POSHAN
Led by IFPRI

DISTRICT NUTRITION PROFILE

MORENA | MADHYA PRADESH

MARCH 2022

About District Nutrition Profiles:

District Nutrition Profiles (DNPs) are available for 707 districts in India. They present trends for key nutrition and health outcomes and their cross-sectoral determinants in a district. The DNPs are based on data from the National Family Health Survey (NFHS)-4 (2015-2016) and NFHS-5 (2019-2020). They are aimed primarily at district administrators, state functionaries, local leaders, and development actors working at the district-level.
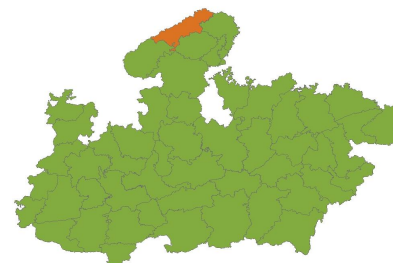

Figure 1: Map highlights district Morena in the state/UT of Madhya Pradesh

What factors lead to child undernutrition?

Optimum fetal and child nutrition and development

IMMEDIATE DETERMINANTS
Breastfeeding, nutrient-rich foods, caregiving practices, low burden of infectious diseases

NUTRITION-SPECIFIC INTERVENTIONS
Service delivery to mothers and infants along the continuum of care, access to health facilities

UNDERLYING AND BASIC DETERMINANTS
Women's status, sanitation and hygiene, food security, socio-economic conditions

INTERVENTIONS THAT AFFECT UNDERLYING AND BASIC DETERMINANTS
Women's empowerment, sanitation, agriculture, and social safety net programs

Source: Adapted from Black et al. (2008)

Given the focus of India's national nutrition mission on child undernutrition, the DNPs focus on the determinants of child undernutrition (Figure on the left). Multiple determinants of suboptimal child nutrition and development contribute to the outcomes seen at the district-level. Different types of interventions can influence these determinants. Immediate determinants include inadequacies in food, health, and care for infants and young children, especially in the first two years of life. Nutrition-specific interventions such as health service delivery at the right time during pregnancy and early childhood can affect immediate determinants. Underlying and basic determinants include women's status, household food security, hygiene, and socio-economic conditions. Nutrition-sensitive interventions such as social safety nets, sanitation programs, women's empowerment, and agriculture programs can affect underlying and basic determinants.

District demographic profile, 2019-20 — Morena

903/1,000 Sex ratio (females per 1,000 males) of the total population	**576,293** Number of women in reproductive age (15–49 yrs)

54,153 Number of pregnant women

40,317 Number of live births

255,415 Total number of children under 5 yrs

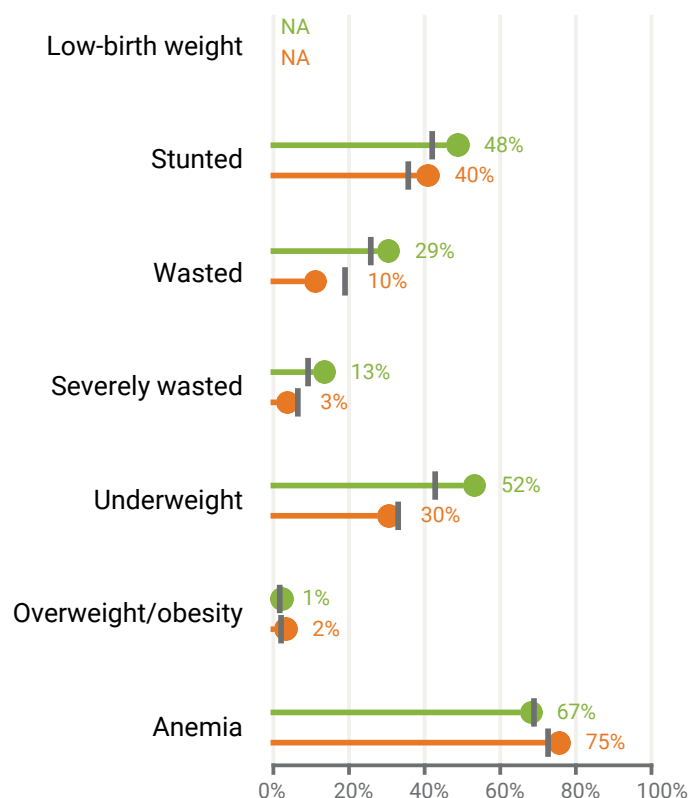**40,249** Children under 5 yrs whose births were registered

NITI Aayog   IIPS   unicef for every child   DataDENT

The state of nutrition outcomes among children (<5 years) — Morena

Legend: Madhya Pradesh | 2016 | 2020

Indicator	2016	2020
Low-birth weight	NA	NA
Stunted	48%	40%
Wasted	29%	10%
Severely wasted	13%	3%
Underweight	52%	30%
Overweight/obesity	1%	2%
Anemia	67%	75%

Burden on nutrition outcomes (2020)

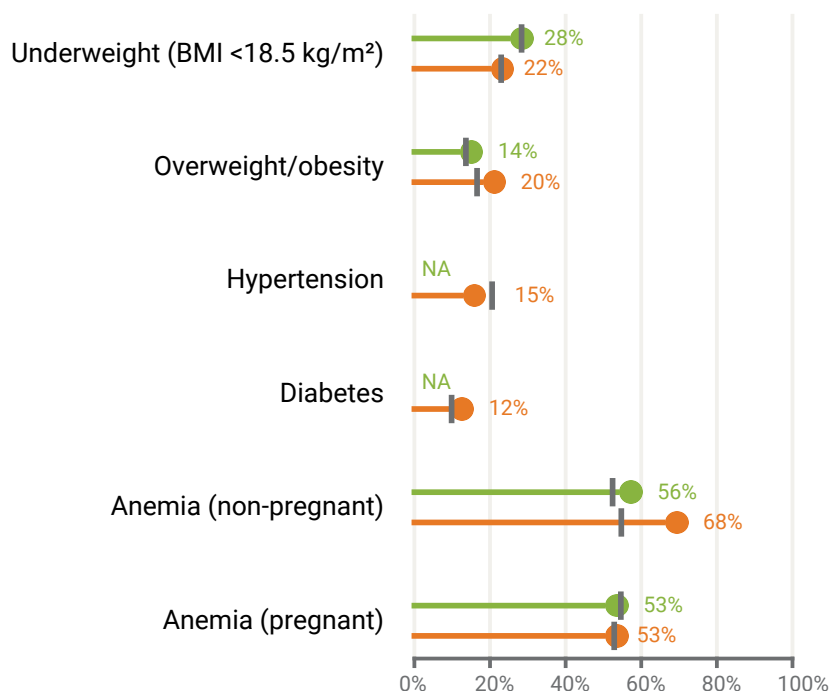| Indicators	No. of children (<5 yrs)
Low-birth weight	NA
Stunted	102,064
Wasted	25,822
Severely wasted	6,896
Underweight	75,654
Overweight/obesity	6,079
Anemia	171,300
Total children	**255,415**

Note: NA refers to data are unavailable for a given round of NFHS data.

Points of discussion:
- What are the trends in undernutrition among children under five years of age (stunting, wasting, underweight, and anemia)?
- What are the trends in overweight/obesity among children under five years of age in the district?

The state of nutrition outcomes among women (15-49 years) — Morena

Legend: Madhya Pradesh | 2016 | 2020

Indicator	2016	2020
Underweight (BMI <18.5 kg/m²)	28%	22%
Overweight/obesity	14%	20%
Hypertension	NA	15%
Diabetes	NA	12%
Anemia (non-pregnant)	56%	68%
Anemia (pregnant)	53%	53%

Burden on nutrition outcomes (2020)

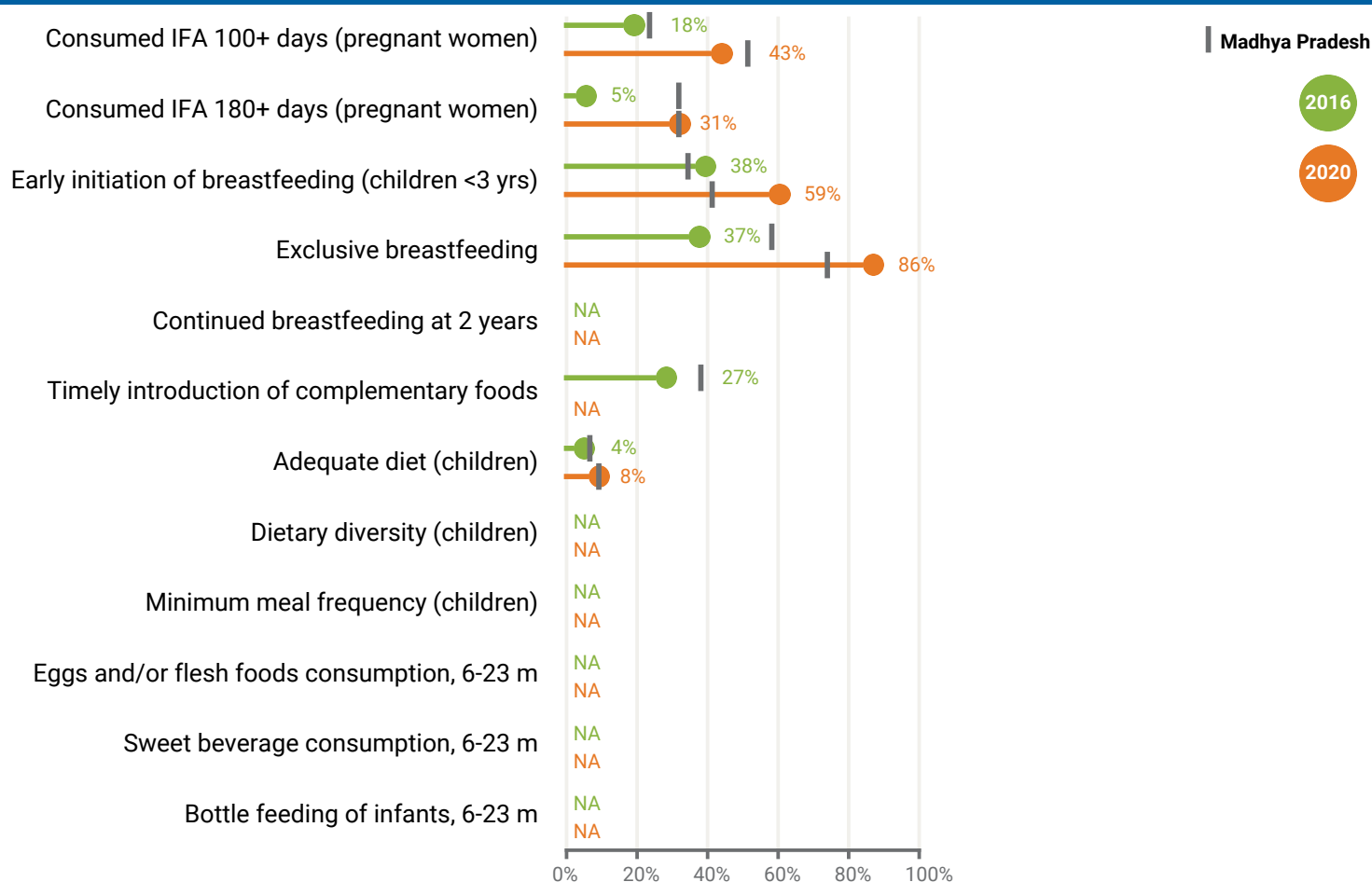| Indicators	No. of women (15-49 yrs)
Underweight	128,686
Overweight/obesity	116,123
Hypertension	85,810
Diabetes	67,311
Anemia (non-preg)	394,184
Anemia (preg)	28,468
Total women (preg)	**54,153**
Total women	**576,293**

Note: NA refers to data are unavailable for a given round of NFHS data.

Points of discussion:
- What are the trends in underweight and anemia among women (15-49 yrs) in the district?
- What are the trends in overweight/obesity and other nutrition-related non-communicable diseases in the district?

Immediate determinants — Morena

Madhya Pradesh

2016
2020

Indicator	2016	2020
Consumed IFA 100+ days (pregnant women)	18%	43%
Consumed IFA 180+ days (pregnant women)	5%	31%
Early initiation of breastfeeding (children <3 yrs)	38%	59%
Exclusive breastfeeding	37%	86%
Continued breastfeeding at 2 years	NA	NA
Timely introduction of complementary foods	27%	NA
Adequate diet (children)	4%	8%
Dietary diversity (children)	NA	NA
Minimum meal frequency (children)	NA	NA
Eggs and/or flesh foods consumption, 6-23 m	NA	NA
Sweet beverage consumption, 6-23 m	NA	NA
Bottle feeding of infants, 6-23 m	NA	NA

0% 20% 40% 60% 80% 100%

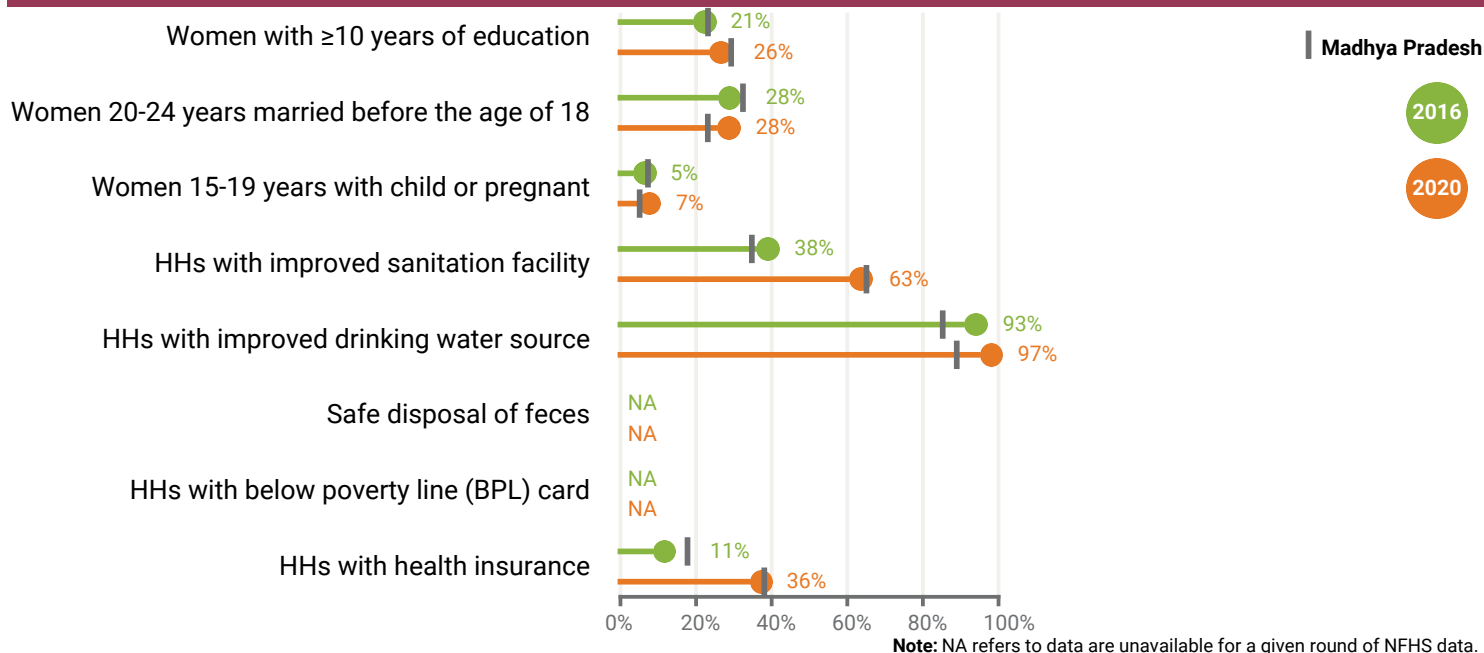**Note:** NA refers to data are unavailable for a given round of NFHS data.

Points of discussion:
- What are the trends in infant and young child feeding (timely initiation of breastfeeding, exclusive breastfeeding, timely initiation of complementary feeding, and adequate diet)? What can be done to improve infant and young child feeding?
- What are the trends in IFA consumption among pregnant women in the district? How can the consumption be improved?
- What additional data are needed to understand diets and/or other determinants?

Underlying determinants — Morena

Madhya Pradesh

2016
2020

Indicator	2016	2020
Women with ≥10 years of education	21%	26%
Women 20-24 years married before the age of 18	28%	28%
Women 15-19 years with child or pregnant	5%	7%
HHs with improved sanitation facility	38%	63%
HHs with improved drinking water source	93%	97%
Safe disposal of feces	NA	NA
HHs with below poverty line (BPL) card	NA	NA
HHs with health insurance	11%	36%

0% 20% 40% 60% 80% 100%

Note: NA refers to data are unavailable for a given round of NFHS data.

Points of discussion:
- How can the district increase women's literacy, and reduce early marriage, if needed?
- How does the district perform on providing drinking water and sanitation to its residents? Since sanitation and hygiene play an important role in improving nutrition outcomes, how can all aspects of sanitation be improved?
- How can programs that address underlying and basic determinants (education, poverty, gender) be strengthened?
- What additional data are needed on food systems, poverty or other underlying determinants?

0% 20% 40% 60% 80% 100%

2016

2020

Pre and during pregnancy

Intervention	2016	2020
Demand for FP satisfied	NA	NA
Iodized salt	87%	94%
Pregnancy registered (MPC card)	95%	99%
ANC first trimester	69%	82%
> 4 ANC visits	41%	65%
Weighing	NA	NA
Birth preparedness counselling	NA	NA
Breastfeeding counselling	NA	NA
Tetanus injection	98%	98%
Received IFA tab/syrup	NA	NA
Deworming	NA	NA
Food supplementation	41%	41%

Delivery and postnatal

Intervention	2016	2020
Institutional birth	94%	95%
Financial assistance (JSY)	NA	NA
Skilled birth attendant	85%	90%
Postnatal care for mothers	67%	84%
Postnatal care for babies		81%
Food supplementation	NA	NA
Health & nutrition education	NA	NA
Health checkup (ICDS)	NA	NA

Early childhood

Intervention	2016	2020
Full immunization	61%	70%
Vitamin A	63%	64%
Pediatric IFA	NA	NA
Deworming	NA	NA
Food supplementation (6-35 months)	NA	NA
Weighing	NA	NA
Counselling on child growth	NA	NA
ORS during diarrhea	58%	81%
Zinc during diarrhea	22%	41%
Careseeking for ARI	69%	97%
Preschool at AWC	NA	NA
Health checkup from AWC	NA	NA

0% 20% 40% 60% 80% 100%

Note: NA refers to data are unavailable for a given round of NFHS data.

Points of discussion:
- How does the district perform on health and nutrition interventions along the continuum of care? Does it adequately provide both prenatal and postnatal services to women of reproductive age, pregnant women, new mothers and newborns?
- How has access to health and ICDS services changed over time (food supplementation, health and nutrition education and health checkups)?