



HEALTH DOSSIER 2021

Reflections on Key Health Indicators



LAKSHADWEEP

No COMMON REVIEW MISSION visits have been made till date in Lakshadweep

LAKSHADWEEP

1. BACKGROUND

1.1 State Profile

Lakshadweep has a geographical spread^a of 30 km². The UT is estimated to have a population of over 0.0064 crores^b and is projected to reach around 0.0068 crores by 2021^c. As per Census 2011, the Scheduled Tribe (SC) population is 0.61 lakh (94.80%). In the UT, only 21.93% of the population reside in rural areas, while 78.07% constitute the urban population. The total length of roadsd in the UT is 212 km (0.06%^e).

A detail report on the key indicators has been attached as Annexure 1

1.2 Demography

The UT's Sex ratio at birth is 1,051 females for every 1000 males (NFHS 5). The crude birth rate and the crude death rate have declined from 19.1 & 6.3 in 2005 to 14.8 & 5.6 in 2019, respectively (Annexure 2; figure 2). The literacy rate increased from 86.7% in 2001 to 91.8% in 2011, with male & female literacy rates being 95.6% and 87.9%, respectively (Annexure 1.1). As per ESAG 2018 report, the Gross Enrolment Rate (GER)^f is 7.1% for higher education, 98.16% for senior secondary education, 103.66% for secondary education, 77.48% for elementary education, and 73.80% for primary education.

1.3 Elderly

Population ageing has profound social, economic, and political implications. In Lakshadweep, 89% of elderly females and 22% elderly males living in rural areas and 99% of elderly females and 19% elderly males in urban areas are economically fully dependent on others. The illness (any deviation from the state of physical and mental well-being) perception among the elderly is reported as 45% for men and 60% for women as opposed to the national average of 31% for both.

RHS 2020

b Census 2011

Census Population Projection 2019

^d Basic Road Statistics 2019, MoRTH

Percentage of total length of roads in Lakshadweep

Gross Enrolment Rate (GER): Total enrolment in a specific level of education, regardless of age, expressed as a percentage of the eligible official school-age population corresponding to the same level of education in a given school-year. School-age Population: Population of the age group which officially corresponds to the relevant level of education; senior secondary education is XI-XII, secondary is IX-X, primary is I-V and elementary is I-VIII

2. HEALTH STATUS AT A GLANCE

2.1 Maternal Health

The UT has been able to provide RMNCHA+Ng services with major focus on primary and secondary care services under the NHM. Indicators for Antenatal care (ANC)h, institutional deliveries, C sections, distribution of IFAⁱ tablets, follow up of high-risk pregnancies, provision of postnatal and newborn care - have shown substantial improvement since 2005 (NFHS 4 & 5). The maternal mortality ratio has significantly declined from 160 (2007-09) to 85 (2016-18). In Lakshadweep, 90% of women received 4 ANC check-ups (Annexure 1.4). As reported in HMIS 2019-20, around 99.9% of the deliveries took place in institutions, out of which 100.0% took place in public health facilities. Total percentage of C-sections (39.4%) is higher than the WHO's standard (10-15%). Around 72.1% of women are tracked for the first postpartum check-up between 48 hours and 14 days (Annexure 1.4). Prevalence of anaemia in women aged 15-49 years decreased from 46% (NFHS-4) to 25.8% (NFHS-5). Anaemia in females of reproductive age group is almost four times more than in men of similar age group (Annexure 2, figure 3).

Refer Annexure 3 for a detailed district wise comparison.

2.2 Newborn, Infant & Child Health

Ever since the inception of NHM in 2005, the UT has shown a significant decline in IMR from 22 (2005) to 8 (2019), which is lower than the national average of 30 (Annexure 2, Figure 1). Full vaccination^k coverage for children between 12 – 23 months of age declined from 93.2% (NFHS 4) to 91.7% (NFHS 5). A decrease in childhood anaemia from 53.6% to 43.1% in children aged 6-59 months has been reported in NFHS 5 (Annexure 2, Figure 3). The proportion of exclusively breastfed children under 6 months improved from 54.8% (NFHS 4) to 67% (NFHS 5). The burden of under-5 years stunting increased from 26.8% (NFHS 4) to 32.0% (NFHS 5). For under-5 years wasting, the burden increased from 13.7% (NFHS 4) to 17.4% (NFHS 5).

2.3 Family Planning

As per NFHS 5 report, the total unmet need in the UT is 12.3% and unmet need for spacing is 8.0%. Approximately 30.1% of married women reported to avail any modern method of family planning in the UT; with sterilization acceptance among females being 20.7% and nil among males (NFHS 5).

2.4 Communicable Diseases

The UT has 1 functional IDSP unit in place. The proportion of communicable, maternal, neonatal, and nutritional diseases [CMNND] contribute to 19.67%^m of total disease burden (Annexure 1.4), as per QPR reports, for TB, the annual total case notification rate is 18% and NSPⁿ success rate is 83% as opposed

⁹ Reproductive, Maternal, Newborn, Child, Adolescent Health & Nutrition

^h Antenatal Check up

ⁱ Iron Folic Acid Tablets

k NFHS 5 State/UT Factsheet, based on information from vaccination card only

QPR NHM MIS Report (status as on 01.03.2020)

m Includes all UTs except Delhi

ⁿ New Smear Positive

to the national averages of 163% and 79%, respectively. For NLEP°, the reported prevalence rate of 0.29 per 10,000 population is less than the national average of 0.61. In FY 2019-20, no deaths due to Dengue, Malaria, and Kala Azar are reported in the UT.

2.5 Non-Communicable Diseases (NCDs) and Injuries

NCDs contribute to 67.90% of DALYs and injuries contribute to 12.42% of DALYs in the UTP. The UT is positioned last in the country for the total number of fatal road accidents with respect to other States (Annexure 1.4). It is found in the recent NFHS 5 report that 17.5% of women and 28.5% of men used any kind of tobacco, while 0.3% of women and 0.4% of men consumed alcohol.

2.6 Health Infrastructure

As per the recent RHS data, the number of SCs, PHCs and CHCs have been increasing since 2005 (Annexure 2, Figure 4). Currently there are 11 SCs, 4 PHCs and 3 CHC in rural areas; and 11 SCs, 4 PHCs and 3 CHCs in tribal areas. The UT has 1 DH and 2 SDHs. Under the recently introduced Ayushman Bharat – Health and Wellness Centres (AB-HWCs), 3 HWCs (3 PHCs) are operationalized in Lakshadweep as of 22nd December 2021^q.

The doctor to staff nurse ratio in place is 1:1, with 4 public health providers (MO, specialists, staff nurse & ANM) per 10,0000 population (Annexure 1.5). The UT has 94.54% of ASHA in position under NRHM. Recent data (Annexure 1.3) reveals that out of 1000 population who availed services from public health facilities, 7986.40 availed (events) OPD services and 112.54 availed (events) IPD services.

National Leprosy Eradication Programme

P Includes all UTs except Delhi

AB-HWC Portal

ANNEXURE 1: KEY INDICATORS

1.1 State Profile ^r			
Indicator	Lakshadweep 2011 ¹	India	
Total Population (In Crore)	0.0064	121.08	
Rural (%)	21.93	68.85	
Urban (%)	78.07	31.14	
Scheduled Caste population (SC) (in crore)	0	20.14 (16.63%)	
Scheduled Tribe population (ST) (in crore)	0.0061 (94.80%)	10.45 (8.63%)	
Total Literacy Rate (%)	91.8	72.99	
Male Literacy Rate (%)	95.6	80.89	
Female Literacy Rate (%)	87.9	64.64	
Number of Districts in the Lakshadweep ²	1		
Number of districts per lakh population in	Population ¹	Districts ¹ (Numbers)	
Lakshadweep (Census 2011)	<1 Lakhs	1	

1.2 Key Health Status & Impact Indicators			
Indicators	Lakshadweep	India	
Infant Mortality Rate (IMR) ³	8	30	
Crude Death Rate (CDR) ³	5.6	6	
Crude Birth Rate (CBR) ³	14.8	19.7	
Maternal Mortality Ratio (MMR) ³	N/A	113	
Neo Natal Mortality Rate (NNMR) ⁴	N/A	23	
Under Five Mortality Rate (U5MR)⁴	N/A	36	
Still Birth Rate⁴	N/A	4	
Total Fertility Rate (TFR)⁴	N/A	2.2	
Life expectancy at birth⁵	N/A	69.4	
Sex Ratio at Birth⁴	N/A	899	

^r Sources are mentioned at the end of Annexure 1.

1.3 Key Health Infrastructure Indicators						
Indicators				Numbers (Total)		
Number of District Hospitals ²					1	
Number of Sub District Hospital ²					2	
Number of Government (Central + State) Medic	al College ⁶				0	
Number of Private (Society + Trust) Medical Col	leges ⁶				0	
Number of AB-HWCs functional as of 22 nd December 2021 ¹⁶	Status (Total)	Target FY (2020-		Target FY (2021-22)	Target FY (2022-23)	
SHC-HWC	0	0		0	0	
PHC-HWC	3	3		6	6	
UPHC-HWC	0	0		0	0	
Total-HWC	3	3		6	6	
Rural ²	Require	ed (R)	ı	In place (P)	Shortfall (S)	
Number of Community Health Centres (CHC)	0			3	-3	
Number of Primary Health Centres (PHC)	0			4	-4	
Number of Sub Centres (SC)	0		11	-11		
Number of functional First Referral Units (FRUs)	DH		SDH	СНС		
ramber of functional first reterral offics (Fries)	1			1	0	
Urban²	Require	ed (R)	l (R) In place (P)		Shortfall (S)	
Number of PHC	1		0		1	
Tribal ²	Require	ed (R)	d (R) In place (P)		Shortfall (S)	
Number of CHC ^s	0	0 3		-3		
Number of PHC	0	0 4		4	-4	
Number of SC	0		11		-11	
Patient Service ⁹		La	akshadweep	India		
IPD per 1000 population			112.54		62.6	
OPD per 1000 population				7986.40	1337.1	
Operation (surgeries) major (General and Spina 10000 population	l Anaesthesia) per	86.32 36.4		36.4	

⁵ Total population is less than the norm (CHC) of 80,000

1.4 Major Health Indicator ^t		
% Share of DALYs to Total Disease Burden (GBD 2019) ⁷	Lakshadweep ^u	India
% DALY ^v accountable for CMNNDs ^w	19.67	27.46
% DALY accountable for NCDs	67.9	61.43
% DALY accountable for Injuries	12.42	11.11
Birth, Death Registration & Medical Certification of Cause of Death (MCCD) Indicator ⁸	Lakshadweep	India
Level of Birth Registration (%)	91	92.7
Level of Death Registration (%)	88.2	92
Percentage of medically certified deaths to total registered deaths (%)	95.8	20.7
RMNCHA+N		
Maternal Health ⁹	Lakshadweep	India
% 1st Trimester registration to Total ANC Registrations	83.8	71.9
% Pregnant Woman received 4 ANC check-ups to Total ANC Registrations	90	79.4
Total Reported Deliveries	870	21410780
% Institutional deliveries to Total Reported Deliveries	99.9	94.5
% Deliveries conducted at Public Institutions to Total Institutional Deliveries	100	67.9
% Deliveries conducted at Private Institutions to Total Institutional Deliveries	0	32.1
% C-section deliveries (Public + Pvt.) to reported institutional (Public + Pvt.) deliveries	39.4	20.5
% C-sections conducted at public facilities to Deliveries conducted at public facilities	39.4	14.1
% C-sections conducted at Private facilities to Deliveries conducted at private facilities	0	34.2
% Women getting 1st Post-Partum Checkup between 48 hours and 14 days to Total Reported Deliveries	72.1	53.4
Neonatal ⁹	Lakshadweep	India
% live birth to Reported Birth	99.4	98.8
% Newborns having weight less than 2.5 kg to Newborns weighed at birth	9.6	12.4
% Newborns breast fed within 1 hour of birth to Total live birth	102.7	89.9

Sources are mentioned at the end of Annexure 1

Represents all UTs including LakshadweepDisability Adjusted Life Years

w Communicable, Maternal, Neonatal, and Nutritional Diseases

New Born Care Units Established ^{11y}	Lakshadweep	India
Sick New Born Care Unit (SNCU)	2	895
New Born Stabilization Unit (NBSU)	0	2418
New Born Care Corner (NBCC)	5	20337
Child Health & Nutrition ¹⁰	Lakshadweep (NFHS 5)	India (NFHS 5)
Prevalence of diarrhoea (reported) in the last 2 weeks preceding the survey (%)	2.3	7.3
Children with diarrhoea in the last 2 weeks who received oral rehydration salts (ORS) (%)	N/A	60.6
Children under 5 years who are underweight (weight-for-age) (%)	25.8	32.1
Child Immunization ¹⁰	Lakshadweep (NFHS 5)	India (NFHS 5)
Children age 12-23 months fully vaccinated based on information from vaccination card only (%)	91.7	83.8
Children age 12-23 months who have received BCG (%)	94.2	95.2
Children age 12-23 months who have received first dose of measles containing vaccine (%)	91	87.9
Family Planning ¹⁰	Lakshadweep (NFHS 5)	India (NFHS 5)
Unmet need for spacing (%)	8	4
Communicable Diseases		
Integrated Disease Surveillance Programme (IDSP) ¹¹	Lakshadweep	India
Number of districts with functional IDSP unit	1	720
Revised National Tuberculosis Control Programme (RNTCP) ¹¹	Lakshadweep	India
Annualized total case notification rate (%)	18	163
New Smear Positive (NSP) Success rate (in %)	83	79
National Leprosy Eradication Programme (NLEP) ¹¹	Lakshadweep	India
Prevalence Rate/10,000 population	0.29	0.61
Number of new cases detected	2	1,14,359
Malaria, Kala Azar, Dengue ¹¹	Lakshadweep	India
Deaths due to Malaria ¹¹	0	79
Deaths due to Kala azar reported ¹¹	0	0
Deaths due to Dengue reported ¹¹	0	168
Number of Kala Azar Cases reported ¹¹	0	3,706

HIV ¹⁰	Lakshadweep (NFHS 5)	India (NFHS 5)
Women (age 15-49 years) who have comprehensive knowledge of Human Immunodeficiency Virus (HIV)/Acquired immunodeficiency syndrome (AIDS) (%)10	46.9	21.6
Men (age 15-49 years) who have comprehensive knowledge of HIV/AIDS (%)10	65.5	30.7
Non-Communicable Disease		
Diabeties and Hypertension ¹⁰	Lakshadweep (NFHS 5)	India (NFHS 5)
Women - Mildly elevated Blood Pressure (Systolic 140-159 mm of Hg and/or Diastolic 90-99 mm of Hg) (%)	13.9	12.4
Men - Mildly elevated Blood Pressure (Systolic 140-159 mm of Hg and/or Diastolic 90-99 mm of Hg) (%)	16.6	15.7
Women - Blood sugar level - high (141-160 mg/dl) (%)	8.4	6.1
Men - Blood sugar level - high (141-160 mg/dl) (%)	10.2	7.3
Tobacco Use and Alcohol Consumption among Adults (age 15 years & above) ¹⁰	Lakshadweep (NFHS 5)	India (NFHS 5)
Women who use any kind of tobacco (%)	17.5	8.9
Men who use any kind of tobacco (%)	28.5	38
Women who consume alcohol (%)	0.3	1.3
Women who consume alcohol (%) Men who consume alcohol (%)	0.3	1.3 18.8
Men who consume alcohol (%)		
Men who consume alcohol (%) Injuries	0.4	18.8
Men who consume alcohol (%) Injuries Road Traffic Accident ¹²	0.4 Lakshadweep	18.8
Men who consume alcohol (%) Injuries Road Traffic Accident¹² Rank (Total number of fatal Road Accidents in State/UT wrt other States/UTs)	0.4 Lakshadweep	18.8 India N/A

1.5 Access to Care			
Health Systems Strengthening			
Ambulances & Mobile Medical Units (MMU) ¹¹	Lakshadweep	India	
Number of Districts equipped with MMU under NRHM	0	506	
Number of Districts equipped with MMU/Health Units under NUHM	0	31	

Number of ERS vehicles operational in the States/UTs Under NHM	Lakshadweep	India			
102 Type	0	9955			
104 Type	0	605			
108 Type	0	10993			
Others	0	5129			
Number of Ambulances functioning in the State/UTs other than NHM (At PHC/CHC/SDH/DH)	0	11070			
Key Domain Indicators and Service Serv					
ASHA ¹³	Lakshadweep	India			
Total number of ASHA targeted under NRHM	110	946563			
Total number of ASHA in position under NRHM	104	904211			
% of ASHA in position under NRHM	94.54	96			
Total number of ASHA targeted under NUHM	0	75597			
Total number of ASHA in position under NUHM	0	64272			
% of ASHA in position under NUHM	0	85			
Community Process ¹¹	Lakshadweep	India			
Number of Village Health Sanitation and Nutrition Committees (VHSNCs) constituted	9	554847			
Number of Mahila Arogya Samitis (MAS) formed	0	81134			
Number of Rogi Kalyan Samitis (RKS) registered (Total) ¹¹	Lakshadweep	India			
DH	1	796			
СНС	3	6036			
PHC	4	20273			
UCHC	0	126			
UPHC	0	3229			
Human Resource for Health ¹⁴					
HRH Governance	Laksha	dweep			
Specialist Cadre Available in the state (Y/N)	Yes				
HR Policy available (Y/N)	N	0			
Implementation of HRIS (Y/N)	No				
	No				
HR Integration initiated (Y/N)	N	0			

Overall Vacancies (Regular + contractual)	Specialists + MO MBBS (%)	70
	Dentists (%)	100
	MO MBBS (%)	4
	Nurse (%)	16
	LT (%)	8

HRH Distribution	Sanctioned	In Place
Doctors (MO & specialists) to staff nurse ¹⁴	1:1	1:1
Availability of public healthcare providers (MO, specialists, staff nurse & ANM) in district healthcare system ¹⁴	24 per 10,000	21 per 10,000
Regular to contractual service delivery staff ratio14	1:1	1:1

Ranking: Human Resource Index of Lakshadweep¹⁵ Total (Regular + NHM) Actual Ranking: Category Required Sanctioned In-Place Vacancy Gap# HR Gap (R) (S) (P) (V) (R-P) Index MPW× 0 35 77 77 0 Staff Nurse 228 71 71 0 157 Lab Technician 38 24 24 0 14 62.21 **Pharmacists** 21 25 25 0 0 MO MBBSy 47 39 39 8 0 Specialistz 15 5 10 63 68

1.6 Healthcare Financing		
National Health Accounts (NHA) (2017-18)	Lakshadweep	India
Per Capita Government Health Expenditure (in ₹)	N/A	1753
Government Health expenditure as % of Gross Domestic Product (GSDP)	N/A	1.35
Government Health Expenditure as % of General Government Expenditure (GGE)	N/A	5.12
OOPE as a Share of Total Health Expenditure (THE) %	N/A	48.8

MPW – Multi Purpose Health Worker (Female + Male)

y MO MBBS (Full Time)

Specialist (All Specialist)

National Sample Survey Office (NSSO) (2017-2018)		Lakshadweep		India	
		Urban	Rural	Urban	
OPD - % of non-hospitalized cases using public facility	N.	/A	33	26	
IPD - % of hospitalized cases using public facility	N.	/A	46	35	
Out of Pocket Expenditure (OOPE) (NSSO)*	Rural	Urban	Rural	Urban	
OPD - Per non-hospitalized ailing person (in INR) in last 15 days - Public	N.	/A	472	486	
OPD - Per non-hospitalized ailing person (in INR) in last 15 days - Private	N.	/A	845	915	
IPD - Per hospitalized case (in INR) - Public	N/A		5,729	5,939	
IPD - Per hospitalized case (in INR) - Private	N/A		28,816	34,122	
IPD - % of diagnostics expenditure as a proportion of inpatient medical expenditure in Public (NSSO)	N,	/A	18	17	
IPD - % of drugs expenditure as a proportion of inpatient medical expenditure – Public (NSSO)	N,	/A	53	43	
Childbirth - Average out of pocket expenditure per delivery in public health facility (₹) (NSSO)	N/A		2,402	3,091	
Childbirth - Average out of pocket expenditure per delivery in private health facility (₹)	N/A		20,692	26,701	
State Health Expenditure		dweep	All India	Average	
State Health Department expenditure as a share of total expenditure (%) (2017-18)**	N/A 5aa		aa		

Sources used for Annexure 1

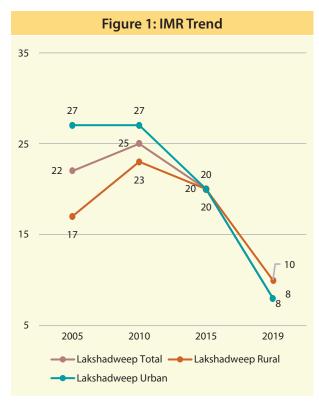
- Census 2011
- Rural Health Statistic (RHS) 2019-20
- Sample Registration Survey (SRS) Bulletin 2018 & 2019
- 4 Registrar General of India (RGI) Statistical Report (SRS) 2018
- ⁵ SRS Based Abridged Life Tables 2014-18
- ⁶ National Health Profile 2020
- ⁷ Global Burden of Disease Data 2019, https://vizhub.healthdata.org/gbd-compare/
- ⁸ Annual Report on Vital Statistics of India based on CRS 2019 & Medical Certification of Cause of Death 2019
- ⁹ HMIS (2019-20)
- ¹⁰ NFHS 4 & 5
- 11 QPR NHM MIS Report [Status as on 01.03.2020 & recent 31.12.2020 (some indicators removed from the recent report have been taken from report released on 01.03.2020)
- ¹² Ministry of Road Transport & Highways (MoRTH) Road Accidents in India 2019
- ¹³ Update on ASHA Programme July 2019 (NHSRC Publication)
- ¹⁴ Human Resources for Health in District Public Health Systems of India: State Wise Report 2020
- 15 HRH Division NHSRC
- ¹⁶ As per HWC Portal

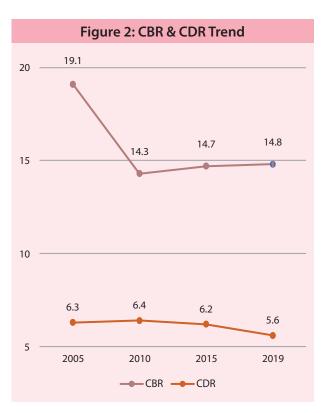
^{aa} Represents data for all states and 2 UTs with legislative assembly (Puducherry + Delhi)

Estimated by NHSRC using unit level data of NSSO 2017-18, where OOPE = [Total Medical Expenditure + Transportation Cost] - Reimbursement

^{**} RBI, State Finances: Study of Budgets 2019-20

ANNEXURE 2





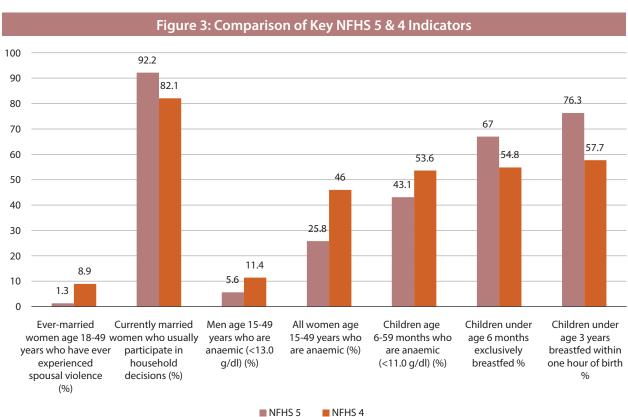
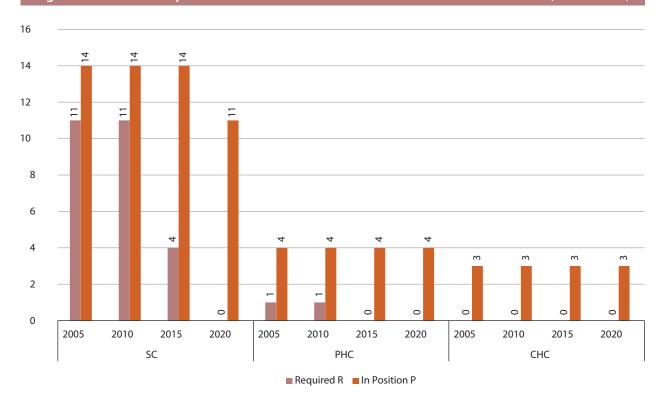
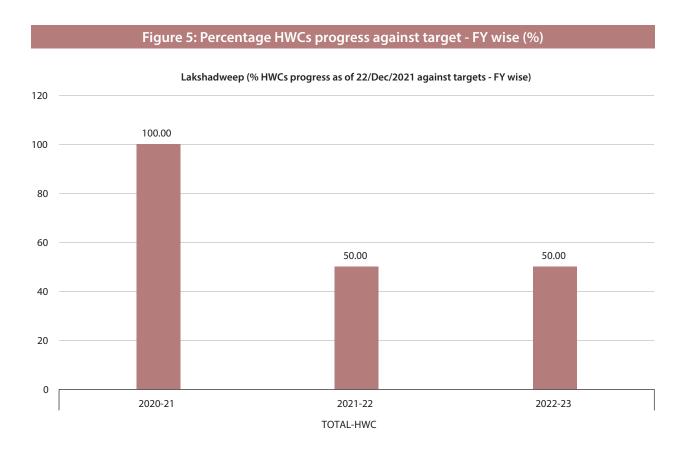


Figure 4: Year Wise Required/In Position Health Infrastructure Status in Rural Area (In numbers)





ANNEXURE 3: DISTRICT WISE PERFORMANCE WITH RESPECT **KEY NFHS 5 INDICATORS**

(Green – Good Performance, Red – Poor Performance) (District Wise Rural Urban Stats Not Available)

	,			
Children Under 5 Years - Wasted^ (Weight For Height) (%)	13.7	18.5	14.2	17.4
Children Under S Years - Stunted^ (Height For Age) (%)	26.8	30.7	35.6	32
Total Children Age 6-23 Months Receiving Adequate Diet**, # (%)	15.9	21.8	N/A	19
Children Age 12-23 Months Fully Vaccinated Based On Unformation From Vaccination Card Only* (%)	93.2	93	N/A	91.7
(%) srhid lanoitutitanl	99.3	99.5	100	9.66
4 Least 4 Least 4 Mother Who Had At Least 4 (%)	82.3	86.2	94.2	88.3
Total Unmet Need (%)	16.9	13.6	9'2	12.3
(%) əsŊ mopuoɔ	1.4	4.7	2.2	4.1
(%) IND/PPIUD (%)	0.7	1.3	0	1
Any Method Used For Family Planning By Currently Married Women Age 15-49 years (%)	29.7	51.8	55.4	52.6
beirisM 20-24 Years Married (%) 81 Sefore	1.9	1.9	0	1.3
(%) 9gA 94-21 9terate 10-49	N/A	96.4	8.96	96.5
Households with any usual member covered under a health insurance/ financing scheme (%)	2.9	58.4	66.7	60.1
0001\zelama1) thil IA oiteR xe2 (selaM	905	964	1361	1051
Data Source	NFHS 4 Total	NFHS 5 Urban	NFHS 5 Rural	NFHS 5 Total
staintsiQ\sətat2	Lakshadweep	Lakshadweep	Lakshadweep	Lakshadweep
.oN.2	-	2	3	4

NFHS5 replaced 'Immunized' (word) from NFHS4 to 'Asccinated', Out of two Indicators with 'either vaccination card or mother's recall & 'vaccination card only' indicator was used to reduce the recall bias, among children whose vaccination card was shown to the interviewer, percentage vaccinated with BCG, measles-containing vaccine (MCV)/MR/MMR/Measles, and 3 doses each of polio (excluding polio vaccine given at birth) and DPT or penta vaccine ** Based on the youngest child living with the mother * NFHS5 r

Breastfed children receiving 4 or more food groups and a minimum meal frequency, non-breastfed children fed with a minimum of 3 Infant and Young Child Feeding Practices (fed with other milk or milk products at least twice a day for breastfed infants 6-8 months and at least twice and you be at least four frow at least four frow at least four food groups not including the milk or milk products food group).

Nelow -2 standard deviations, based on the WHO standard. 13 Below -3 standard deviations, based on the WHO standard

* Full antenatal care is at least four antenatal visits, at least one tetanus toxoid (TT) injection and iron folic acid tablets or syrup taken for 100 or more days

** Based on the youngest child living with the mother

Breastfed children receiving 4 or more food groups and a minimum meal frequency non-breastfed children fed with a minimum meal integers of the frequency that is receiving a not a minimum meal frequency that is receiving to a semi-soild food at least twice a day for breastfed infants of 8 months and at least three times a day for breastfed children 9-23 months, and soild or semi-soild food at least twice a day for breastfed infants of a month of the milk products of good or semi-soild food at least twice a day for breastfed infants of the milk or milk products food good).

^ Below -2 standard deviations, based on the WHO standard. 13 Below -3 standard deviations, based on the WHO standard

NOTES

NOTES

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