

Health challenges of under 3 years children in India: reflections on NFHS results

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Background:

Child is the chief victim of the interplay of nutrition, socio-economic and health factors that leads to malnutrition. The steep rise in malnutrition among children during the first three years of life is indicative of poor infant feeding practices. Review of studies has shown that starting breastfeeding within one hour of birth can help reduce the risk of neonatal mortality by almost a third. Universal coverage of exclusive breastfeeding up to six months of age can save 13 to 15 per cent of all under five deaths, i.e., about more than 3.5 lakh children each year in India [BPNI 2006]. Specific interventions are required for these age groups in terms of ensuring frequent meals with adequate quantity. This food has to have adequate nutrients in the form of animal proteins, fats and fiber. Children in the one to three age groups will also continue to need day care services.

Indian economy has minimal share in child health component. As an exemplary, only about 1 per cent of the total union budget is spent on children under six years. It is evident that the policy level issues are still a challenge to boost the child health status in India. This corroborated with the fact shared by **National Family Health Survey (NFHS-3) 2005-06** that shows meager progress in child health status in India.

Objective:

This paper intends to look at the strategies needed to meet the comprehensive health requirements of children less than three years, with special emphasis on nutrition.

Methods and materials:

This paper has examined the Integrated Child Development Services (ICDS) program and National Rural Health Mission (NRHM), on expanded coverage and quality improvements to address child health. Moreover it reviews the NFHS-II (1998-99) & III (2005-06) findings and opt for comparative analysis of indicators of child nutrition and health status under 3 years.

Results and discussion:

In India the scenario of child health status shows gloomy evidence. Though improved, 40% of children are still underweight. Anemia among children of 6-35 months age is still increasing and reached upto 79% during 2005-06. Other contributory indicators that are directly linked to malnutrition and infant deaths as; 75 percent of infants are not breastfed within one hour of birth, and around 54 percent of 0-5 months children are not exclusively breastfed during the first six months. Only 44 percent of all children in the 12-23 months age have received all recommended vaccines and 51 percent of the pregnant women had at least three ante-natal check-ups. As many as 57 of every 1,000 children die before they reach the first Year.

It is apparent that child nutrition is largely depended on household food security and dietary intake, lack of these, causes anemia among children. Child well being is an integrated concept which incorporates through various interdependent elements. Integrated Child Health Services in India is about to reach 50 years of program but the poor nutrition status of children remains unchanged. Originally ICDS was supposed to act on multidimensional aspects of Malnutrition, yet to be focused. More emphasis on accountability of supplementary feeding and pre-school attendance of children 4-6 years old has downsized the scope of counseling and concurrent home contacts during crucial period of undernourished children. That apart, nutrition comes as a prime component under the umbrella of NRHM which emphasizes child health, nutrition and immunization. But nutrition issue is still lag behind in the arena of health programs and yet to increase focus on convergence with ICDS program.

Conclusions

The disappointments of parallel programs of child health and nutrition are substantiated with the result of NFHS-III. A definite success seems to be elusive, while the public health system in the country continues to be weak. A sharp focus on infant nutrition inputs with balanced dietary focus, action plans for universalization of early initiation of Breastfeeding, and Appropriate Complimentary Feeding and timely immunization would rapidly bring down infant mortality and Malnutrition, as targeted in Millennium Development Goal (MDG).

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