

National Family Health Survey

(NFHS)

[UPSC Notes]

What is the National Family Health Survey India?

The National Family Health Survey (NFHS) is an extensive, multi-round survey that is carried out in a representative sample of Indian households.

- The International Institute of Population Sciences (IPS, located in Mumbai, India), the International Centre for Families (ICF), Calverton, Maryland, USA, and the East-West Centre, Honolulu, Hawaii, USA, all collaborated on the NFHS project.
- The International Institute for Population Sciences (IIPS) has been recognised as a coordinating body by the Ministry of Health and Family Welfare (MoHFW), Government of India, and is in charge of coordinating and offering technical direction for the NFHS.
- The United Nations children's fund provided further funding for NSHS in addition to funding provided by the United States Agency for International Development (USAID).
- IIPS worked along with several field organisations (FO) to implement the survey.
- Each of the FO is made in charge of carrying out survey operations in one or more of the NFHS-covered states. ICF and the East-West Centre helped with the technical aspects of the NFHS.

History of National Family Health Survey (NFHS)

From 1990-1993, the very first National Family Health Survey (NFHS-1) was carried out by the Government of India. With a focus on women, mothers, and small children, the survey gathered significant data on the population, health, and nutritional status of the population.

- The NFHS-1 was conducted with the assistance of 18 population research centres (PRCs) located in various reputable universities and institutions. The survey's reports at the state and national levels have all been released. There were a total of 48 reports in all.
- From 1998-1999, all 26 states in India participated in the Second National Family Health Survey (NFHS-2), which included additional questions about domestic violence, maternal health, reproductive health, anemia, women's nutrition, and social status, as well as the standard of healthcare and family planning resources. The survey's findings are currently being released.

- In 2005-2006, the Third National Family Health Survey (NFHS-3) was conducted. The survey was conducted in 29 Indian states by 18 research organisations, five of which were renowned population research centres. The National AIDS Control Organisation (NACO) and the National AIDS Research Institute (NARI) provided technical assistance for the HIV segment of NFHS-3. While USAID, DFID, Bill and Melinda Gates Foundation, UNICEF, UNFPA, and MoHFW funded the project.
- The fourth National Family Health Survey (NFHS-4) in the series, conducted in 2015-2016, offers data on India's population, health, and nutrition for each state and union territory. Under the direction of the Ministry of health and family welfare (MoHFW), the Government of India, all four NFHS surveys were carried out.
- The 2015-2016 NFHS-4's main goal was to deliver crucial information on health and family welfare as well as information on newly emerging challenges in these departments. This was done through a number of biomarker tests and measurements, the clinical, anthropometric, and biochemical components. These were intended to offer critical approximates of the presence of malnourishment, anaemia, hypertension, HIV, and high blood sugar levels.
- The data gathered through NFHS-4 helped program administrators and policymakers in establishing objectives and tracking development in India's health sector over time. Data from NFHS-4 aided in identifying the need for a new program in certain health care regions, as well as providing proof of the efficacy of currently operating programs.

National Family Health Survey (NFHS 5)

The fifth National Family Health Survey's first phase was conducted in 2019-2020, and the results were made public in December 2020. The findings for 22 states and including five union territories, have been presented in the first part of the fifth round. Estimates on important indicators for the population, family planning, maternity and child health, nutrition, adult health, and domestic violence were provided by the NFHS, among others. Some of these criteria as are discussed below:

Population

- The use of family planning methods has expanded, and most states are reducing their fertility rates to levels below the target set by the experts. The adoption of family planning techniques has increased across the states with the exception of Mizoram. The two states that have experienced the largest increase in the usage of family planning techniques are Goa and Bihar.
- In a few states, the sex ratio at birth has decreased. Seven states have seen a decrease in the ratio, including Goa and Kerala showing the most noticeable drop. Only Tripura's sex ratio at birth is greater than 1000.

Health and Nutrition

- Institutional childbirth has surged, and in some states, out-of-pocket delivery costs have gone up. Institutional childbirths accounted for more than 90% of childbirth in the previous five years in seven states. Nearly all births in Kerala occurred in medical facilities. In Nagaland, institutional childbirth accounted for just 46% of all births that took place.
- State-by-state, the infant mortality rate IMR has decreased, yet, childhood malnutrition is rising, and the IMR has somewhat decreased in almost all states. One of the biggest decreases in IMR was recorded in Assam, where it went from 48 deaths to 32 deaths. The IMR in Bihar is still high.
- All states are seeing an increase in obesity among both men and women. Nearly all states now have a higher percentage of men and women between the ages of 15 and 49 who are overweight or obese. The only exception is the states of Gujarat and Maharashtra. The body mass index of a person is used to determine if they are overweight or obese.

Approach to infrastructure and facilities

- All states have seen a rise in the percentage of homes having upgraded drinking water resources and electricity. Every state has seen an increase in the number of households with better sanitation facilities. While only 49% of families in Bihar have improved sanitation, 99% of households in Kerala do.
- More women are using cell phones overall but many of them lack internet access. In all the states, the percentage of women who own a cell phone has risen. However, in Andhra Pradesh, Bihar, Gujarat, and West Bengal, only about 50% of women possess and use a cell phone.
- More and more women are opening bank accounts, but fewer women in some states are buying homes or owning land. In each of the 17 states, the percentage of women who have a savings bank account has risen.

Gender

Indicators of sanitary protection during menstruation among women and spousal violence among married women were examined:

- States have seen an upsurge in the use of hygienic means of protection during menstruation. The percentage of women who use hygienic measures of

protection throughout their mental period was measured by the survey. This has risen in practically every state.

- The prevalence of gender-based violence has increased in several jurisdictions and remains high. In five states, the percentage of women who have experienced marital violence has increased. It has doubled in Karnataka, rising from 21% to 44%. Approximately more than one-third of all married women face domestic violence at the hands of their spouses.

National Family Health Survey Rounds

There are a total of 5 rounds have been conducted to date. Below we have mentioned all the rounds and the date of conducting.

1. The First Round of NFHS was conducted in 1992-93
2. The second Round of the National Family Health Survey was conducted from 1998-99
3. Third Round of NFHS conducted in 2005-06
4. The fourth Round of NFHS was conducted in 2015-16
5. National Family Health Survey 5 was conducted in 2018-19

Objectives of National Family Health Survey UPSC

The objective of the National Family Health Survey is to collect information on the following.

- Fertility
- Reproductive Health
- Nutrition
- Infant and Child Mortality
- Family Planning
- Anaemia
- Maternal and Child Health