

# Varying IMR across India

### What is the issue?

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 $\bullet$  Despite its rapid GDP growth, India stands at  $49^{\text{th}}$  position out of 225 countries with 40.50 IMR.

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• In India there is a high Intra-State and Inter-State variations in IMR, such variations receives less attention from policymakers.

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### What is IMR?

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- Infant mortality rate compares the number of deaths of infants under one year old in a given year per 1,000 live births in the same year.  $\$
- $\bullet$  This rate is often used as an indicator of the level of health in a country and of the quality of life in a community. \n
- $\bullet$  High infant mortality has been linked to poor maternal health and intergenerational poverty in families. \n

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# What are IMRvariations among states in India?

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- The biggest drivers of neo-natal deaths in India are premature birth, low birth weight, neo-natal infections, asphyxia and trauma.
- After the first month, diarrhoea and pneumonia become the leading causes of death.

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• According to India's Sample Registration System, Goa (8), Pondicherry (10), Kerala (6) and Manipur (9) saw the lowest infant-mortality rates in 2016.

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• While Madhya Pradesh, Assam, Odisha and Uttar Pradesh saw the highest, in that order.

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• Despite Kerala's low infant mortality, the hilly regions of districts like Kasargod have historically lagged behind.

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• Similarly, the Vidarba region of Maharashtra has suffered, while there are differences in eastern and western Uttar Pradesh.

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### What are the reasons for varying IMR across the states?

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• Per-capita spending on health in Indian States was the biggest predictor of infant mortality.

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• For example, tribal communities in Odisha have high rates of malnutrition, a big cause of infant mortality.

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• Southern States like Kerala have an extremely lower IMR because of widespread literacy and urbanisation.

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• The settlements intra state have higher IMR is due to lack of healthcare infrastructure facilities.

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• The willingness of people in rural and tribal areas to access this infrastructure is crucial.

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- $\bullet$  Greater female autonomy, which mean women give birth at a later age and wait longer between births is a significant factor for lower IMR.  $\mbox{\sc h}$
- Even the transport infrastructure of a State can have a role in reducing infant mortality.

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### What can be done?

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• Low birth weight can be prevented if the mother is well-nourished, diarrhoea can be avoided by exclusively breast-feeding the child in the first six months.

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- Merely ensuring that women go to hospitals to deliver their children can prevent asphyxia and trauma.
- The Janani Suraksha Yojana, an initiative under the National Rural Health Mission, which gives women a cash incentive for delivery in hospital, has had a great impact on infant mortality since it began in 2005.
- $\bullet$  Under the National Rural Health Mission (NRHM), pregnant women received better care and newborn immunisations improved.  $\$
- The uptake of the Janani Suraksha Yojana and NRHM needs to be ensured across the states it could address some of the variations inIMR across India.

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**Source: The Hindu** 

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