



NFHS 5: A Women-Centric Analysis

This editorial is based on [“In NFHS Report Card, The Good, The Sober, The Future”](#) which was published in The Hindu on 31/12/2021. It talks about the women specific data of the Fifth National Family Health Survey (NFHS-5) and its positive and negative outcomes.

For Prelims: NFHS-5, Total Fertility Rate, Sustainable Development Goals (SDG) 2030 Agenda, Maternal Health Services and Institutional Delivery, Teenage Pregnancy.

For Mains: Women related improvements observed in NFHS 5, Areas in which women-related development is still lagging behind, Factors restricting women from contributing in the economy and to the nation as a whole, Measures that can be taken to facilitate women related development.

The [National Family Health Survey \(NFHS 5\)](#), which presents a **bird’s eye view of the state of the nation’s health**, has **provided encouraging outcomes** on several fronts: [stabilizing population growth](#), improved family planning services and better delivery of health systems.

However, it also **highlights the need for further improvement to address gender-based violence and harmful practices against women and girls**, such as [child marriage](#) and gender-biased sex selection.

These have been exacerbated by discriminatory social norms and practices hindering the achievement of the [Sustainable Development Goals \(SDG\) 2030 Agenda](#) and India’s development goals.

Women-Specific Findings of NFHS 5: The Positive Side

- **TFR Below Replacement Level:** India’s population growth appears to be stabilising.
 - The [Total Fertility Rate \(TFR\)](#), which is the average number of children born per woman, has **declined from 2.2 to 2.0 at the national level**.
 - A total of 31 States and Union Territories (constituting **69.7% of the country’s population**) have achieved fertility rates below the replacement level of 2.1.
- **Better Family Planning:** The main reasons for decline in fertility is an **increase in adoption of modern family planning methods** (from 47.8% in 2015-16 to 56.5% in 2019-21) and a **reduction in unmet need for family planning by 4% points** over the same period.
- **Improvements in Female Literacy:** Significant **improvements in female literacy** have been witnessed with **41% women having received 10 or more years of schooling** (compared to 36% in 2015-16).
 - Girls who study longer have fewer children, and are also more likely to delay marriage and find employment.
- **Improved Maternal Health Delivery:** [Maternal health services](#) are steadily improving.
 - **Antenatal care** in the first trimester has **increased by 11.4% points** (from 2015-16 to 2019-21) to reach 70%

- The recommended four antenatal care check-ups have increased by 7% points to reach 58.1%
- **Postnatal care** visits have **gone up by 15.6% points** to reach 78%.
- **Institutional births** were **accessed by 88.6% of women in 2019-21**, marking an increase of 9.8% points from 2015-16.
 - There has also been an **increase in institutional deliveries in public health facilities** (52.1% to 61.9%).
- **Better Menstrual Health and Bodily Autonomy:** Evidence indicates significant **progress where women have the right to bodily autonomy and integrity** and the ability to take decisions about their lives.
 - The proportion of women (aged 15-24 years) who use **menstrual hygiene products** has also increased by almost 20% points between 2015-16 and 2019-21 and currently stands at 77.3%.
- **Technology and Banking Related Progress:** The proportion of women who have their **own bank accounts has gone up by 25.6% points** over the same time period to reach 78.6%.
 - Around **54% of women have their own mobile phones** and about **one in three women have used the Internet**.

EXCERPTS FROM NFHS SURVEY



WOMEN'S EMPOWERMENT (WOMEN AGE 15-49 YEARS)

	2020-21	2015-16
Participation of married women in household decisions	92%	73.8%
Women who worked in last 12 months and paid in cash	24.9%	21.1%
Women owning a house and/or land (alone or jointly)	22.7%	34.9%
Women having a bank or savings account that they use	72.5%	64.5%
Women having a mobile phone that they themselves use	73.8%	66.6%

NUTRITIONAL STATUS OF ADULTS (AGE 15-49 YEARS)

	2020-21	2015-16
Women whose Body Mass Index (BMI) is below normal	10%	14.9%
Men whose Body Mass Index (BMI) is below normal	9.1%	17.7%
Women who are overweight or obese	41.3%	33.5%
Men who are overweight or obese	38%	24.6%
Average out-of-pocket expenditure per delivery in a public health facility (in Rs)	2,548	8,518
Women who have ever used the internet	63.8%	NA
Men who have ever used the internet	85.2%	NA
Households with any usual member covered under a health insurance/financing scheme	25%	15.7%

Downside of the Survey

- **Lesser Institutional Delivery in Certain States:** The survey indicates a worrisome figure of **11% of pregnant women** who were still either **unreached by a skilled birth attendant** or not accessing institutional facilities.
 - Further analysis reveals the **institutional delivery rate of under 70% in 49 districts of India** over two-thirds (69%) of which are from five States (**Nagaland, Bihar, Meghalaya, Jharkhand and Uttar Pradesh**).
- **Teenage Pregnancy:** **Teenage pregnancy** has **declined only marginally by 1% point** and 7.9% of women in the age group of 15-19 years were already mothers or pregnant at the time of the survey.
- **Low Access of Reproductive Health Services:** A very small segment of the population is currently accessing the full range of **sexual and reproductive health** services such as **screening tests for cervical cancer (1.9%)** and **breast examinations (0.9%)**.
- **Negligible Decline in Child Marriage:** The prevalence of child marriage has **gone down but only marginally** from 26.8% in 2015-16 to 23.3% in 2019-21. One in three women continue to face **violence from their spouse**.
- **Low Economic Contribution:** Women's participation in the economy continues to remain low (**only 25.6% women engaged in paid work**, a meagre increase of 0.8% point).
 - Women still bear a **disproportionate burden of unpaid domestic and care work**, hindering their ability to access gainful employment.

Way Forward

- **Encouraging Comprehensive Sexuality Education:** The above issues highlight the need to **invest in comprehensive sexuality education as a key component of life-skills education** for both in school and out-of-school adolescents, and **ensuring access to quality sexual and reproductive health services** for them.
 - While **expanding the basket of reproductive health services**, the services like screening tests and breast examinations should also be included.
- **Addressing Discriminatory Social Norms:** To empower women and ensure gender justice, it is **imperative to address harmful practices, such as child marriage** and gender-biased sex selection.
 - There is a need to enhance the value of women and girls by working on **transforming unequal power relations**, structural inequalities and discriminatory norms, attitudes and behaviours.
 - Also, it is important to **engage with men and boys**, particularly in their formative years, to **promote positive masculinity and gender-equal values**.
- **Promoting Technology Based Services among Women:** In the next few years, the combination of mobile technology, banking, education and women's economic empowerment will be **significant drivers to address informal discriminatory norms**.
 - Although the percentage of women using mobile, internet and banking facilities have increased, this is still not at par with those of men.
 - There should be **sufficient stress on promoting and teaching the use of such facilities to women** as availability and utilisation of such resources is also an indicator of empowerment among women.
- **Integrated Efforts for Better Health Services:** The NFHS findings are a reminder of the **urgent need to close gaps in girls' education** and **address the poor health status of women**.
 - 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 these services accessible, affordable and acceptable**, especially for those who can't easily afford it.

Conclusion

Convergence among multiple stakeholders is critical to bring about the desired change. The discriminatory social norms that drive gender-based violence and harmful practices must be addressed strictly and jointly

and women must be empowered to exercise agency and autonomy in all spheres of life.

Drishti Mains Question

“The NFHS 5 has provided encouraging outcomes on several fronts but it also highlights the need for further improvement to address gender-based violence and harmful practices against women and girls”. Discuss the measures that can be taken to facilitate women related development.

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