

Travel Grant

Three-tier A/C fare (except Rajadhani/premier) will be provided (only one author) to the selected participants along with local hospitality. However, all participants have to submit the full paper. *Travel grant will be provided only those who will submit the full paper.*

Registration

There is no Registration Fee but presenter has to send the filled registration form to the seminar co-ordinator by due date. Otherwise authors name will not be included in the programme list.

Submission of Abstract: Abstracts are invited in any of the proposed sub-themes. An abstract not exceeding 250 words to be sent in Times New Roman, 12 font size with 1.5 line space. The author must indicate the sub-theme under which the paper falls.

Submission of Full paper: The selected authors will have to send the full paper, which (not exceeding 6000 words) should reach by due date. Selected papers will be published in an edited book by a well known publisher in latter stage.

About

UNICEF is fully committed to working with the Government to ensure that each child born in this country gets the best start in life, thrives & develops to his or her full potential.

Tata-Cornell Institute for Agriculture and Nutrition, of Cornell University is engaged in building evidence, implementing programs and influencing policies around food, agriculture and nutrition in India.

Important Dates

Last date for Abstract Submission 25th January
Intimation about Abstract selection & Travel grant 10th February
Full Paper submission & Registration 15th March

Abstract and Paper Submission:

Email: mchseminaransiss@gmail.com



International Seminar

On

Maternal & Child Health
In
Empowered Action Group states:

*Sustainable Development Goals
Perspective*

(April 5th – 6th, 2019)

Organized by

A. N. Sinha
Institute of Social Studies
Patna

In Collaboration with

UNICEF, Bihar

&

TCI-Cornell University, USA

Seminar Co-ordinator

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The health of mother and children is paramount concern as it creates a healthy society & contributes to nation's development. Hence, it remains a priority of sustainable development goals. Undoubtedly, with state intervention, there is a progress in Maternal, Newborn & Child Health (MNCH) indicators (NFHS-4) and this has generated compliance with policy and SDGs. Although the achievements are true aggregate level & especially for developed regions of the country, the EAG states however, found to be far away from what is expected to achieve. Poor MNCH remains a significant problem in these states as high maternal & neo-natal mortality; malnutrition poses greater challenge to the healthcare system & consequently state's economy.

Investment in reproductive health may bring greater return to the household through improved health outcomes and help the country in attaining the benefits of age structure transition. In the discourse of current demographic transition, improved MNCH outcomes create opportunities for women to participate in labour force and bring greater returns to family through income & human capital development. Estimating the fertility changes and associated economic benefits with increased use of reproductive measures, is an important area of investigation. Investment in RH & its linkages with household well being thus needs to be addressed through proper research and interventions in these states.

Although reproductive health transition seems positive reflected from improvement in MNCH indicators, it does not necessarily lead to improvement in the entire reproductive span. Maternal depletion though declining, the maternal nutrition is still challenging. In states, where teenage pregnancy is high with early marriage, the mortality among pregnant adolescents is also substantial

due to maternal malnutrition which eventually impacts the birth outcomes & children's health. Evidence shows more than one-fifth women have low BMI and half of the pregnant women are anaemic in India and the share is significantly higher in the EAG states. For instance, around 30% women of reproductive age group in Bihar reported low BMI and 58% pregnant women are anaemic. Nearly half of the children under age five are stunted and underweight which has significant implication on human capital development. There is thus a need to address the mechanisms such as nutrient intake, dietary practices & related health issues contributing malnutrition & its implications on health outcomes. .

Despite the fact that MNCH indicators are improving gradually, does it imply reproductive well being such as management of menopause, safe abortion; manage post-partum haemorrhage, C-section delivery & associated reproductive morbidities and usage of family planning measures? As per NFHS-4, Bihar has the lowest usage of family planning methods (24%) and highest unmet need (21.2%). A progress in institutional delivery is impressive however; maternal and neonatal mortality is still a major challenge which has significant implication on demography of these states & needs to be addressed adequately through proper intervention.

Despite government made great stride in reducing inequalities, gaps in accessing healthcare services persist. Along with health service barriers & unregulated private care, women and children face numerous challenges underpinned by poverty, inequality, marginalisation, that create huge inequity in accessing health care services. Achieving universal access to MNCH requires greater investment in comprehensive and integrated services that reach the poor. The key challenges, the health system

face in addressing such inequalities, are critical to progress towards universal health coverage and better MNCH outcomes.

It appears that MNCH in these states is at cross road. It is needless to mention that how formidable challenge it is posing to the health care system in these states. It may not be wrong to say that slow achievements in this respect will definitely hinder these states to achieve the SDGs. It is thus pertinent to look into the structural bottlenecks that make health delivery system inefficient. Unless the political economy of the health care system is addressed systematically, it may be difficult to develop its roadmap towards SDGs.

The two days international seminar will be organised against this backdrop. The seminar will focus on how to achieve sustainable development goals on MNCH that broadly address MNCH issues, challenges, health system responses and further actions required towards this.

Sub-Themes

- ✓ Reproductive health and household wellbeing
- ✓ Linkages of food, nutrition & health
- ✓ Interrelationship of fertility, family Planning & health
- ✓ Intra regional variation in maternal, neonatal, post neonatal & child mortality
- ✓ Newborn, infant & child care, morbidities & health outcome
- ✓ Inequalities in accessing MNCH services
- ✓ Maternal Health Expenditure, Impoverishment & healthcare finance
- ✓ Healthcare delivery system: Human resource, Management & Quality of care
- ✓ MNCH and Public Policy: Gaps & Challenges