



## 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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