



Varying IMR across India

What is the issue?

\n\n

\n

- Despite its rapid GDP growth, India stands at 49th position out of 225 countries with 40.50 IMR.
- In India there is a high Intra-State and Inter-State variations in IMR, such variations receives less attention from policymakers.

\n

\n\n

What is IMR?

\n\n

\n

- 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.
- 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.
- High infant mortality has been linked to poor maternal health and inter-generational poverty in families.

\n

\n\n

What are IMR variations among states in India?

\n\n

\n

- The biggest drivers of neo-natal deaths in India are premature birth, low birth weight, neo-natal infections, asphyxia and trauma.

- \n
- After the first month, diarrhoea and pneumonia become the leading causes of death.
- \n
- According to India's Sample Registration System, Goa (8), Pondicherry (10), Kerala (6) and Manipur (9) saw the lowest infant-mortality rates in 2016.
- \n
- While Madhya Pradesh, Assam, Odisha and Uttar Pradesh saw the highest, in that order.
- \n
- Despite Kerala's low infant mortality, the hilly regions of districts like Kasargod have historically lagged behind.
- \n
- Similarly, the Vidarba region of Maharashtra has suffered, while there are differences in eastern and western Uttar Pradesh.
- \n

\n\n

What are the reasons for varying IMR across the states?

\n\n

- \n
- Per-capita spending on health in Indian States was the biggest predictor of infant mortality.
- \n
- For example, tribal communities in Odisha have high rates of malnutrition, a big cause of infant mortality.
- \n
- Southern States like Kerala have an extremely lower IMR because of widespread literacy and urbanisation.
- \n
- The settlements intra state have higher IMR is due to lack of healthcare infrastructure facilities.
- \n
- The willingness of people in rural and tribal areas to access this infrastructure is crucial.
- \n
- Greater female autonomy, which mean women give birth at a later age and wait longer between births is a significant factor for lower IMR.
- \n
- Even the transport infrastructure of a State can have a role in reducing infant mortality.

\n

\n\n

What can be done?

\n\n

\n

- 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.

\n

- Merely ensuring that women go to hospitals to deliver their children can prevent asphyxia and trauma.

\n

- 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.

\n

- Under the National Rural Health Mission (NRHM), pregnant women received better care and newborn immunisations improved.

\n

- The uptake of the Janani Suraksha Yojana and NRHM needs to be ensured across the states it could address some of the variations in IMR across India.

\n

\n\n

\n\n

Source: The Hindu

\n\n

\n



IAS PARLIAMENT

Information is Empowering

A Shankar IAS Academy Initiative