

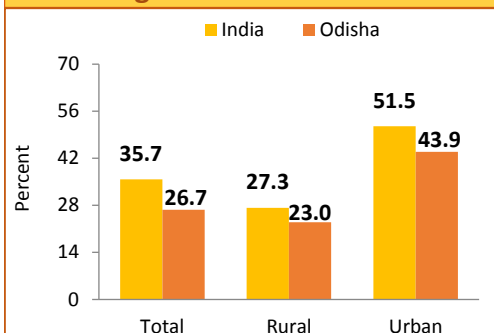
Health in NFHS- 4

Odisha Factsheet-2

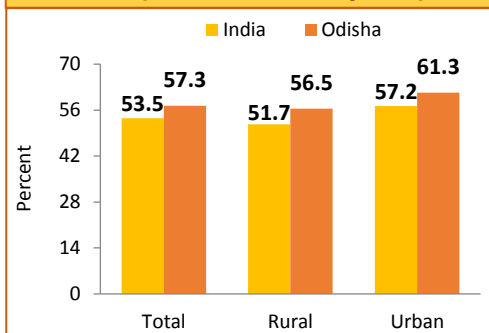


Maternal Health

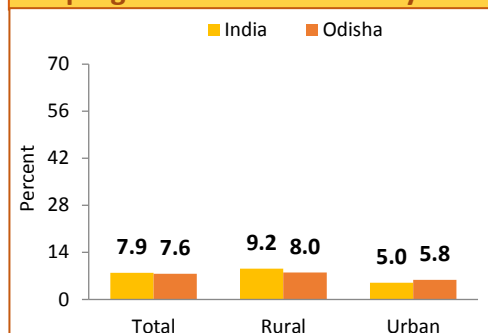
Women with 10 or more years of schooling



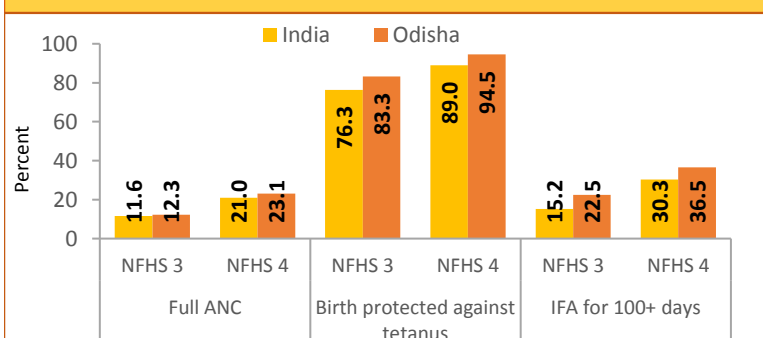
Current use of family planning method (women, 15-49 years)



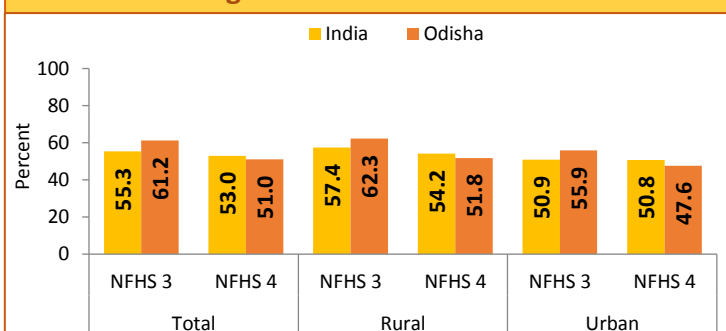
Women 15-19 already mothers or pregnant at time of survey



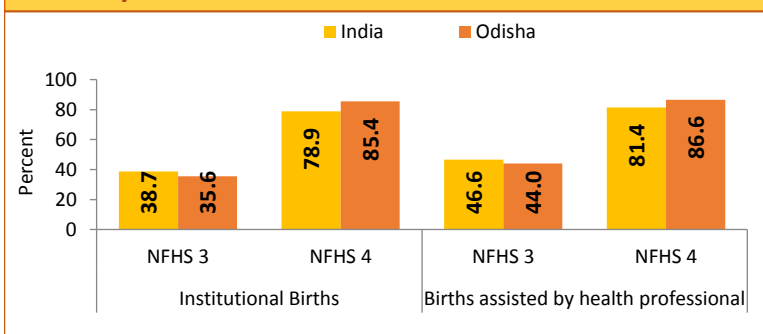
Antenatal Care



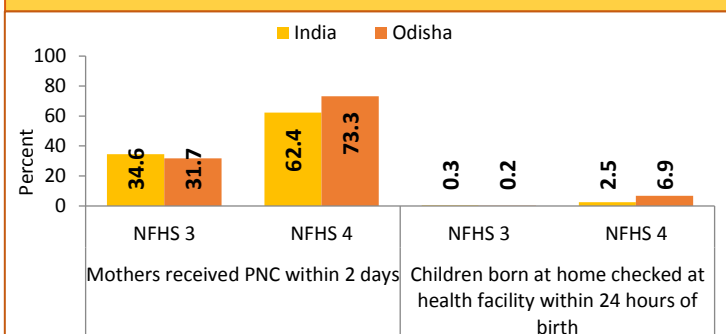
Anaemia among women



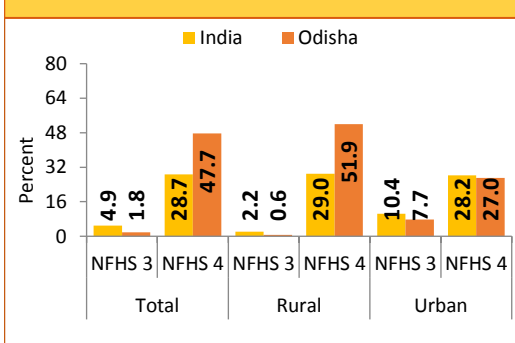
Delivery Care



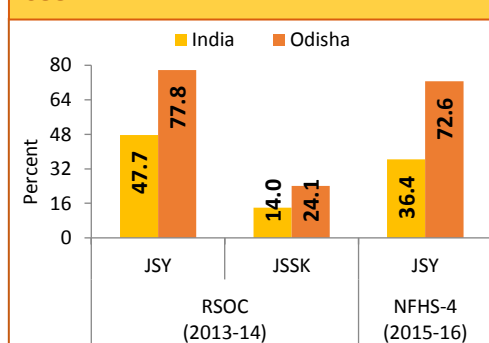
Postnatal Care



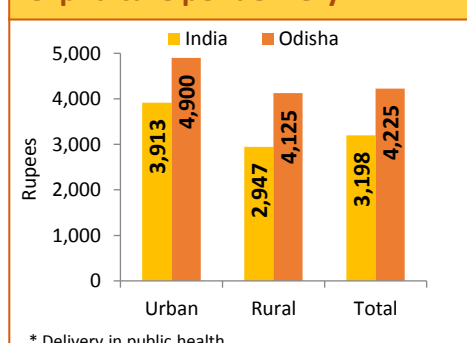
Any member covered by a health scheme or health insurance



Access to benefits under JSY and JSSK

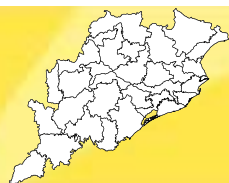


Average out of pocket expenditure per delivery*



* Delivery in public health

- Despite better access to antenatal care, delivery care, postnatal care, health insurance and benefits under JSY and JSSK, the out of pocket expenditure in the state is much higher than the national average.
- Lower percentage of women attaining 10 or more years of schooling does not seem to have impacted family planning or early marriage indicators. Odisha reports better family planning and lower early marriage among women.
- There is a sharp rise in health insurance coverage of atleast one family member in rural Odisha, much higher than the national average.



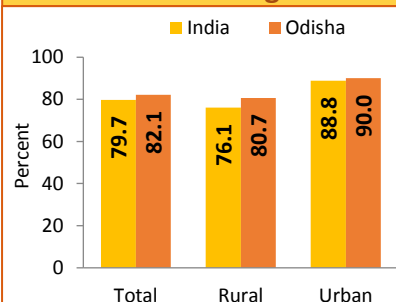
Health in NFHS- 4

Odisha Factsheet-2

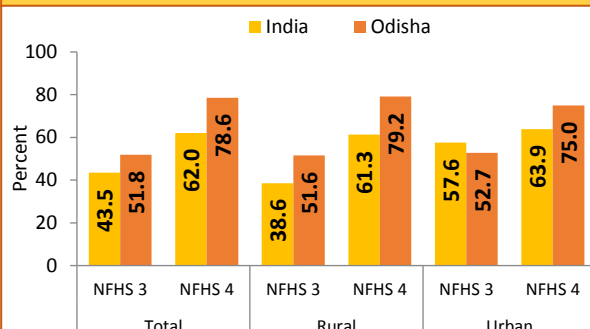


Child Health and Nutrition

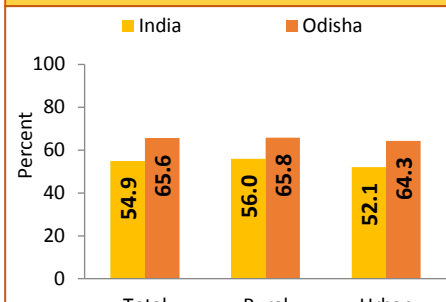
Children under 5 years whose birth was registered



Children 12-23 months fully immunized

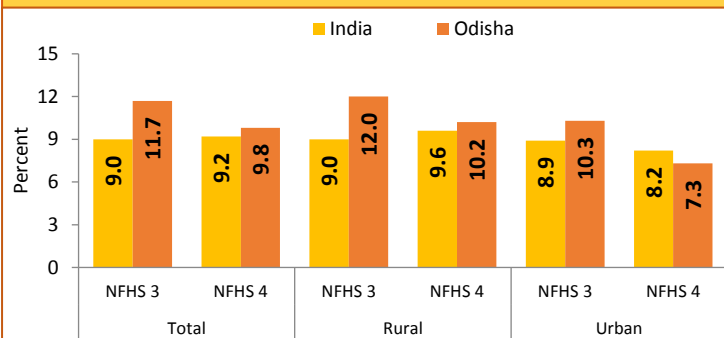


Exclusive breastfeeding for 6 months

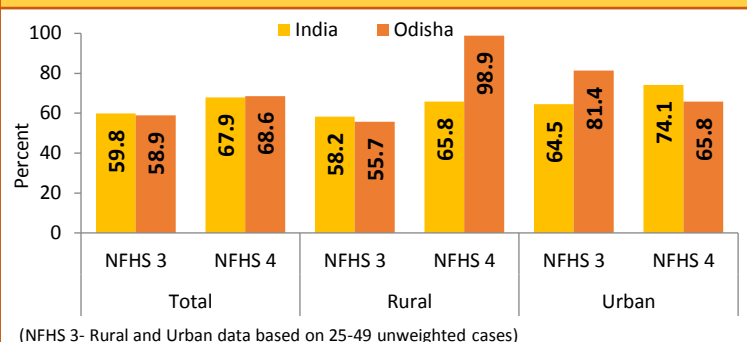


Child Morbidity and access to health facilities

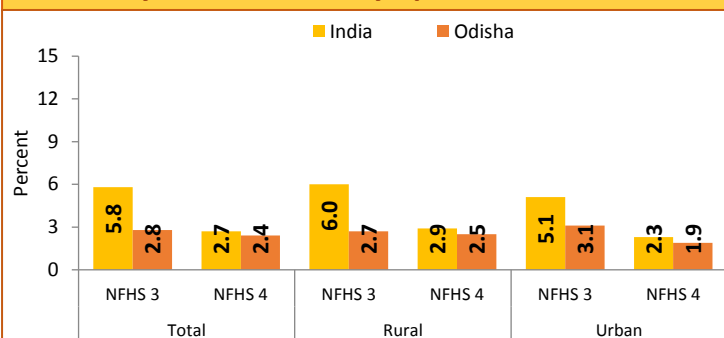
Morbidity- Prevalence of diarrhoea



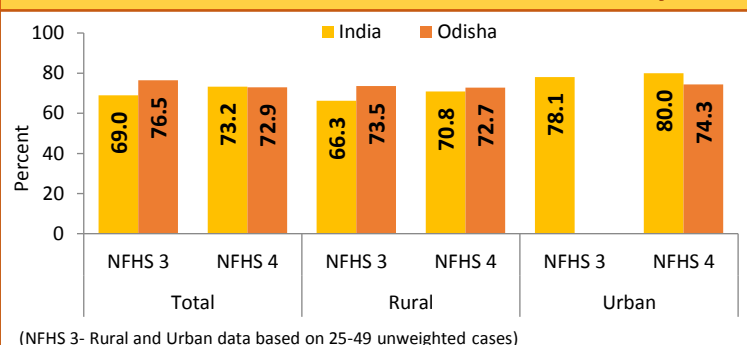
Children with diarrhoea taken to health facility



Morbidity- Prevalence of symptoms of ARI

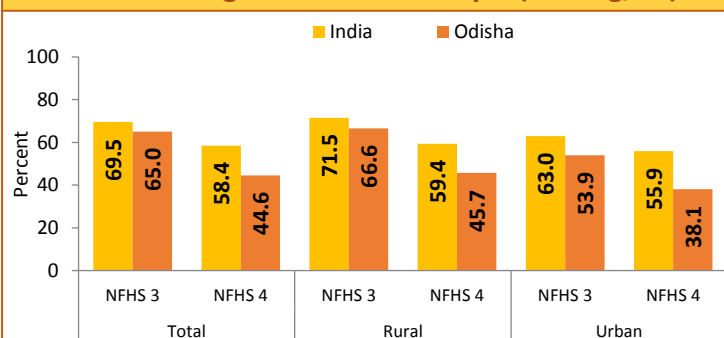


Children with ARI or fever taken to health facility

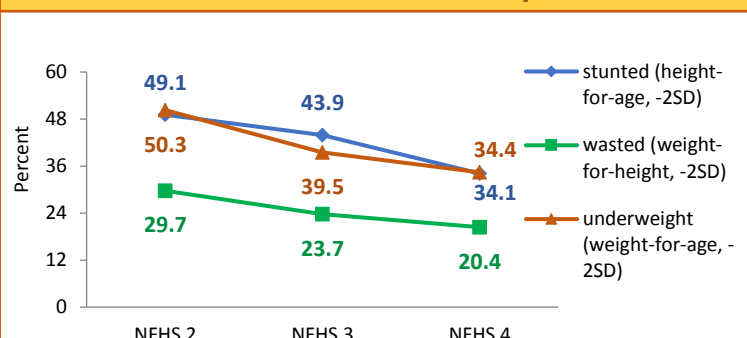


Anaemia and Nutrition among children

Anaemia among children under 5 yrs. (<11.0 g/dl)



Nutritional status of children under 5 years



- While access to health care and nutrition amongst children has been reported better in Odisha, incidence of diarrhoea has been reported higher in rural Odisha compared to rural India. Access to health care in diarrhoea and ARI/Fever cases has been reported lower in urban Odisha.