

DISTRICT WISE ANALYSIS OF SDG GOAL 2 AND 3 INDICATORS AND HMIS VS NFHS-5 2022-23 MADHYA PRADESH

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INTRODUCTION

The Sustainable Development Goals (SDGs), often referred to as global goals, constitute a set of 17 interconnected objectives that need to be achieved by 2030 to ensure environmental sustainability, eliminate poverty, and create conditions for universal well-being and prosperity. India plays a pivotal role in the global success of the SDGs, exerting a significant impact on the planet and contributing to a more positive and hopeful world. Niti Aayog, the premier think tank of the Indian government, has been entrusted with the responsibility of coordinating programs related to SDG mapping, outlining targets, and identifying lead and supporting ministries for each goal [1,2].

Given their critical role in prioritizing people's needs and ensuring inclusivity, state governments are indispensable for India's progress toward achieving the Sustainable Development Goals (SDGs). The Department of Statistics and Programme Implementation (MoSPI) oversees the efforts of state governments and actively engages in discussions regarding the formulation of national indicators for the SDGs. Additionally, Niti Aayog, in collaboration with union ministries and state governments, receives support from the United Nations (UN) country team in India. This collaboration aims to establish connections, ensure that no one is marginalized, and advocate for sufficient funds to successfully realize the SDGs [3,4].

RESEARCH AIM

To delineate disparities in the data reporting mechanisms employed by the National Family Health Survey (NFHS-5) and the Health Management Information System (HMIS). The primary focus is on analyzing specific health indicators related to SDG Goals 2 and 3 in light of their current performance.

RESEARCH OBJECTIVES

1. To determine the present status of health indicators concerning SDG Goals 2 and 3 at the district level.

- 2. To assess the status of health indicators related to SDG Goals 2 and 3 at the block level.
- 3. To draw distinctions between the two sets of data reporting.

RESEARCH METHODOLOGY

This research adopted a cross-sectional study design, focusing on the entirety of Madhya Pradesh and its 52 districts over a one-year period from 2022 to 2023. The sample size was determined based on reported data under the Health Management Information System (HMIS) and the National Family Health Survey (NFHS-5), with an exclusion period accounting for the population left out of the survey or instances of underreported data on indicators.

The systematic sampling method was employed to observe the population of Madhya Pradesh, specifically targeting certain indicators throughout the one-year period. The study delved into the performance of each indicator in every district, utilizing a composite ranking method to assign scores and color codes to districts, ranging from aspirant (very low) to achiever (good).

The analysis was conducted to discern the disparities between two distinct data reporting systems, namely HMIS and NFHS-5. A composite index was generated through the standardized combination of seven indicators, establishing maximum and minimum values and calculating the index value for each region and indicator. Positive indicators, positively correlated with development, were identified, with higher values indicating superior performance. This composite index served as a practical statistical metric for comprehensively evaluating the overall performance of regions within the specified timeframe.

RESULTS & DISCUSSION

The Maternal Mortality Rate (MMR) reduction goal of 70 per lakh live births in the state encounters significant challenges. Districts such as Rewa, Shehdol, Katni, Anuppur, and Sidhi, which primarily consist of tribal areas, exhibit slower progress. Surprisingly, urban districts like Bhopal and Indore display unexpectedly higher MMR, indicating potential gaps in data handling and management. Identified gaps include challenges in data handling and management, especially in districts like Bhopal, Indore, Jabalpur, and Gwalior, where despite having adequate facilities, there is a struggle with maintaining clean and meaningful data. Tribal areas, such as Shahdol, Sidhi, Singroli, Anupur, and Jhabua, pose challenges due to distinct cultural norms. Additionally, issues like poor reporting of migrants and difficulties in tracking data across inter-state borders contribute to the complexities of MMR analysis.

The analysis of Under 5 Mortality Rate (U5MR) indicates higher mortality rates in districts like Panna, Katni, Anuppur, Umaria, Guna, Sheopur, and Sagar. Identified gaps involve nutritional care, sanitation, postnatal care, poverty in tribal areas, and the need for enhanced data tracking and monitoring. The challenges include addressing high malnourishment prevalence, improving postnatal care to reduce under-5 mortality, tackling economic disparities and poverty in underdeveloped districts, strengthening data monitoring, and enhancing the capacity of health workers (ASHA & ANM) to identify and address issues in the under-5 age group. The analysis of Full Immunization Coverage (9-11 months) reveals low performance in districts like Betul, Chhindwara, Seoni, Mandla, and Balaghat. Identified gaps include rural-urban divisions, awareness and acceptability issues, and challenges related to cold chain supply and inactive sub-centers. Challenges involve addressing rural-urban disparities in immunization coverage, increasing awareness to reduce hesitancy, and overcoming challenges in vaccine distribution and inactive healthcare sub-centers.

CONCLUSION

In conclusion, although there have been notable improvements in certain health indicators in Madhya Pradesh, the existence of persistent challenges underscores the need for comprehensive and sustained efforts. The ongoing struggle with data monitoring and capturing remains a significant hurdle, particularly in some developed districts of the state where performance is hindered by inadequate data management. Addressing these challenges is imperative for enhancing the overall health care system in Madhya Pradesh. By implementing measures to strengthen data management, bolstering healthcare infrastructure, and prioritizing comprehensive health interventions, the state can work towards ensuring that every individual has access to high-quality healthcare. However, it is evident that there is still a considerable distance to cover on the journey toward achieving Sustainable Development Goal 2, emphasizing the ongoing commitment required to overcome these challenges and further improve healthcare outcomes in the state.

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