

### Coverage of Nutrition and Health Interventions in TELANGANA Insights from the National Family Health Survey-4

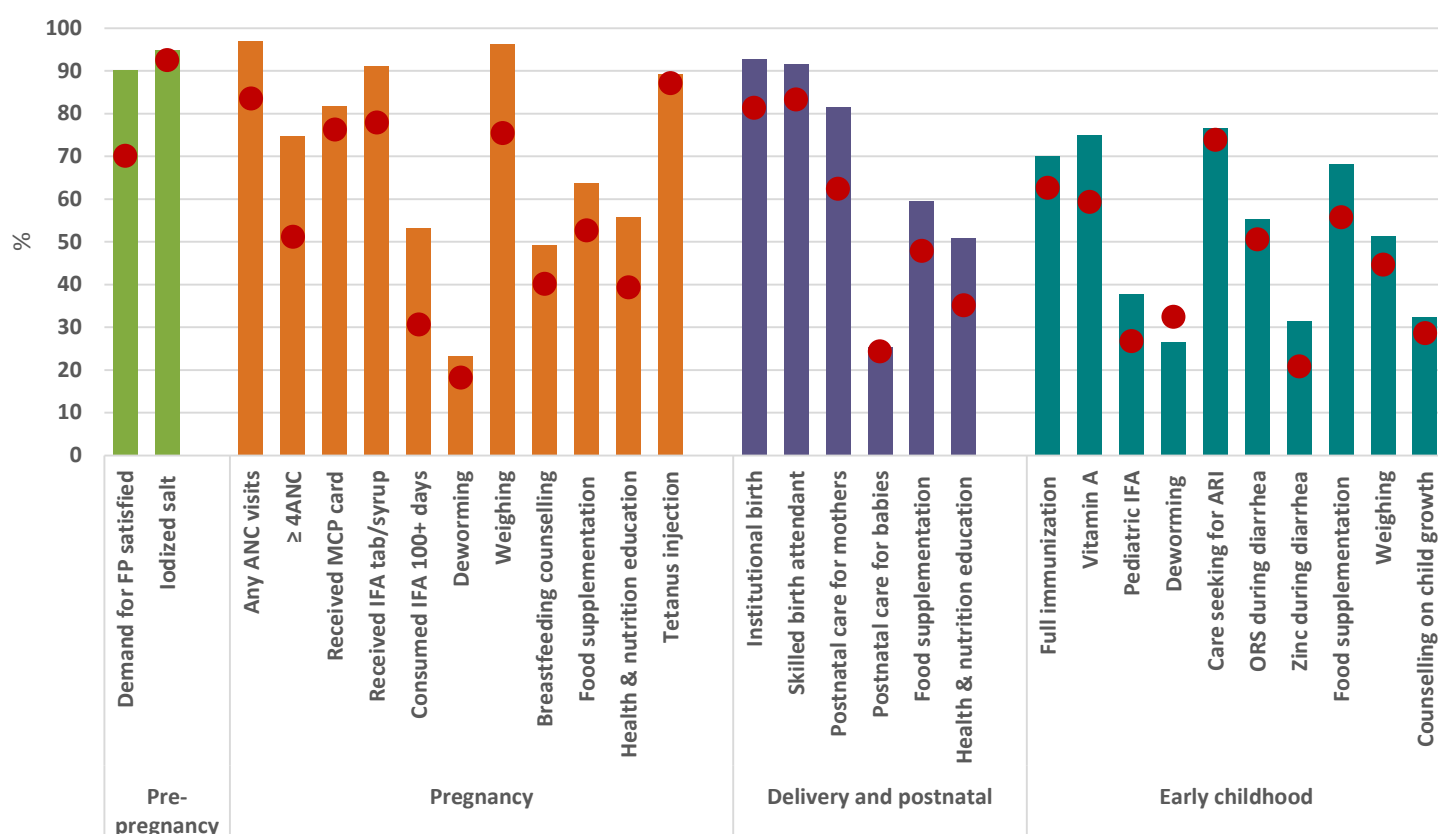
#### ABOUT THIS DATA NOTE

Nutrition-specific interventions are aimed at improving the proximal food, health, and care environment for women and children during the first 1000 days. They can help improve maternal and child health, improve diets and other nutrition practices, and reduce infections. These interventions span pregnancy, postnatal, and early childhood periods and include food and micronutrient supplementation, nutrition education and/or counselling, growth monitoring and promotion, as well as routine immunization, deworming, and care during illness. At 90% coverage, these interventions can contribute to 20% reduction in stunting and 61% reduction in severe wasting<sup>1</sup>.

India’s policy framework for health and nutrition is robust and includes most evidence-based nutrition and health interventions. Two large-scale national program platforms – the Integrated Child Development Services and the National Health Mission together provide the public sector delivery platforms with the mandate to deliver these interventions across the country. India’s efforts at scaling up nutrition interventions are now also supported by the National Nutrition Mission.

This *Data Note* describes the coverage of a set of key nutrition and health interventions. The findings here are based on data from the National Family Health Survey 2015-2016. Indicators to capture the coverage of the interventions here are all calculated for women (15-49 years) with a child under five years of age. All analyses are based on the last-born child for each woman and indicator definitions are provided in Annex 1 of this Note. For some indicators, age categories may vary.

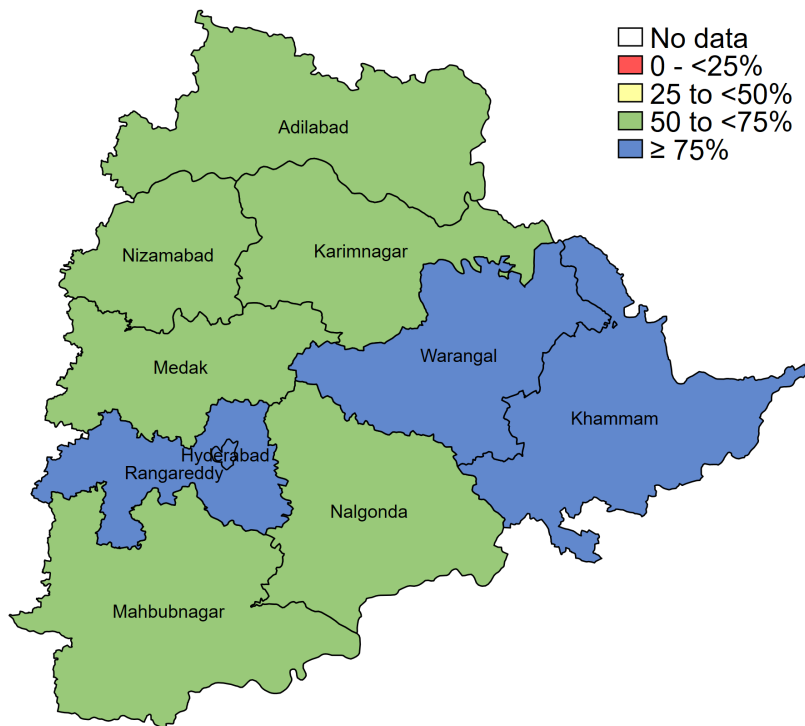
**FIGURE 1 Coverage of interventions across the continuum of care, in 2016**



Note: ANC = Antenatal care; ARI = Acute respiratory infection; FP = Family planning; IFA = Iron and folic acid; MCP = Mother and child protection; ORS = Oral rehydration salts; The bars represent state average, the dots represent India average.  
Source: NFHS-4.

<sup>1</sup>Bhutta, Z.A., J.K. Das, A. Rizvi, M.F. Gaffey, N. Walker, S. Horton, P. Webb, A. Lartey, R.E. Black, Lancet Nutrition Interventions Review G, et al. 2013. "Evidence-based interventions for improvement of maternal and child nutrition: what can be done and at what cost?" *The Lancet* 382(9890):452-477.

## MAP 1 Percentage of women who received 4 or more ANC visits, by district, 2016

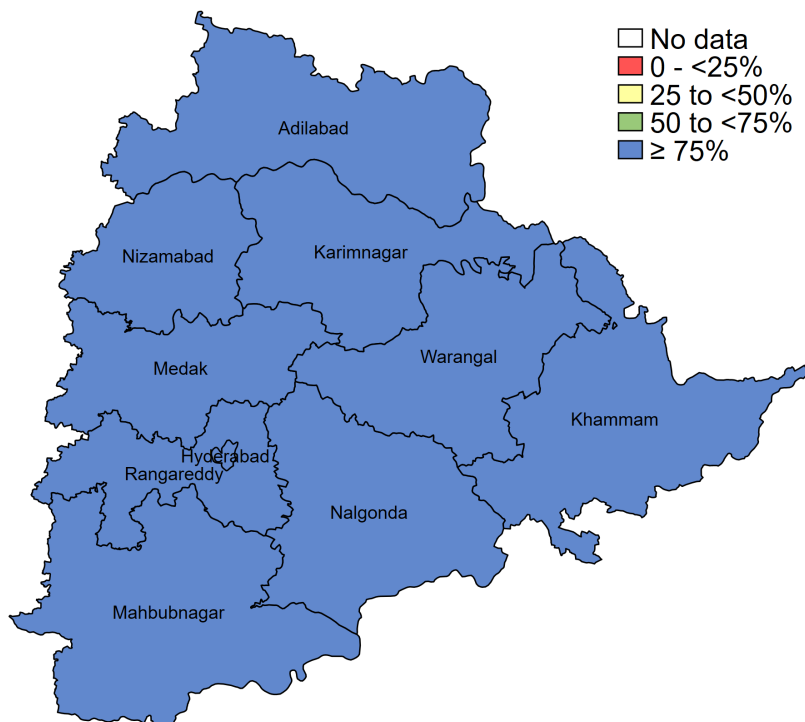


Top 5 districts, %	
Hyderabad	85.4
Warangal	84.6
Khammam	79.2
Rangareddy	77.6
Karimnagar	72.9

Bottom 5 districts, %	
Mahbubnagar	60.2
Medak	68.1
Adilabad	68.4
Nizamabad	70.1
Nalgonda	72.5

Source: NFHS-4.

## MAP 2 Percentage of women who were weighed during pregnancy, by district, 2016

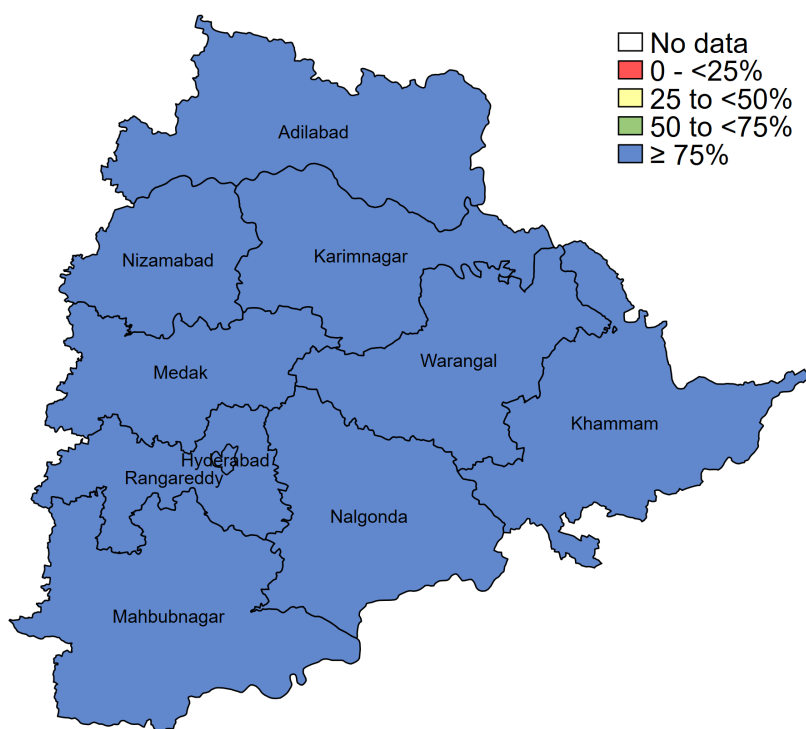


Top 5 districts, %	
Khammam	98.8
Nalgonda	97.8
Hyderabad	97.5
Karimnagar	97.5
Warangal	97.3

Bottom 5 districts, %	
Adilabad	92.1
Nizamabad	94.1
Mahbubnagar	94.9
Medak	95.2
Rangareddy	96.2

Source: NFHS-4.

### MAP 3 Percentage of women who received or bought any IFA during pregnancy, by district, 2016

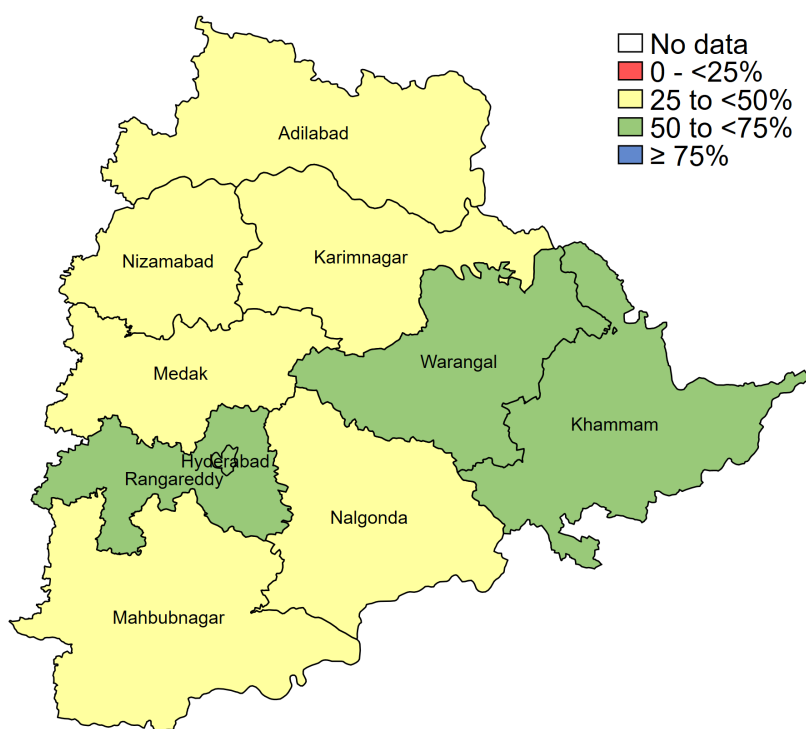


Top 5 districts, %	
Karimnagar	96.5
Nalgonda	96.3
Khammam	95.5
Rangareddy	92.9
Warangal	92.0

Bottom 5 districts, %	
Adilabad	81.9
Mahbubnagar	82.1
Nizamabad	89.9
Medak	90.0
Hyderabad	91.7

Source: NFHS-4.

### MAP 4 Percentage of women who consumed IFA for 100+ days during pregnancy, by district, 2016

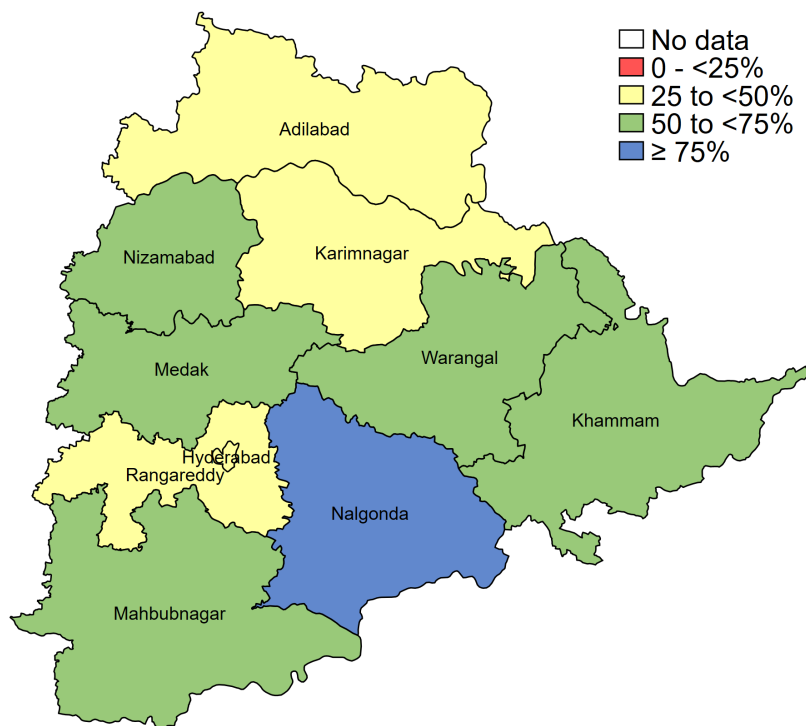


Top 5 districts, %	
Hyderabad	72.1
Warangal	70.6
Khammam	57.2
Rangareddy	54.1
Nizamabad	49.5

Bottom 5 districts, %	
Nalgonda	36.5
Medak	36.9
Adilabad	41.8
Mahbubnagar	49.1
Karimnagar	49.4

Source: NFHS-4.

## MAP 5 Percentage of women who received breastfeeding counselling during pregnancy, by district, 2016

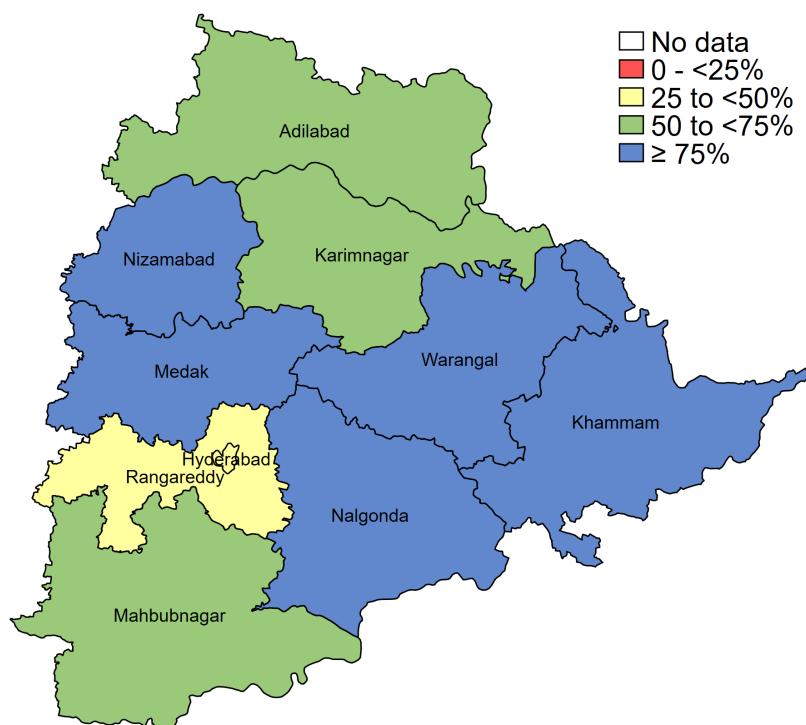


Top 5 districts, %	
Nalgonda	76.2
Khammam	74.1
Nizamabad	73.9
Warangal	73.9
Medak	63.5

Bottom 5 districts, %	
Hyderabad	17.1
Adilabad	28.4
Rangareddy	33.8
Karimnagar	47.3
Mahbubnagar	53.7

Source: NFHS-4.

## MAP 6 Percentage of women who received food supplements during pregnancy, by district, 2016

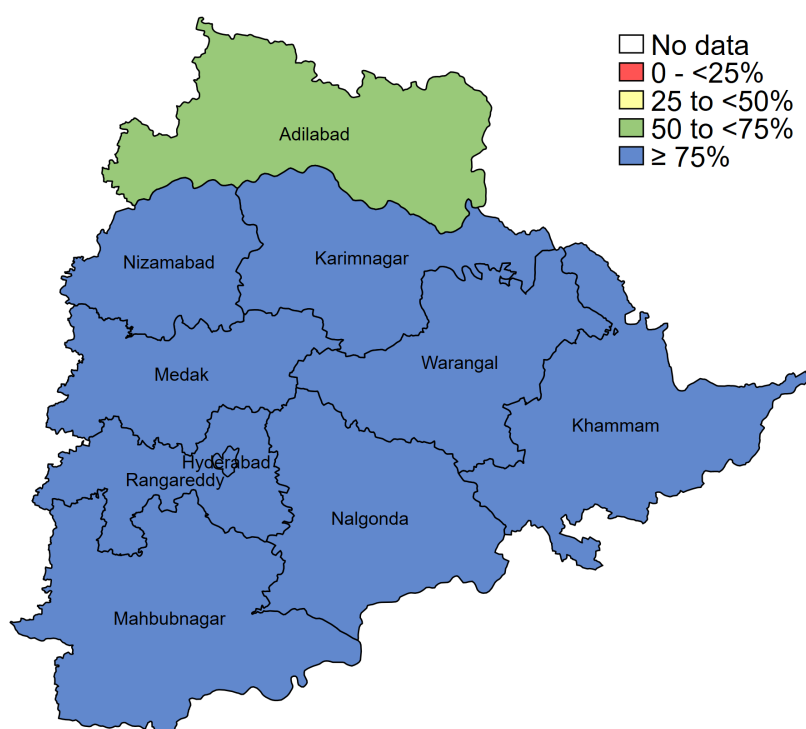


Top 5 districts, %	
Khammam	92.9
Nizamabad	81.6
Nalgonda	81.2
Medak	80.1
Warangal	79.4

Bottom 5 districts, %	
Hyderabad	25.9
Rangareddy	48.8
Adilabad	52.8
Karimnagar	71.9
Mahbubnagar	73.0

Source: NFHS-4.

## MAP 7 Percentage of women who gave birth in a health facility, by district, 2016

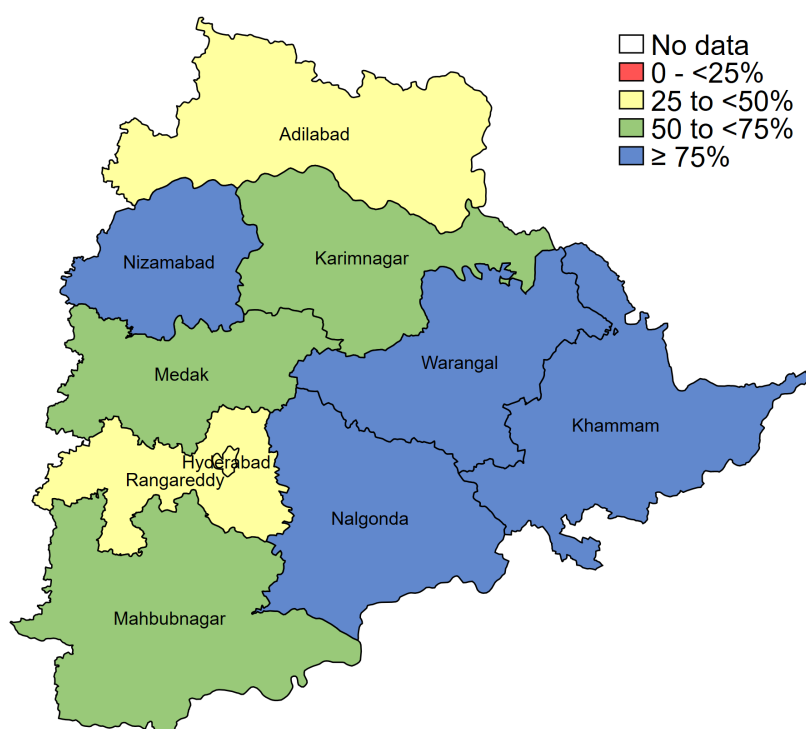


Top 5 districts, %	
Hyderabad	98.1
Warangal	98.0
Karimnagar	97.4
Nalgonda	95.9
Nizamabad	95.0

Bottom 5 districts, %	
Adilabad	73.1
Mahbubnagar	82.5
Medak	91.9
Rangareddy	94.3
Khammam	94.7

Source: NFHS-4.

## MAP 8 Percentage of women who received food supplements during lactation, by district, 2016

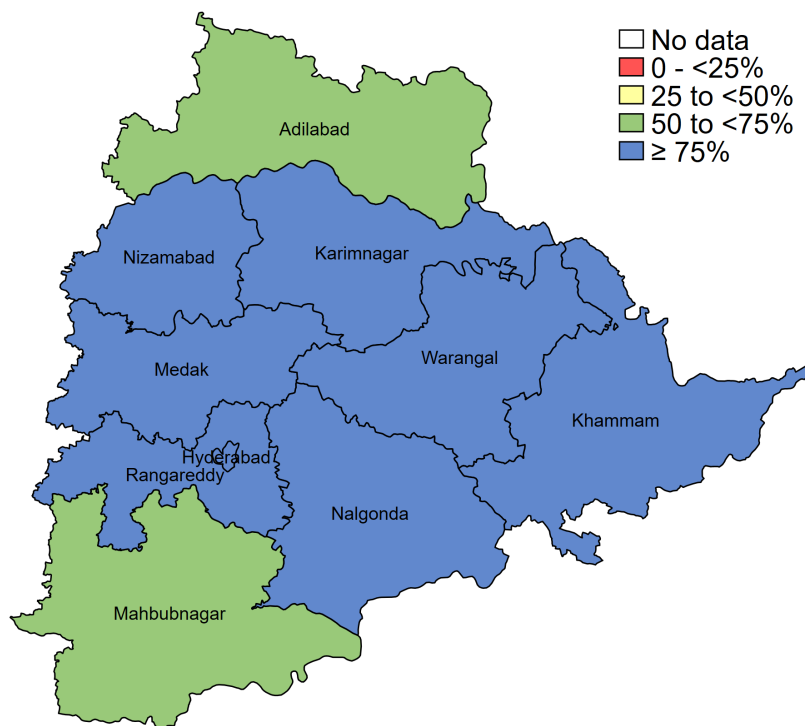


Top 5 districts, %	
Khammam	84.9
Nalgonda	82.3
Nizamabad	79.2
Warangal	78.1
Mahbubnagar	72.9

Bottom 5 districts, %	
Hyderabad	26.4
Rangareddy	41.3
Adilabad	47.4
Karimnagar	61.9
Medak	69.9

Source: NFHS-4.

## MAP 9 Percentage of mothers who received postnatal care within two days of childbirth, by district, 2016

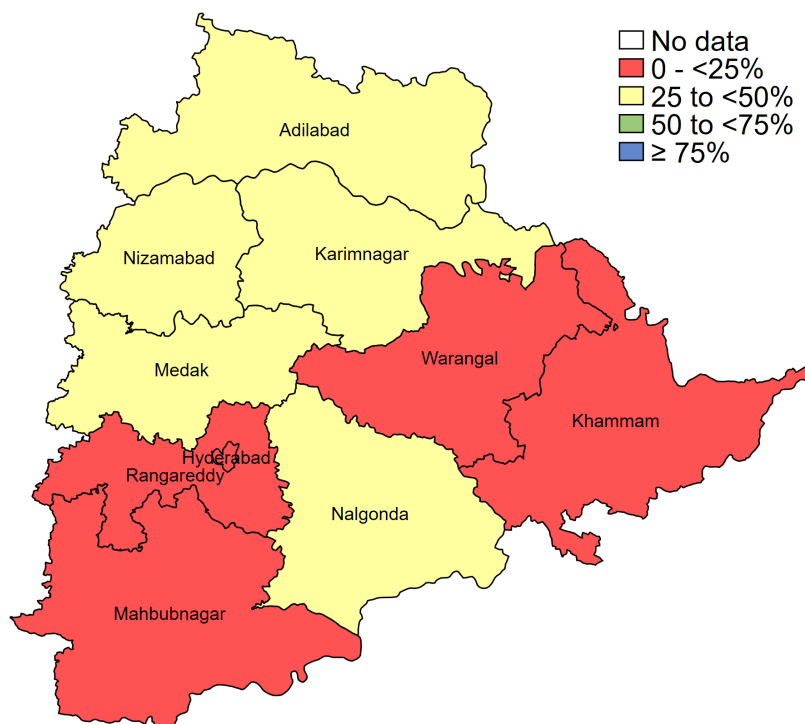


Top 5 districts, %	
Warangal	92.6
Karimnagar	91.2
Nalgonda	90.6
Nizamabad	87.3
Khammam	85.2

Bottom 5 districts, %	
Adilabad	56.9
Mahbubnagar	70.5
Hyderabad	80.3
Rangareddy	80.4
Medak	82.3

Source: NFHS-4.

## MAP 10 Percentage of children (0-59 months) who received postnatal care within two days of their birth, by district, 2016

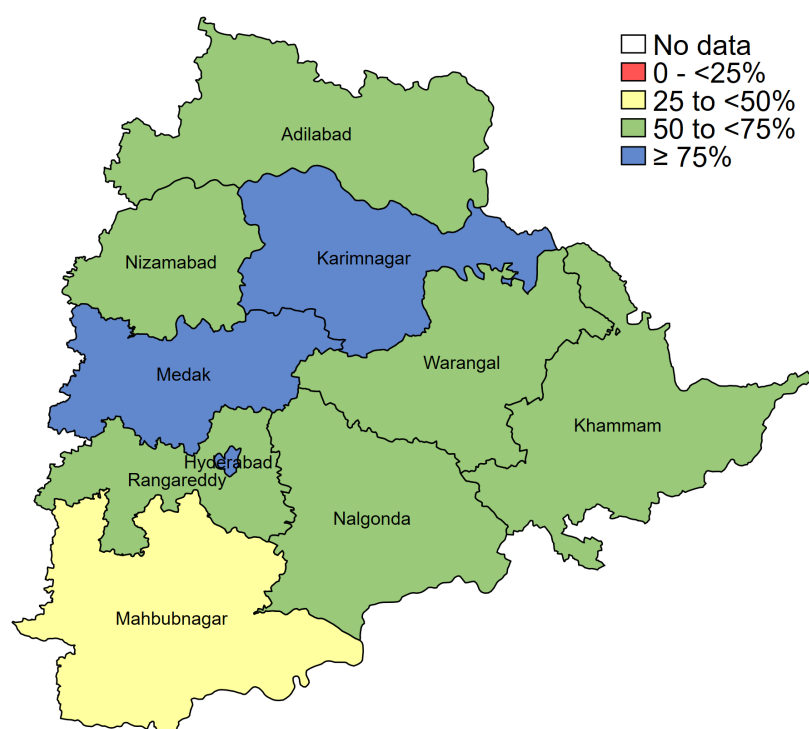


Top 5 districts, %	
Nalgonda	45.7
Karimnagar	40.0
Medak	37.6
Adilabad	30.3
Nizamabad	27.6

Bottom 5 districts, %	
Hyderabad	12.3
Rangareddy	16.1
Mahbubnagar	20.9
Warangal	21.6
Khammam	21.7

Source: NFHS-4.

## MAP 11 Percentage of children (12-23 months) who were fully immunized, by district, 2016

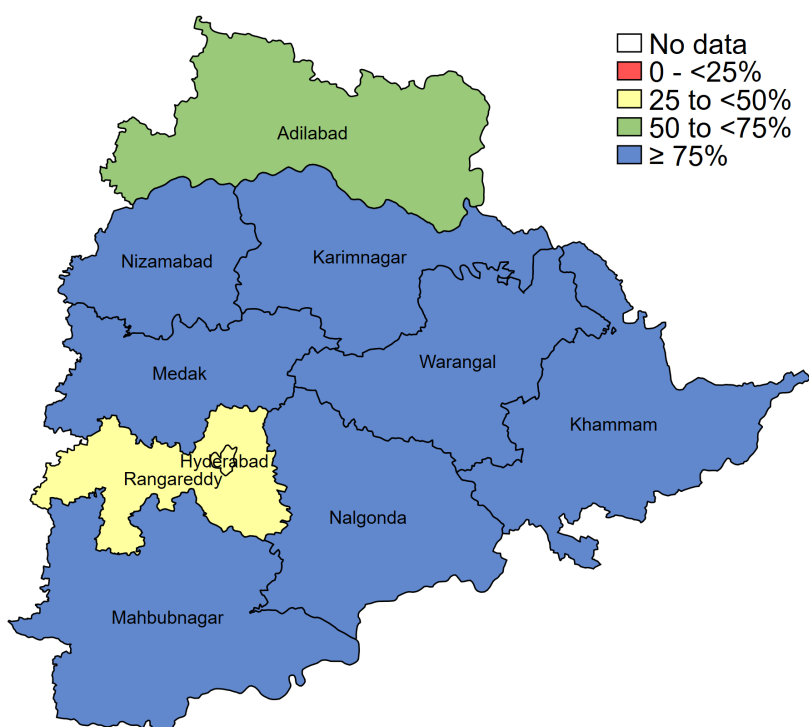


Top 5 districts, %	
Karimnagar	84.3
Medak	83.3
Hyderabad	75.5
Rangareddy	70.6
Adilabad	70.0

Bottom 5 districts, %	
Mahbubnagar	49.8
Khammam	62.7
Nizamabad	62.8
Warangal	68.9
Nalgonda	69.1

Source: NFHS-4.

## MAP 12 Percentage of children (6-35 months) who received food supplements, by district, 2016

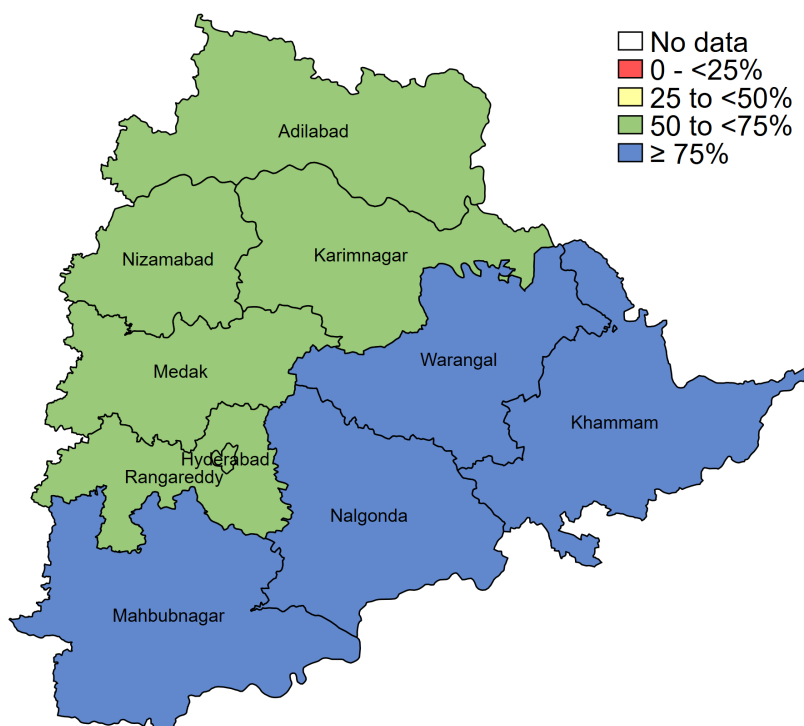


Top 5 districts, %	
Khammam	90.7
Karimnagar	85.1
Medak	83.3
Nalgonda	82.9
Warangal	82.7

Bottom 5 districts, %	
Hyderabad	36.5
Rangareddy	42.1
Adilabad	71.8
Nizamabad	79.9
Mahbubnagar	82.6

Source: NFHS-4.

## MAP 13 Percentage of children (6-59 months) who received vitamin A supplements, by district, 2016

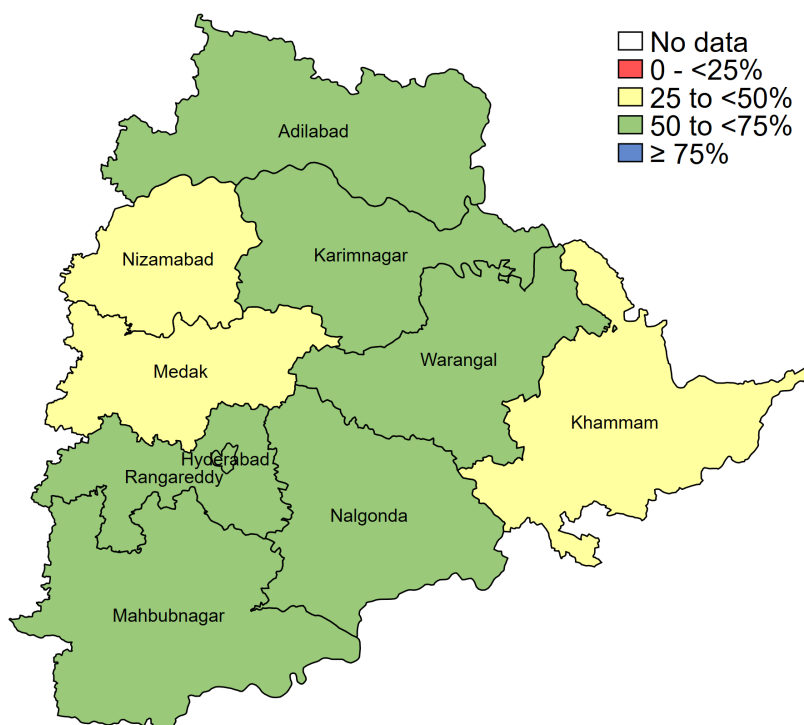


Top 5 districts, %	
Warangal	87.9
Khammam	81.6
Nalgonda	80.9
Mahbubnagar	76.7
Medak	74.4

Bottom 5 districts, %	
Karimnagar	69.0
Rangareddy	71.1
Hyderabad	71.6
Adilabad	71.7
Nizamabad	72.2

Source: NFHS-4.

## MAP 14 Percentage of children (0-59 months) with diarrhea who received ORS, by district, 2016

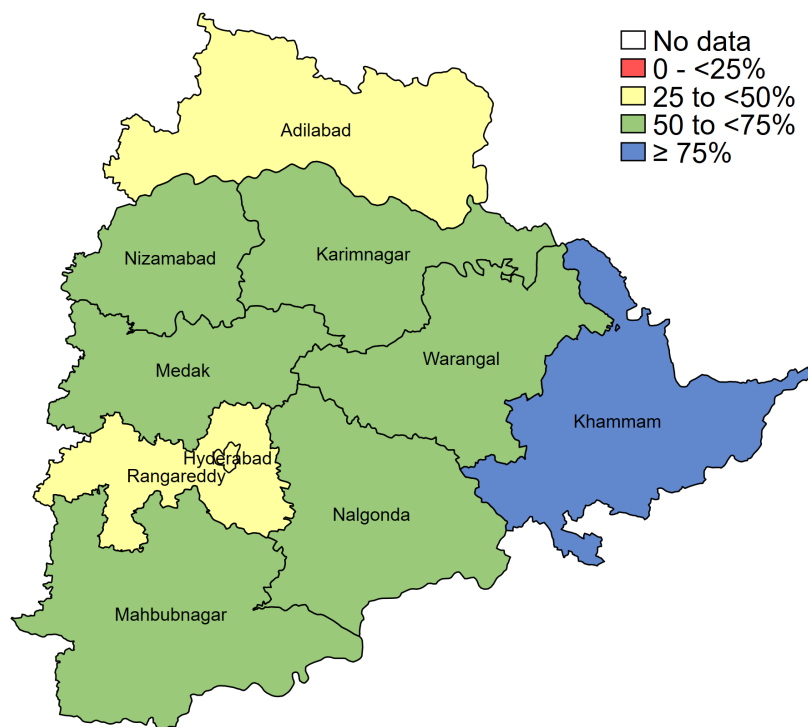


Top 5 districts, %	
Mahbubnagar	74.0
Karimnagar	67.5
Rangareddy	58.1
Adilabad	56.6
Nalgonda	56.2

Bottom 5 districts, %	
Nizamabad	35.5
Medak	38.4
Khammam	42.2
Hyderabad	50.4
Warangal	52.4

Source: NFHS-4.

## MAP 15 Percentage of children (0-59 months) who were weighed in the last 12 months, by district, 2016

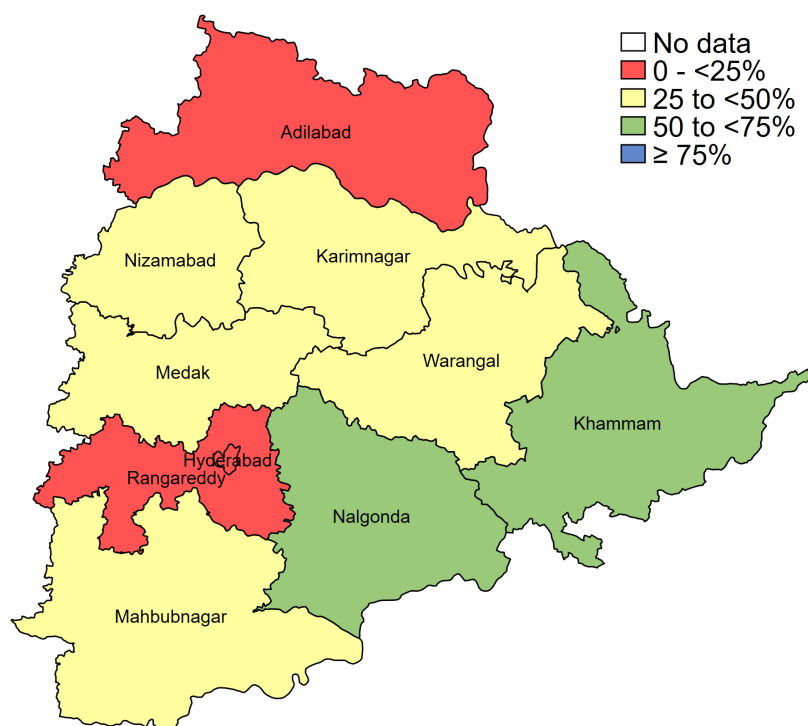


Top 5 districts, %	
Khammam	75.3
Nalgonda	68.8
Medak	68.5
Warangal	65.9
Nizamabad	64.4

Bottom 5 districts, %	
Hyderabad	21.3
Rangareddy	33.2
Adilabad	47.6
Karimnagar	55.3
Mahbubnagar	62.3

Source: NFHS-4.

## MAP 16 Percentage of mothers with children (0-59 months) who were counselled about child growth after their child was weighed, by district, 2016



Top 5 districts, %	
Khammam	58.8
Nalgonda	53.9
Warangal	49.3
Medak	45.3
Mahbubnagar	39.5

Bottom 5 districts, %	
Rangareddy	12.4
Hyderabad	14.3
Adilabad	20.4
Karimnagar	32.3
Nizamabad	35.9

Source: NFHS-4.

# DASHBOARD: Coverage of nutrition-specific interventions, by district, 2016

<25%	25-<50%	50-<75%	≥75%
------	---------	---------	------

State/District	TELANGANA	Adilabad	Hyderabad	Karimnagar	Khammam	Manubunagar	Medak	Nalgonda	Nizamabad	Rangareddy	Warangal		
		Pre-pregnancy	Demand for FP satisfied	90.3	86.9	86.0	82.0	94.8	92.4	88.6	96.5	89.1	93.9
	Iodized salt	94.9	96.6	97.1	98.0	98.7	79.6	97.5	89.0	94.6	98.0	96.3	
Pregnancy	Any ANC visits	97.0	94.1	97.5	97.5	98.8	96.8	96.1	98.3	95.2	96.7	98.0	
	≥4ANC	74.8	68.4	85.4	72.9	79.2	60.2	68.1	72.5	70.1	77.6	84.6	
	Received MCP card	81.7	74.5	66.8	78.9	92.6	84.0	93.7	88.0	92.7	78.8	87.0	
	Received IFA tab/syrup	91.1	81.9	91.7	96.5	95.5	82.1	90.0	96.3	89.9	92.9	92.0	
	Consumed IFA 100+ days	53.3	41.8	72.1	49.4	57.2	49.1	36.9	36.5	49.5	54.1	70.6	
	Deworming	23.2	26.7	19.9	33.5	21.5	27.8	14.6	23.5	21.1	20.7	25.1	
	Weighing	96.3	92.1	97.5	97.5	98.8	94.9	95.2	97.8	94.1	96.2	97.3	
	Breastfeeding counselling	49.3	28.4	17.1	47.3	74.1	53.7	63.5	76.2	73.9	33.8	73.9	
	Food supplementation	63.6	52.8	25.9	71.9	92.9	73.0	80.1	81.2	81.6	48.8	79.4	
	Health & nutrition education	55.8	43.7	18.5	58.8	80.4	69.8	69.6	75.1	75.6	42.6	72.2	
	Tetanus injection	89.2	81.6	93.3	92.0	94.4	88.4	81.9	88.7	84.8	89.0	91.7	
	Delivery & postnatal	Institutional birth	92.7	73.1	98.1	97.4	94.7	82.5	91.9	95.9	95.0	94.3	98.0
		Skilled birth attendant	91.7	79.0	99.8	98.1	96.9	85.9	86.9	93.4	77.2	91.6	96.6
Postnatal care for mothers		81.6	56.9	80.3	91.2	85.2	70.5	82.3	90.6	87.3	80.4	92.6	
Postnatal care for babies		25.5	30.3	12.3	40.0	21.7	20.9	37.6	45.7	27.6	16.1	21.6	
Food supplementation		59.5	47.4	26.4	61.9	84.9	72.9	69.9	82.3	79.2	41.3	78.1	
Health & nutrition education		50.8	35.4	19.6	49.2	74.0	64.7	57.5	76.1	71.0	34.7	70.1	
Early childhood	Full immunization	70.0	70.0	75.5	84.3	62.7	49.8	83.3	69.1	62.8	70.6	68.9	
	Vitamin A	75.0	71.7	71.6	69.0	81.6	76.7	74.4	80.9	72.2	71.1	87.9	
	Paediatric IFA	37.8	43.7	33.1	35.4	35.8	24.4	34.5	54.7	43.1	36.1	46.4	
	Deworming	26.7	29.8	20.4	27.6	27.9	27.1	22.2	29.8	32.3	23.8	36.3	
	Care seeking for ARI	76.6	71.9	92.8	75.9	75.5	73.0	67.4	79.9	74.5	83.4	66.7	
	ORS during diarrhea	55.3	56.6	50.4	67.5	42.2	74.0	38.4	56.2	35.5	58.1	52.4	
	Zinc during diarrhea	31.5	42.4	20.5	26.3	26.9	59.4	37.3	25.2	24.4	33.6	26.0	
	Food supplementation	68.3	71.8	36.5	85.1	90.7	82.6	83.3	82.9	79.9	42.1	82.7	
	Weighing	51.3	47.6	21.3	55.3	75.3	62.3	68.5	68.8	64.4	33.2	65.9	
	Counselling on child growth	32.4	20.4	14.3	32.3	58.8	39.5	45.3	53.9	35.9	12.4	49.3	

## Summary of findings

- **High coverage ( $\geq 75\%$ ):** Sustained efforts are required to maintain high coverage for the following interventions:
  - *Before & during pregnancy:* meeting the demand for planning, iodized salt, any ANC visits, MCP card, IFA provision, weighing, tetanus toxoid injection.
  - *Delivery & postnatal:* institutional birth, skilled birth attendant, postnatal care for mothers.
  - *Early childhood:* vitamin A, care seeking for ARI.
- **Low coverage ( $< 50\%$ ):** The state should focus efforts on increasing coverage of the following interventions:
  - *Before & during pregnancy:* deworming, breastfeeding counselling.
  - *Delivery & postnatal:* postnatal care for babies.
  - *Early childhood:* IFA supplementation, deworming, zinc during diarrhea, counselling on child growth.
- **Missed opportunities:** Coverage of postnatal care is higher for mothers than for babies. Many women receive some IFA but fewer are consuming IFA for at least 100 days during pregnancy, and few women are receiving deworming pills. When children are weighed, the mother often does not receive counselling on the child's weight.

## ANNEX 1 Definition of indicators used in the analyses

Indicators	Definition
<b>Pre-pregnancy</b>	
Demand for FP satisfied	Percentage of women (15-49 years) who have their need for family planning satisfied with modern methods.
Iodized salt	Percentage of households with children under 5 years of age using iodized salt.
<b>Pregnancy</b>	
Any ANC visits	Percentage of women (15-49 years) with children under 5 years of age who were attended by any trained provider ever or at least once, when they were pregnant with their youngest child.
$\geq 4$ ANC	Percentage of women (15-49 years) with children under 5 years of age who were attended by any trained provider 4 or more times, when they were pregnant with their youngest child.
Received MCP card	Percentage of women (15-49 years) with children under 5 years of age who received the Mother and Child Protection card after pregnancy registration, when they were pregnant with their youngest child.
Received IFA	Percentage of women (15-49 years) with children under 5 years of age who received or bought any IFA tablets/syrup, when they were pregnant with their youngest child.
Consumed IFA for 100+ days	Percentage of women (15-49 years) with children under 5 years of age who consumed IFA tablets/syrup for 100 days or more, when they were pregnant with their youngest child.
Deworming	Percentage of women (15-49 years) with children under 5 years of age who received any deworming drug, when they were pregnant with their youngest child.
Weighing	Percentage of women (15-49 years) with children under 5 years of age who were weighed when they were pregnant with their youngest child.
Breastfeeding counselling	Percentage of women (15-49 years) with children under 5 years of age who received advice on breastfeeding from any provider, when they were pregnant with their youngest child.
Food supplementation	Percentage of women (15-49 years) with children under 5 years of age who received food supplements from the <i>anganwadi center</i> (AWC), when they were pregnant with their youngest child.
Health & nutrition education	Percentage of women (15-49 years) with children under 5 years of age who received health and nutrition education from the AWC, when they were pregnant with their youngest child.
Tetanus injection	Percentage of women (15-49 years) with children under 5 years of age who received at least 2 TT injections when they were pregnant with their youngest child.
<b>Delivery and postnatal care</b>	
Institutional birth	Percentage of women (15-49 years) with children under 5 years of age who delivered their youngest child in a health facility.
Skilled birth attendant	Percentage of women (15-49 years) with children under 5 years of age who were attended by skilled health personnel when they delivered their youngest child.
Postnatal care for mothers	Percentage of women (15-49 years) with children under 5 years of age who received postnatal care, while in facility or at home, two days after they delivered their youngest child.
Postnatal care for babies	Percentage of last-born children (0-59 months) in the last 5 years, who received postnatal care within two days after they were born.
Food supplementation	Percentage of women (15-49 years) with children under 5 years of age who received food supplements from the AWC, when they were breastfeeding their youngest child.
Health & nutrition education	Percentage of women (15-49 years) with children under 5 years of age who received health and nutrition education from the AWC, when they were breastfeeding their youngest child.
<b>Early childhood</b>	
Full immunization	Percentage of last-born children (12-23 months) in the last 5 years who received one dose of BCG vaccine, three doses of polio vaccine, three doses of DTP3 vaccine, and one dose of measles vaccine.
Vitamin A	Percentage of last-born children (6-59 months) in the last 5 years, who received vitamin A supplements in the six months preceding the survey.
Pediatric IFA	Percentage of last-born children (6-59 months) in the last 5 years, who received iron supplements in the last 7 days prior to the survey.
Deworming	Percentage of last-born children (12-59 months) in the last 5 years, who received albendazole or any other deworming drug in the last 6 months prior to the survey.
Care seeking for ARI	Percentage of last-born children (0-59 months) in the last 5 years, with suspected ARI symptoms in the last two weeks, who were taken to a health care provider.
ORS during diarrhea	Percentage of last-born children (0-59 months) in the last 5 years, with diarrhea in the last two weeks, who received ORS.
Zinc during diarrhea	Percentage of last-born children (2-59 months) in the last 5 years, with diarrhea in the last two weeks who received zinc.
Food supplementation	Percentage of last-born children (6-35 months) in the last 5 years, who received food supplements from the AWC in the last 12 months prior to the survey.
Weighing	Percentage of last-born children (0-59 months) in the last 5 years, who were ever weighed in the last 12 months.
Counselling on child growth	Percentage of women (15-49 years) with children under 5 years of age, who were counselled about their youngest child's growth after they were weighed in the last 12 months prior to the survey.

Led by IFPRI 

## AUTHORS

**Priyanjana Pramanik**, Research Analyst, IFPRI

**Rasmi Avula**, Research Fellow, IFPRI

**Phuong Hong Nguyen**, Research Fellow, IFPRI

**Lan Mai Tran**, Independent Researcher

**Samuel Scott**, Associate Research Fellow, IFPRI

**Purnima Menon**, Senior Research Fellow, IFPRI

## SUGGESTED CITATION

Pramanik. P., R. Avula, P.H. Nguyen, L.M. Tran, S. Scott, and P. Menon. 2018. *Coverage of Nutrition and Health Interventions in Telangana: Insights from the National Family Health Survey-4*. POSHAN Data Note 34. New Delhi, India: International Food Policy Research Institute.

## ABOUT POSHAN

Partnerships and Opportunities to Strengthen and Harmonize Actions for Nutrition in India (POSHAN) is a multi-year initiative that aims to support the use of data and evidence in decision-making for nutrition in India. It is supported by the Bill & Melinda Gates Foundation and led by IFPRI in India.

## ABOUT DATA NOTES

POSHAN Data Notes focus on data visualization to highlight geographic and/or thematic issues related to nutrition in India. They draw on multiple sources of publically available data.

## CONTACT US

Email: [IFPRI\\_POSHAN@cgiar.org](mailto:IFPRI_POSHAN@cgiar.org)

## IFPRI-NEW DELHI INTERNATIONAL FOOD POLICY RESEARCH INSTITUTE

NASC Complex, CG Block,  
Dev Prakash Shastri Road,  
Pusa, New Delhi 110012, India  
T+91.11.66166565  
F+91.11.66781699

## IFPRI-HEADQUARTERS INTERNATIONAL FOOD POLICY RESEARCH INSTITUTE

1201 Eye Street, NW,  
Washington, DC 20005 USA  
T. +1.202.862.5600  
F. +1.202.467.4439  
Skype: IFPRIhomeoffice  
[ifpri@cgiar.org](mailto:ifpri@cgiar.org)  
[www.ifpri.org](http://www.ifpri.org)

This publication has been prepared by POSHAN. It has not been peer reviewed. Any opinions stated herein are those of the author(s) and do not necessarily reflect the policies of the International Food Policy Research Institute.

Copyright © 2018 International Food Policy Research Institute. All rights reserved. For permission to republish, contact [ifpri-copyright@cgiar.org](mailto:ifpri-copyright@cgiar.org).