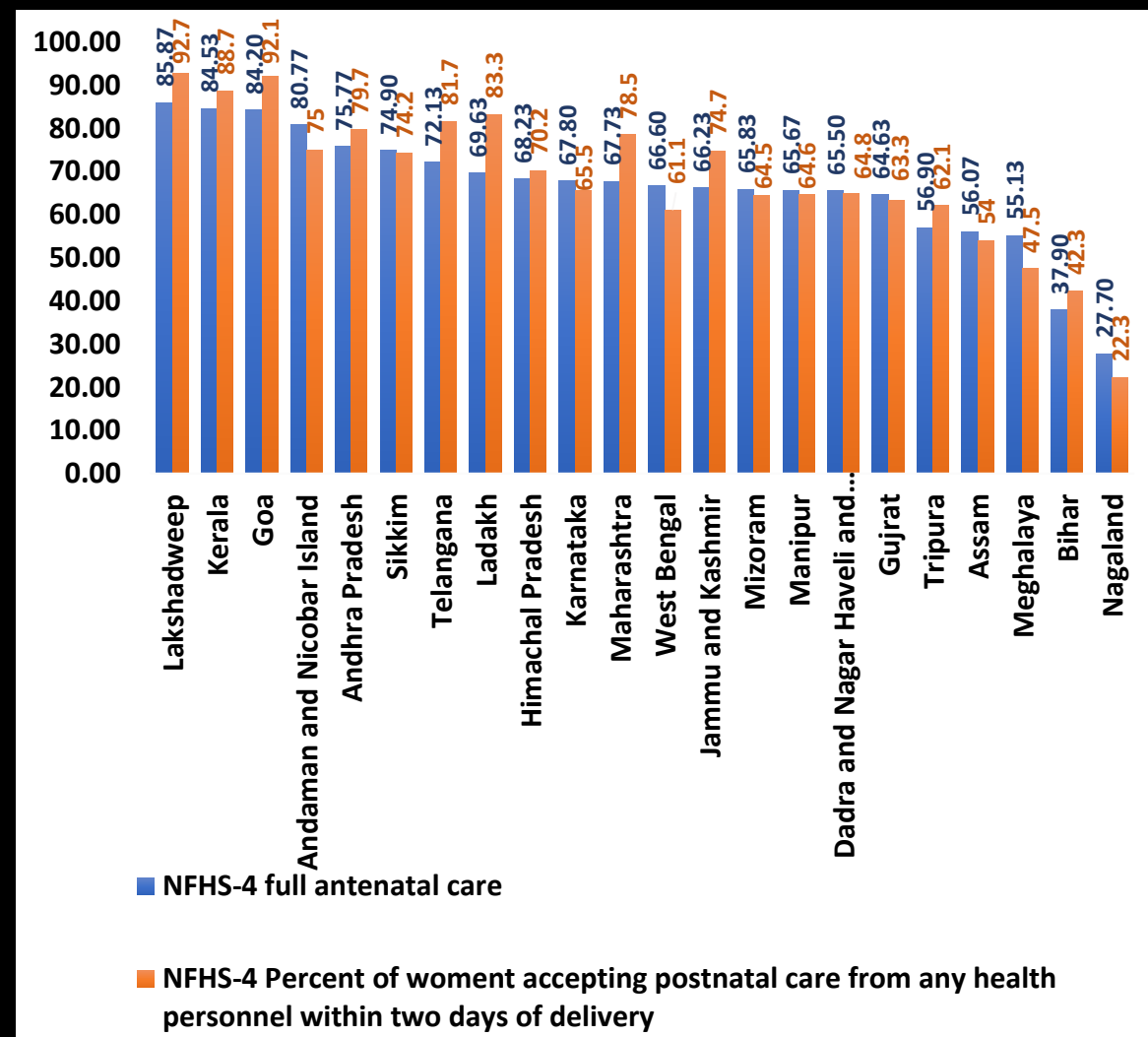
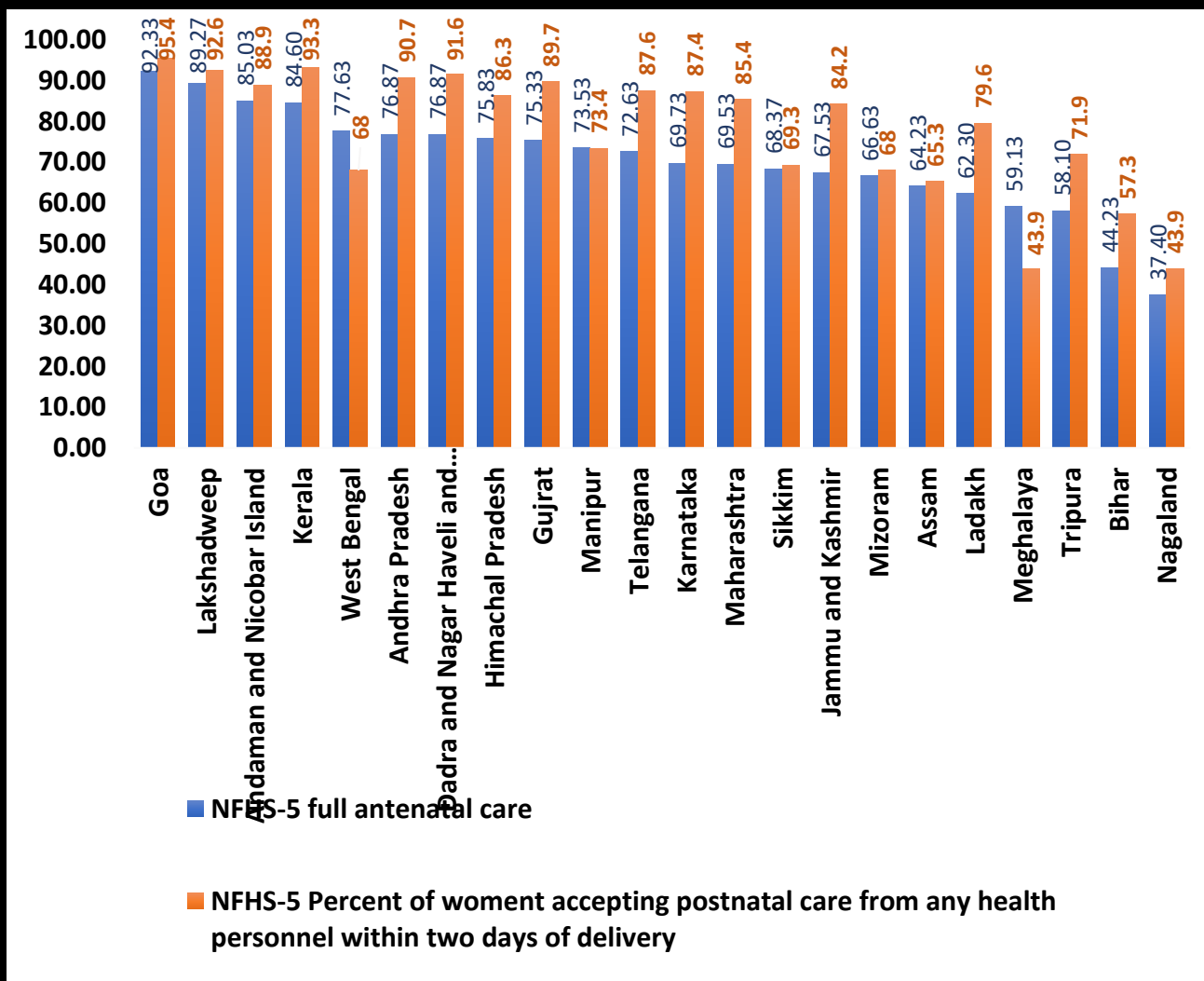


Figure 16: Comparison between full antenatal care and Percent of women accepting postnatal care from any health personnel within two days of delivery NFHS-5 and NFHS-4

Comparison between full antenatal care and Percent of institutional deliveries NFHS-5 and NFHS-4

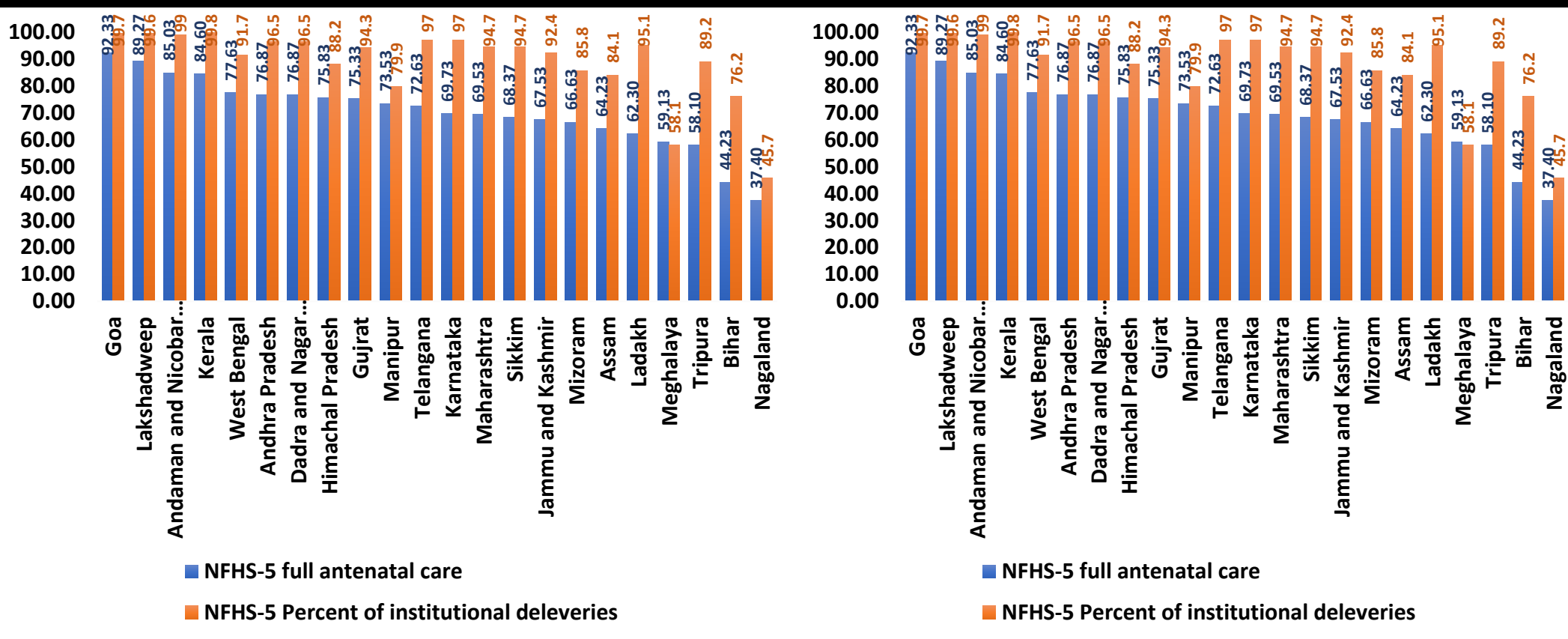


Figure 17: Comparison between full antenatal care and Percent of institutional deliveries NFHS-5 and NFHS-4

Comparison between composite data index of women empowerment and Percent of Women having full antenatal check-up in the first trimester NFHS-5 and NFHS-4

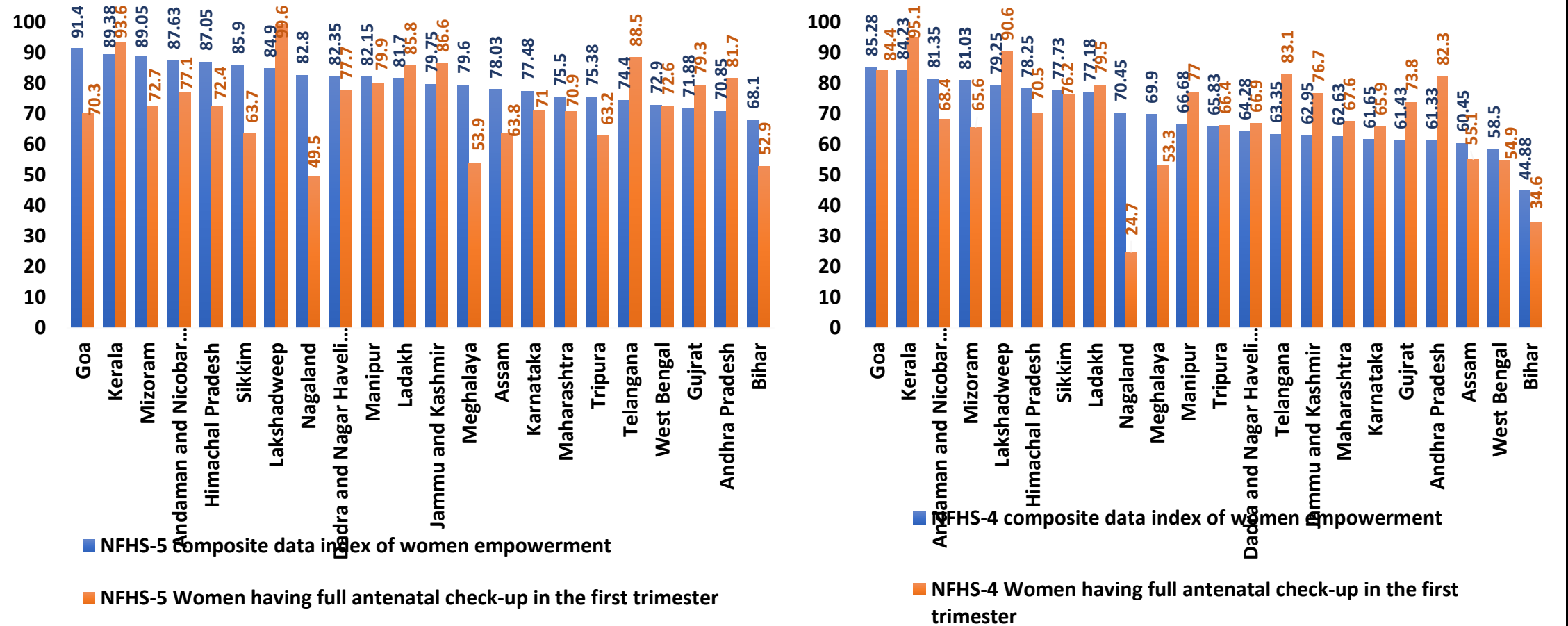


Figure 18: Comparison between composite data index of women empowerment and Percent of Women having full antenatal check-up in the first trimester NFHS-5 and NFHS-4

Comparison between composite data index of women empowerment and Percent of women who had taken IFA for one hundred days when they have been pregnant NFHS-5 and NFHS-4

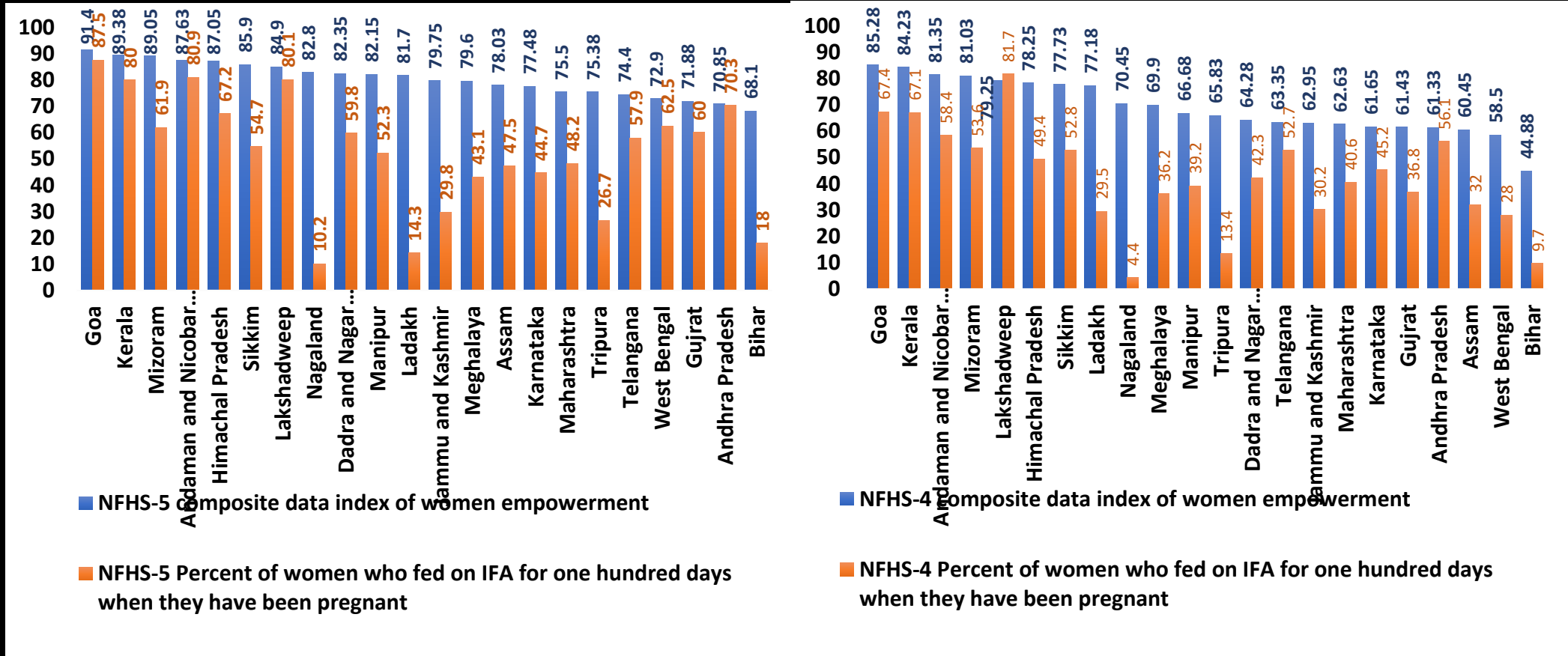


Figure 19: Comparison between composite data index of women empowerment and Percent of women who fed on IFA for one hundred days when they have been pregnant NFHS-5 and NFHS-4

DISCUSSION

- According to NFHS-5 fact sheet, States shown a progressive end in contrast to Union Territories.
- Improvement within the discussed maternal health indicators is significantly important for the event of maternal health situation in any state and Union Territories. Provision of ANC plays a significant role within the maintenance of safe motherhood.
- An accurate and regular ANC are often a guide to an early intervention just in case of any complication in pregnancy. to form sure this, a minimum of 4 ANC checkups are mandatory at different stages of pregnancy. as an example, in many interventions in India for anemia are being implemented at various stages of pregnancy. TT injection and IFA capsules/syrups are supplied usually for the maintenance and wellbeing of pregnancy.
- Comparison between Proportion of Women having Full ANC and composite data index of women empowerment As per Pearson correlation it is positively corelated in NFHS-4 with significance value 0.047 whereas in NFHS-5 significance value is more than 0.05 Which shows when the women empowerment will increase Proportion of Women having Full ANC will increase.
- Comparison between composite data index of women empowerment and Proportion of ever-married women age 18-49 years who have experienced physical violence during any pregnancy As per Pearson correlation it is negatively corelated in NFHS-5 and NFHS-4 with significance value 0.004 and 0.001 respectively Which shows when the women empowerment will increase Proportion of ever-married women age 18-49 years who have experienced physical violence during any pregnancy will decrease.

CONCLUSION

The maternal health situation in all 22 States and Union Territories indicates that there is a requirement of indulging more within the activities related to maternal health. a superb deal of development is required with regard to the maternal health services so on realize the maternal health goals. This progress is required in every level of pregnancy and delivery.

Some important strategies that play a crucial role in improving the maternal health services are health system strengthening, stronger political will and community mobilization. Besides, the standard age of marriage in both the states, which is a smaller amount than the bulk of marriage within the country, is additionally a subject of concern as regards the maternal health services. The age of marrying can affect both the maternal health also because the newborn health, and should also cause premature childbirth which may consequently end in maternal and newborn complications.

Also focusing on women empowerment maternal health indicator can be improved Kerala is the best example for this. This analysis also shows the same that the states where women empowerment index was high has better maternal health indicators.

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NFHS Factsheet-5

http://rchiips.org/nfhs/factsheet_nfhs-4.shtml





“There is nothing as powerful as mother’s love, and nothing as healing as a child’s soul

Thank you