

India must build on the decline in maternal mortality

A sharp drop in the maternal mortality rate (MMR) in India from 167 per 100,000 live births in 2011-2013 to 130 in 2014-16 is a positive indication of progress in our otherwise patchy social development indicators. As expected, Kerala has turned in an exemplary performance with its MMR decreasing to 46 from 61 in this period. Tamil Nadu and Andhra Pradesh are a close second and third. The really exceptional news is that the so-called backward states have also done exceptionally well, among them Uttar Pradesh, Bihar, Rajasthan and Orissa. Maharashtra and Punjab have been disappointments with their lacklustre performance. But India still ranks 129 among 184 nations on maternal mortality and 145 among 193 nations on infant mortality.

Much of the credit for the decline in maternal mortality is being given to institutional deliveries. However, there are a host of other factors that contribute to a reduction in maternal mortality in the Indian context. These include female literacy, increased financial outlays towards family welfare programmes and a reduction in poverty. Economic factors play a huge role in institutional deliveries.

Given our shambolic public health system, many people opt for private delivery facilities which cost much more than those in public health ones. So those in a higher economic echelon have greater access to better quality care. A higher socio-economic status also means that the women can avoid unwanted pregnancies through proper contraceptive use apart from access to better food during pregnancy. However, while the decline is good news, India still lags behind many developing countries in maternal health and survival. For a start, women in rural areas especially need transport to medical facilities at the time of delivery. While on paper, this is supposed to be free for government hospitals and clinics, it is rarely available on time, if at all. What India needs to focus on if it wants to continue this positive trend is to push for a greater decline in child marriage and a reduction in teenage pregnancies. Along with this, anaemia among pregnant women must be addressed as it is a major cause of death during childbirth. The fall in maternal deaths is something that can be built on if the government does not take its eye off the ball. Its related benefits can make a real difference in development indicators from infant and child mortality and health to population stabilisation.

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