

NFHS-5 data shows literacy and delivery of services, not religion

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The article is related to
General Studies-Paper-II
(Health)

Indian Express

11 May, 2022

India has achieved the replacement rate for its population. Now, 'unmet need' for family planning tools must be provided for.

The wait is over. The National Family Health Survey (NFHS) 5 report that was awaited for nearly six months is finally out. And it provides a heartening outlook.

The NFHS is a large, multi-round survey that, inter alia, provides information on fertility, infant and child mortality, the practice of family planning, reproductive health, nutrition, anaemia, quality and utilisation of health and family planning services. Started in 1992-93, it has culminated in the fifth round 2019-21.

The surveys provide essential data needed by the Ministry of Health and Family Welfare and other agencies for policy and programme purposes. The Ministry assigned the nodal responsibility for the task to the International Institute for Population Sciences(IIPS), Mumbai. IIPS collaborates with a number of field Organisations to conduct the survey in different states. Several international agencies are involved in providing technical and financial assistance, mainly USAID, DFID, UNICEF, and UNFPA.

The report shows that India has finally achieved the replacement rate of 2.1TFR (Total Fertility Rate is the total number of children a woman will bear in her lifetime). In fact, it has gone below the mark to 2.0. There are, of course, large interstate variations. Several states are well below the replacement level, compensating for the five states that are above the national average of 2.

The lagging states are UP, Bihar, Jharkhand, Manipur and Meghalaya. Significantly, there were four states originally of the Hindi belt which were keeping the figures poor, namely, Bihar, Madhya Pradesh, Rajasthan and Uttar Pradesh, known by their interesting acronym of BIMARU. Two states, Rajasthan and MP, have struggled to get out of this group, while Jharkhand and the two northeastern states have replaced them. UP and Bihar because of their sheer size are pulling down the national average. Their TFR is below the national average of 2 with Bihar at 3, Meghalaya at 2.9, UP at 2.4, Jharkhand at 2.3 and Manipur at 2.2.

Rajasthan and MP have reached the TFR of 2, which shows the success of their efforts. While it is heartening to see a majority of the states and Union Territories having gone much below the replacement rate, these states will start experiencing a decline in their population in a couple of decades.

The figures would have been even better if all those who have been made aware of the benefits of family planning had received the services they desire. Here, it is important to understand the concept of “unmet need”. Making people informed of the need and methods of family planning and motivating them to adopt family planning is difficult enough. The great paradox is that having achieved the difficult task, we are not able to provide the services communities need — the “unmet need” — which is still very high at 9.4 per cent. The “unmet need” of the Muslims continues to be the highest – 11.8 per cent, down from 16.4 per cent five years ago which is a good sign. Compared to Muslims, the unmet need of the Hindus is 9 per cent. If we focus on this issue in a mission mode, the family planning performance will dramatically improve.

Another issue highlighted by the survey is the male attitude towards family planning. They tend to put the onus for birth control on women. As many as 35 per cent men believe that using contraceptives is a woman’s responsibility. They ignore the fact that male vasectomy is a much simpler procedure than female tubectomy. Not to speak of sterilisation, even the use of the simplest contraceptive, namely, the condom, is abysmally low. This calls for a more effective behaviour change communication programme through social marketing.

Another piece of good news is that the momentum of Muslim acceptance of family planning has continued through the five surveys spread over three decades at a rate faster than all other communities. Though birth control practice among Muslims is still the least – 47.4 per cent (up from 45 per cent in NFHS-4). But what is overlooked is the fact that other communities — for example, Hindus — are not far behind with 58 per cent (up from 56 per cent). This scenario must change as one can imagine the impact on population growth when as many as 42 per cent of the 80 per cent of the population are not practising family planning!

It is important to understand the factors that influence fertility behaviour. It is not religion as commonly propounded but literacy, especially of girls, income and delivery of family planning, and health services. Women who have not attended school have 2.8 TFR as against 1.8 for those who have completed class XII. Similar gap of figure one is visible in the context of poverty with the poorest segment having higher TFR than the richest.

Since Muslims are the most backward in all three socio-economic indicators, their backwardness in family planning is understandable but not acceptable. Unfortunately, not much effort is being made to address these issues. Social media is abuzz with videos where Hindu congregations are being administered oath not to do any business with Muslims and cripple them economically by their social and economic boycott. This is likely to be visible in Muslim children being denied admission in many schools run by people influenced by this ideology. The adverse impact of the toxic propaganda on fertility behaviour is easy to imagine.

The time has come to leave politics behind and work together for achieving the goals set by National Population Policy 2000. Instead of misleading narratives, we need to address the real determinants of fertility behaviour – literacy, income generation and improvement of health and family planning services. This will take the country to population stabilisation much sooner than expected.

GS World Team Input

IN THE NEWS

National Family Health Survey-5

Why in news?

- ➔ Recently, the National Family Health Survey-5 has been released by the Union Ministry of Health and Family Welfare.
- ➔ The National Family Health Survey (NFHS) is a large-scale multi-level survey based on a representative sample of households across India.

key highlights

- ➔ According to the National Family Health Survey (NFHS) report, about 35.1 percent of men believe that adopting contraception is "women's job" while 19.6 percent of men believe that women who use contraception can be 'free'.
- ➔ The NFHS-5 survey was conducted in about 6.37 lakh sample houses from 707 districts in 28 states and eight union territories of the country. The survey covered 7,24,115 women and 1,01,839 men.
- ➔ This national report provides data on various grounds, including socio-economic, which can help in policy making and effective program implementation.
- ➔ The report said that Chandigarh has the highest number of 69 per cent men who believe that it is women's job to adopt contraception and men need not worry about it.
- ➔ According to the report, 55.2 percent men said that if the male use condom properly, it does not allow pregnancy in most cases.
- ➔ Among the men surveyed, Sikhs believed that contraception is women's job and men need not worry about it, compared to 35.9 percent among surveyed Hindus and 31.9 percent for Muslims.
- ➔ It said that the use of modern contraceptives increases with income and 50.7 percent of women in the low-income group use it, while it is 58.7 percent in the highest-income group.
- ➔ According to the data, working women are more likely to use modern contraception as 66.3 percent of such women use modern contraceptive method as compared to 53.4 percent in non-working group.

About National Family Health Survey

- ➔ The National Family Health Survey (NFHS) is a survey of various samples collected from Indian households in the context of health and family welfare across India.
- ➔ IIPS has been designated as the nodal agency for this survey by the Ministry of Health and Family Welfare (MOHFW), which is responsible for coordinating and providing technical guidance to the NFHS.
- ➔ The first National Family Health Survey (NFHS-1) was conducted in 1992-93.
- ➔ NFHS The main objective of releasing the CMS in multiple phases is to obtain reliable and comparative data relating to health and family welfare and other emerging issues.

Expected Question (Prelims Exams)

Q. Consider the following statements in the context of National Family Health Survey (NFHS):-

1. The first National Family Health Survey (NFHS-1) was conducted in 1992-93.
2. This survey is released by the Ministry of Health and Family Welfare (MoHFW).

Which of the above statements is/are correct?

- (a) Only 1 (b) Only 2
(c) Both 1 and 2 (d) Neither 1, nor 2

Expected Question (Mains Exams)

Q. What do you understand by 'National Family Health Survey'? Discuss about the concerns highlighted by NFHS 5 on the health status of women in India.

(250 Words)

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Note: - The question of the main examination given for practice is designed keeping in mind the upcoming UPSC main examination. Therefore, to get an answer to this question, you can take the help of this source as well as other sources related to this topic.