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NATIONAL FAMILY HEALTH SURVEY

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GS 2 -HEALTH

NATIONAL FAMILY HEALTH SURVEY (NFHS-5)

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National Family Health Survey (NFHS) is the most important sample survey exercise in India's health sector that provides reliable and comparable data relating to health and family welfare and other emerging issues.

NFHS is released by the **Ministry of Health and Family Welfare (MOHFW)**. But the MOHFW designated the **International Institute for Population Sciences (IIPS), Mumbai**, as the nodal agency. The IIPS is responsible for providing coordination and technical guidance for the survey.

The Survey offers the status of key indicators such as population, reproductive and child health, family welfare, nutrition and others for India.

ABOUT NFHS

- **NFHS** is a multi round sample survey conducted among a sample space of selected households throughout India.
- It has been conducted in India since 1992-93.
- Now five rounds of NFHS have been completed -Previous four rounds of NFHS (1992–93, 1998–99, 2005–06 and 2015–16)
- Every National Family Health Survey (NFHS) has **two specific goals** to fulfil -
 - To provide essential data needed by the Ministry of Health and Family Welfare and other agencies for informed decision-making and policy and programme intervention purposes.
 - To provide insight regarding important emerging health and family welfare issues.

NFHS-5

- The findings of NFHS-5 with respect to 22 States & UTs covered in Phase-I were released in December 2020. Phase – II of the Survey covered the remaining 14 States/UTs. The NFHS-5 survey work has

been conducted in around 6.1 lakh sample households from 707 districts (as of March 2017) of the country.

- NFHS-5 that includes new focal areas such as expanded domains of child immunisation, components of micro-nutrients to children, menstrual hygiene, frequency of alcohol and tobacco use, additional components of non-communicable diseases (NCDs), expanded age ranges for measuring hypertension and diabetes among all, aged 15 years and above, will give requisite input for strengthening existing programmes and evolving new strategies for policy intervention.

NFHS 5-phase 2: KEY FINDINGS

- The Total Fertility Rates (TFR), an average number of children per woman has further declined from 2.2 to 2.0 at the national level and all 14 States/UT's ranging from 1.4 in Chandigarh to 2.4 in Uttar Pradesh. All Phase-II States have achieved replacement level of fertility (2.1) except Madhya Pradesh, Rajasthan, Jharkhand and Uttar Pradesh.
- Overall Contraceptive Prevalence Rate (CPR) has increased substantially from 54% to 67% at all-India level and in almost all Phase-II States/UTs with an exception of Punjab. Use of modern methods of contraceptives has also increased in almost all States/UTs.
- Unmet needs of family Planning have witnessed a significant decline from 13 percent to 9 per cent at all-India level and in most of the Phase-II States/UTs. The unmet need for spacing which remained a major issue in India in the past has come down to less than 10 per cent in all the States except Jharkhand (12%), Arunachal Pradesh (13%) and Uttar Pradesh (13%).
- Full immunisation drive among children aged 12-23 months has recorded substantial improvement from 62 per cent to 76 percent at all-India level. 11 out of 14 States/UTs has more than three-fourth of

children aged 12-23 months with fully immunisation and it is highest (90%) for Odisha.

- On comparing NFHS-4 and NFHS-5 data, the increase in full immunisation coverage is observed to be expeditious in many states and UTs; More than 50 percent of Phase-II States/ UTs are sharing over 10 percentage points during the short span of 4 years. This can be attributed to the flagship initiative of Mission Indradhanush launched by the government since 2015.
- There is an increase from 51 per cent to 58 percent of women receiving the recommended four or more ANC visits by health providers at all-India level.
- Also, all the Phase-II States/UTs have shown improvement except Punjab between 2015-16 to 2019-20.
- Institutional births have increased substantially from 79 per cent to 89 percent at all-India Level. Institutional delivery is 100 percent in Puducherry and Tamil Nadu and more than 90 percent in 7 States/UTs out of 12 Phase II States/UTs.
- Along with an increase in institutional births, there has also been a substantial increase in C-section deliveries in many States/UTs especially in private health facilities.
- Child Nutrition indicators show a slight improvement at all-India level as Stunting has declined from 38 per cent to 36 per cent, wasting from 21 per cent to 19 per cent and underweight from 36 per cent to 32 percent at all-India level. In all phase-II States/UTs the situation has improved in respect of child nutrition but the change is not significant as drastic changes in respect of these indicators are unlikely in a short span period.
- Anaemia among children and women continues to be a cause of concern. More than half of the children and women (including pregnant women) are anemic in all the phase-II States/UTs and all-India level

compared to NFHS4, in spite of substantial increase in the composition of iron folic acid (IFA) tablets by pregnant women for 180 days or more.

- Exclusive breastfeeding to children under age 6 months has shown an improvement in all-India level from 55 percent in 2015-16 to 64 percent in 2019-21. All the phase-II States/UTs are also showing considerable progress.
- Women's empowerment indicators portray considerable improvement at all India levels and across all the phase-II States/UTs. Significant progress has been recorded between NFHS-4 and NFHS-5 in regard to women operating bank accounts from 53 percent to 79 percent at all-India level. For instance, in the case of Madhya Pradesh the increase was to the tune of 37 percentage points from 37 per cent to 75 per cent. More than 70 percent of women in every state and UTs in the second phase have operational bank accounts.

NFHS 5 -Phase 1:KEY FINDINGS

- The Total Fertility Rates (TFR) has further declined since NFHS-4 in almost all the Phase-1 States and UTs. The replacement level of fertility (2.1) has been achieved in 19 out of the 22 States/UTs and only 3 states viz. Manipur (2.2), Meghalaya (2.9) and Bihar (3.0) have TFR above replacement levels now.
- Overall Contraceptive Prevalence Rate (CPR) has increased substantially in most States/UTs and it is the highest in HP and WB (74%). Use of modern methods of contraception has also increased in almost all States/UTs.
- Unmet needs of family planning have witnessed a declining trend in most of the Phase-1 States/UTs. The unmet need for spacing which remained a major issue in India in the past has come down to less than 10 per cent in all the States except Meghalaya and Mizoram.

- Full immunisation drive among children aged 12-23 months has recorded substantial improvement across States/UTs/districts. More than two-third of children are fully immunised in all the States and UTs except Nagaland, Meghalaya and Assam. In almost three-fourths of districts, 70% or more children aged 12-23 months are fully immunised against childhood diseases.
- There is an increase in the percent of women receiving the recommended four or more ANC visits by health providers in many States/UTs. This percentage has increased in 13 States/UTs between 2015-16 to 2019-20.
- Institutional births have increased substantially with over four-fifth of the women delivering in institutions in 19 States and UTs. Institutional delivery is over 90 per cent in 14 out of the total 22 States and UTs. Almost 91% of districts recorded over 70% institutional deliveries of births in the 5 years preceding the survey.
- Along with an increase in institutional births, there has also been a substantial increase in C-section deliveries in many States/UTs especially in private health facilities.
- Sex ratio at birth has remained unchanged or increased in most States/UTs. Majority of the states are in normal sex ratio of 952 or above. SRB is below 900 in Telangana, Himachal Pradesh, Goa, DNH & DD.
- Child nutrition indicators show a mixed pattern across states. While the situation improved in many States/UTs, there has been minor deterioration in others. Drastic changes in respect of stunting and wasting are unlikely in a short period.
- Anaemia among women and children continues to be a cause of concern. More than half of the children and women are anaemic in 13 of the 22 States/UTs. It has also been observed that anaemia among pregnant women has increased in half of the States/UTs compared to

NFHS-4, in spite of substantial increase in the consumption of IFA tablets by pregnant women for 180 days or more.

- For both women and men, there is a lot of variation in the high or very high random blood glucose levels across States/UTs. Men are more likely to have slightly higher blood glucose levels in the range of high or very high compared to women. The percentage of men with high or very high blood glucose is highest in Kerala (27%) followed by Goa (24%). Prevalence of elevated blood pressure (hypertension) among men is somewhat higher than in women.
- The percentage of households with improved sanitation facilities and clean fuel for cooking has increased in almost all the 22 States/UTs over the last four years (from 2015-16 to 2019-20). The Government of India has made concerted efforts to provide toilet facilities to maximum households through Swachh Bharat Mission, and improved household environment through Pradhan Mantri Ujjwala Yojana in the country. For instance, the use of cooking fuel has increased more than 10 percentage points in all the States and UTs during the last 4 years with over 25 percentage point increase in states of Karnataka and Telangana.
- Women's empowerment indicators portray considerable improvement across all the States/UTs included in Phase 1. Considerable progress has been recorded between NFHS-4 and NFHS-5 in regard to women operating bank accounts. For instance, in the case of Bihar the increase was to the tune of 51 percentage points from 26 per cent to 77 per cent. More than 60 per cent of women in every state and UTs in the first phase have operational bank accounts.

NFHS 5 VS NFHS 4

PARAMETERS	NFHS 5(2019-21)	NFHS 4(2015-16)
1. DEMOGRAPHY	<ul style="list-style-type: none"> • Improvement in sexratio, women: men -1020:1000 • Sex ratio at birth- 929 per 1,000. 	<ul style="list-style-type: none"> • Sex ratio was women: men- 991:1000 • Sex ratio at birth- 919 per 1,000
2. TOTAL FERTILITY RATE(TFR)	<ul style="list-style-type: none"> • Declined from 2.2 to 2.0 at the national level. 	<ul style="list-style-type: none"> • TFR was 2.2
3. C-section deliveries	<ul style="list-style-type: none"> • increased 4.3 percentage points over five years to 21.5% Nearly half the total C-section births (49.3%) took place at private health facilities in urban areas. Caesarean births decreased only in Nagaland and Mizoram. 	<ul style="list-style-type: none"> • 17.2%(NFHS-4, 2015-16).

<p>4. Obesity</p>	<ul style="list-style-type: none"> • four per cent increase in obesity in both men and women in the last five years. 	
<p>5. Anaemia</p>	<ul style="list-style-type: none"> • More than half of the children and women (including pregnant women) are anaemic in all the phase-II States/UTs and all-India levels compared to NFHS4. • 57% of women of reproductive age in the country are anaemic. • Assam is among the worst-performing states, with a huge spike in anaemic cases. 	
<p>6. Women gaining autonomy</p>	<ul style="list-style-type: none"> • Women owning house/land increased to 43.3%. 	<ul style="list-style-type: none"> • NFHS 4, 38.4% of women respondents reported owning a house/land alone or jointly

	<ul style="list-style-type: none"> • Women operating bank accounts has increased to 79%. 	<ul style="list-style-type: none"> • Women operating bank account was 53%
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NFHS 5: AN ASSESSMENT

- It shows a remarkable improvement in the condition of women.
 - Women operating bank accounts increased from 53% to 79% between NFHS-4 and NFHS-5. Further, 54% of women have mobile phones against 46% earlier, and 77% used hygienic methods during menstruation against 57% earlier.
 - women respondents reported owning a house/land alone or jointly, this has risen to 43.3% from 38.4% in the previous survey.
- **Fall in TFR rate** signifies success of India's family planning programme, India has contained population explosion.
 - Declined from 2.2 to 2.0 at the national level. Only six States — Bihar, Meghalaya, Manipur, Jharkhand and Uttar Pradesh — have a TFR above two. India is ageing faster than anticipated.
- Regional variation in Demography -
 - **Urban-rural divide:** with the TFR in the former at 1.6 against 2.1 in rural India
 - **North-south divide:** Younger and male-dominated society in the north relative to the south and northeast.
- **Performance of Malnutrition Indicators:** The three indicators of malnutrition- stunting (low height-for-age), wasting (low weight-for-height) and underweight (low weight-for-age), **show an overall improvement.**
 - However, this overall improvement creates an anomaly as in Phase 1 of the NFHS-5, several States revealed a worsening in

one or more of these indicators, whereas in Phase 2, none of the States showed a worsening.

- An increase in **Access to Institutional Health care** especially secondary care-
 - Rise in institutional delivery signifies that secondary healthcare systems – community and district hospitals – are accessible to more people.
 - The data also reveal that most people are choosing private health facilities over public ones.
- **Lifestyle diseases** got importance in this survey-Having measured blood sugar and hypertension in the population for the first time, NFHS-5 highlighted the looming threat from lifestyle diseases.
 - an **increase is witnessed in the proportion of overweight** children, women and men which also reflects malnutrition leading to serious health consequences in the form of non communicable diseases.
- **Provide opportunity for states to improve:** State-level indices provide comparisons and allow States to launch course correction, or to be inspired by success stories in other regions.

NFHS 5: CONCERNS ave fun. Achieve dreams.

- **Demographic data is not reliable:** Demography experts say the NFHS figures do not give an accurate picture of India's sex ratio. They believe that the census figures were more reliable than NFHS because -
 - Smaller sample sizes in the district when compared to Census
 - The survey derived sex ratio based on the number of males and females present in the household on the last night of the survey
 - NFHS counts only certain women, who belong to specific demographic categories

- Phase 2 of NFHS 5 happened during the Covid Pandemic, so migrant workers from Uttar Pradesh, Odisha, Rajasthan and Madhya Pradesh had returned to their home villages.
- The north-south divide in terms of younger and older population might have worrying **electoral and economic implications**. For instance, the 15th Finance Commission used the States' demographic performance as a criterion for devolution.
- There is not much improvement in the condition of women which is evident from the labour force participation of women in the past 12 months, it rose only marginally to 25.4% from 24.6% earlier.
- **Low performing food security and nutrition schemes:** Health insurance coverage has reached merely 41% of households. Further, rising figures of anaemic women and low improvement in children nutrition schemes highlights the low performance of the concerned schemes.
- **No data available for micronutrients:** Lack of adequate nutrition is also measured by micronutrient deficiencies, i.e., lack of vitamins and minerals that are essential for body functions and needed for growth and development. While the NFHS does not have sufficient data.
- **Straight jacket approach in matters of dietary intake:** Indian diets display a rich diversity. Many traditional diets reflect both local climatic conditions as well as a multiplicity of sources of essential nutrients, such as proteins, fats etc. **Imposing an unnatural uniformity will reduce micronutrient diversity and contribute to poor health outcomes.**
- Caesarean births have increased dramatically, **in private health facilities, 47.5% births are by C-section** (14.3% in public health facilities). This unnatural rise in caesareans **call into question unethical practises of private health providers who prioritise monetary gain** over women's health.

- **Limited Male Engagement in Family Planning: Female sterilisation** continues to **dominate as the modern method of contraceptives** in States like Andhra Pradesh (98%), Telangana (93%), Kerala (88%), Karnataka (84%), Bihar (78%) and Maharashtra (77%).

WAY FORWARD

- **An action plan to improve India's health needs** is required **which also needs to be inclusive**, firm in its commitment, and backed by solid resources.
- The NFHS findings are a **reminder of the urgent need to close gaps in girls' education** and **address the pathetic nutritional status** of women and children.
- **Check unethical practises of private health providers:** Nearly half the total C-section births (49.3%) took place at private health facilities in urban areas. These figures are highly unnatural and call into question unethical practises of private health providers who prioritise monetary gain over women's health and control over their bodies.
- **Collaboration in the Health Sector:** Current times require **integrated and coordinated efforts from all health institutions**, academia and other partners directly or indirectly associated with the health care services **to make the basic as well as advanced health services accessible**, affordable and acceptable to all.
- Attitudinal change in society so that along with women men also adopt population control measures including sterilisation.
- Promotion of Diversity in the Indian diet so that it can address micronutrient deficiency to a great extent.
- India needs to quickly ramp up social infrastructure, including health, education, and water to reduce Anaemia and improve other health parameters.

- Both Centre and State governments need to sustain their focus on public health and reduce out-of-pocket expenditure.
- Address the regional disparity in development through a coordinated approach by centre and states.


NFHS 5 is an opportunity for India to restructure and improve its social sector based on reliable data. Action plan to improve India's health needs to be inclusive, firm in its commitment and backed by solid resources. These important indicators on population, health and family welfare, nutrition and others will help track progress of Sustainable Development Goals (SDGs) in the country.




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