

## do infant deaths vary between States?

### Why should States track child deaths?

Infant mortality, the number of babies that die before their first birthday for every 1,000 live births, is a powerful indicator of the quality of life in a community. High infant mortality has been linked to poor maternal health and inter-generational poverty in families.

### Why is death rate high in some States?

Across the world, there is a link between government per-capita spending on health and infant mortality. This partly explains why India has historically had one of the highest infant mortality rates, despite its rapid GDP growth, at 1.4% of GDP in 2014. According to the WHO, India's spending lags that of Sub-Saharan Africa. To some extent, public spending also explains variations within the States. A study using data from 1983-84 to 2011-12 showed that per-capita spending on health in Indian States was the biggest predictor of infant mortality, followed by female literacy and urbanisation. Other studies, however, have found smaller impacts of public spending. This is because public health expenditure is only a part of the story, say experts. While it does help in setting up healthcare infrastructure, the willingness of people to access this infrastructure is crucial. On this count, southern States like Kerala and Tamil Nadu outperform, because of widespread literacy. "People here are aware of the danger signs of infant illnesses and seek help promptly," says Ravi Prakash Upadhyay, a public health researcher at Delhi's Centre for Health Research and Development, Society for Applied Studies. Literacy and greater female autonomy in these States, also seen in Manipur, mean women give birth at a later age and wait longer between births. This cuts infant mortality, but isn't affected by public health spending. Even the transport infrastructure of a State can have a role in reducing infant mortality, because the longer people take to reach hospitals when their child is sick, the higher the risk of death. According to the latest numbers from India's Sample Registration System, Goa, Puducherry, Kerala and Manipur saw the lowest infant-mortality rates in 2016, while Madhya Pradesh, Assam, Odisha and Uttar Pradesh saw the highest, in that order. All four leading States have traditionally been high spenders on healthcare. But there are myriad other factors at play, such as demographics. For example, tribal communities in Odisha have high rates of malnutrition, a big cause of infant mortality, says P. Arokiasamy, a health researcher at Mumbai's International Institute of Population Sciences.

### What are the illnesses?

Around two-thirds of infant deaths happen in babies less than four weeks old. A *Lancet* paper published as part of the Million Death Study in 2011 found the biggest drivers of neo-natal deaths in India to be premature birth and low birth weight, neo-natal infections, and asphyxia and trauma. After the first month, diarrhoea and pneumonia become the leading causes of death. While 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. "If the mother resorts to infant formula, the water used to prepare it is often contaminated. This can lead to diarrhoeal deaths," says Dr. Upadhyay.

### What can States do?

Merely ensuring that women go to hospitals to deliver their children can prevent asphyxia and trauma. This is why the Janani Surakhsha 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. There is also evidence that under the National Rural Health

Mission, pregnant women received better care and newborn immunisations improved. But the uptake of the Janani Suraksha Yojana has been varying across States. This could explain some of the variations in infant mortality across India, but research is needed to unearth this link.

### **Do deaths vary within a State?**

Yes. Despite Kerala's low infant mortality, the hilly regions of districts like Kasargod have historically lagged behind. "The settlements here are not very big for the government to provide healthcare infrastructure," explains Mr. Arokiasamy. Similarly, the Vidarbha region of Maharashtra has suffered, while there are differences in eastern and western Uttar Pradesh. Such intra-State variations can be as big as inter-State variations, but do not get as much attention from policymakers.

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