XXXII Annual Conference of the Indian Association for the Study of Population

<u>REPORT</u>

OVERVIEW

The XXXII Annual Conference of the Indian Association for the Study of Population (IASP) was held at Utkal University, Bhubaneswar during Nov 28-30, 2010. The theme of the conference was "Population and Public Health" with sub-themes being (1) Public Health Challenges in India (2) Public Health Programmes in India and their Impact (3) Public Health Communication (4) Morbidities due to Communicable Diseases (5) HIV/AIDS Control and Challenges (6) Reproductive and Child health (7) Review of Status of NRHM (8) Urbanization and Urban Health (9) Tribal Health and (10) Population, Environment and Public health.

The conference began on Nov 28, 2010 with the President's address by Prof Arvind Pandey President, IASP, inaugural address by Honb'le Justice SC Mahapatra and Chairman's remarks by Prof Binayak Rath, Vice Chancellor, Utkal University, Bhubaneswar. The inaugural session was attended by over 300 researchers, teachers, policy and programme managers and programme officers from various organizations such as UNICEF, UNFPA, Population Council, IIPS, ICRW, PFI, ISEC, TISS, BHU, JNU, Utkal University faculty and students etc.

The IASP felicitated two senior Demographers - Sri Amulya Ratna Nanda in the inaugural function and Prof M M Gandotra in the valedictory function- for their immense contribution in the field of Demography.

Prof. K. Srinivasan Award was given to two best papers (technical and substantive respectively) to K.S. Bastian and P. Mohanchandran Nair and Kiran Agrahari and Abhishek Singh published in 2009 volume of IASP's peer reviewed Journal "Demography India". Prof K B Pathak award for best published paper was presented to Dr S Niranjan

The proceedings of the 31st Annual Conference in the form of a published book "Population and Reproductive Health: Perspectives and Issues" edited by U V Somayajulu, KK Singh, KVR Subrhamanyam and Arvind Pandey was released during the conference. Other books got released include : "Population, Health and Human Resources in India's Development" by SC Gulati, "Population, Gender and Reproductive Health" by F Ram, S Unisa and T V Sekhar, and "Ageing in India" by N Audinarayana, Two reports viz., "Rapid Appraisal of NRHM in Sambalpur and Kendrapra Districts" by PRC, Bhubaneswar were also released.

PROCEEDINGS

In all, the conference had 1 Panel discussion(on 2011 Census), 3 Plenary sessions (on Child Health, DLHS and NRHM dissemination and HMIS) with 10 paper presentations, 23 technical sessions with more than 100 paper presentations and 3 poster sessions with about 100 poster presentations, more than 250 delegates covering length and breadth of India

The abstracts of the papers selected for presentation in the technical and poster sessions were included in the Abstracts-cum-Souvenir of the conference under sections (1) Child Health (2) Child Nutrition (3) Child Survival (4) RCH -1 (5) RCH-2 (6) Reproductive Health (7)HIV/AIDS-Prevention, Care and Support (8) Sexual Health (9) NRHM (10) Public Health Programmes/Communication (11) Tribal Health (12) Morbidity and Mortality (13) Migration and HIV Linkages (14) Morbidity and Mortality due to Communicable Diseases (15) Ageing (16) Environment and Health (17) Programme/Service Utilisation (18) Public Health Challenges (19) Women Issues (20) Urban Health (21) Fertility (22) Contraception and (23) Statistical Approaches.

Panel Discussion

The panel discussion on 2011 Census had presentations by two panelists from Directorate of Census Operations, Odisha. The points highlighted by the panelists include:

- Preparations being made to carry out the 2011 census
- Special features of the 2011 census including the Population Register
- Need for every one to get counted in the census in view of the demographic utility of the census data

Plenary Sessions

The three plenary sessions covered (1) Child Health (2) Dissemination of DLHS 3 and NRHM study Findings and (3) Health Management Information System (HMIS).

The first plenary session had three presentations. The points emerged in the session are listed below:

- Slow and varied progress in MDG achievement in India and particularly, Odisha.
- Need to reduce neo natal mortality so as to reduce IMR in many Indian states including Odisha.
- Need for effective implementation of community and institution based nutritional interventions so as to reduce U5Mortality in states having higher U5MR including Odisha.
- Need to address role of 3 Ms- malnutrition, malaria and mortality (maternal and child) in Odisha at community, household and facility level.
- Issues relating to the data used for estimation of IMR and CMR need attention.

• Female literacy and full ANC coverage can help in reducing regional differences in Odisha.

The second plenary session on DLHS 3 and NRHM dissemination had two papers each on DLHS 3 and NRHM. The DLHS provides information on STIs, RTIs, HIV, and infertility for married and unmarried women at district level. The DLHS also provides new dimensions related to FP, e.g. rights based approach, unmet need etc.

The two papers on the NRHM concurrent evaluation coordinated by IIPS and the three papers presented in the plenary session on HMIS highlighted the various issues relating to implementation of NRHM as well as HMIS as indicated below:

- Gaps in implementation of NRHM in many states including Odisha in terms of human Resources, infrastructure, guidelines, capacity building, funds utilisation etc
- Slow progress in HMIS implementation and need to address issues relating to completeness, accuracy, consistency, under or over reporting etc
- Need for validation, and triangulation of HMIS data through approaches such as numerator, denominator fixing etc and use of indirect estimates or results from other surveys such as NFHS and DLHS
- HMIS data analysis indicates considerable gaps in mother and child health service coverage
- Need to carry out analysis to identify factors responsible for improvement or decline in performance or feedback systems at block level
- Capacity building of functionaries so that they can generate good quality data

Technical Sessions

There were 19technical sessions in the three day conference. They are (1) Child Health (2) Child Nutrition (3) Child Survival (4) RCH -1(5) RCH-2 (6) Reproductive Health (7)HIV/AIDS-Prevention, Care and Support (8) Sexual Health (9) NRHM (10) Public Health Programmes/Communication (11) Tribal Health (12) Morbidity and Mortality (13) Migration and HIV Linkages and Morbidity and Mortality due to Communicable Diseases (14) Ageing (15) Environment and Health (16) Programme/Service Utilisation and Public Health Challenges (17) Women Issues and Urban Health (18) Fertility and Contraception and (19) Statistical Approaches.

The first technical session on child health had 5 papers and the emerging issues are listed below:

- Existence of unsafe new born care practices due to lack of awareness regarding importance of immediate care of new born
- Practice of traditional practices and socio cultural beliefs affect the health status of new born
- In spite of several Govt programmes, awareness regarding danger signs of diarrohea and ARI is low even in urban areas

- Effective implementation of health programmes can help in reducing morbidity and mortality due to ARI and diarrohea
- Caste /tribe membership adversely affects the child health status in Odisha

The second technical session on child nutrition had six papers. The presentations highlighted the issues listed below:

- Child nutrition status is influenced by size of new born, birth order, birth interval, mother's education, wealth index of household, mother's nutrition status etc
- An integrated approach is needed to improve nutritional status of mother as well as child with special focus on poor people living in slums
- Govt. should take steps to target less educated and deprived groups to address the problem of malnutrition among children in India
- Fortification of supplementary food provided under ICDS programme lead to reduction in prevalence of anaemia and vitamin A deficiency
- Socio demographic characteristics are associated with level of anaemia among children and there is an urgent need for effective intervention through community awareness and public health education

The third technical session on child survival had three papers. The papers indicate that health care utilisation factors and mother's education are key determinants of infant and child mortality in Odisha. The analysis also suggests the need to address the unmet need for family planning so as to reduce maternal and child mortality in Odisha.

The fourth, fifth and sixth technical sessions on reproductive and child health /reproductive health had eleven papers. The emerging issues highlighted by the authors are listed below:

- In view of the health implications of teenage pregnancies, there is a need to address these
- Need to improve educational status of girls to reduce child marriages, teenage pregnancies and improve maternal and child health
- Need to enhance male involvement in maternal and child health programmes
- Use of natal care services is influenced by cost of delivery care, ability to pay, type pf pregnancy complication etc and these need to be addressed
- Domestic violence faced by women is an issue that needs attention. Working women seem to be at higher risk. Role of civil society, awareness of woman's rights and gender main streaming are vital in addressing domestic violence
- Need to address gender discrimination and son preference in the context of reproductive and child health
- Access to safe drinking water and sanitation is an issue in many Indian states including Odisha

The seventh and eighth technical sessions on HIV/AIDS Prevention and Care and Sexual health had seven papers. The outcome of the presentations can be summarized as follows:

- There has been reduction in HIV incidence as a result of various interventions implemented across the country
- Alcohol consumption, commercial sex, less use of condom among male migrants, and higher HIV risk of male migrants need attention
- HIV risk among spouse of male migrants is a concern
- Need to intensify the sexual health interventions

The ninth technical session on NRHM had two papers and the papers highlighted the need for effective implementation of NRHM so as to optimize its impact in terms of child health outcomes and also need to strengthen the HMIS for improving the data quality in terms of completeness and accuracy.

The tenth technical session on Public health programmes/communication had three papers that highlighted the gaps in IEC activities that are supposed to create demand for public health service utilisation.

The eleventh technical session on tribal health had five papers with the key points emerging being:

- Need to improve education and educate tribal regarding the need for adopting modern health care practices (against 'magico religious systems')
- Higher substance use, teenage pregnancy, malnutrition, infant and child mortality particularly in Odisha need attention
- Need for reorientation /redesigning of training for health functionaries working in tribal areas by including some of the traditional components
- Health Equity can be achieved only through equitable and efficient systems, and improved availability of health facilities in the remote tribal villages
- Higher levels of malnourishment among Lodha males, compared to females
- Insufficient food intake, over load of work, less income, ignorance regarding food habits, and literacy emerge as determinants of malnourishment of tribals in Odisha
- Public health providers should become more culturally sensitive towards diverse linguistic, caste and ethnic groups among Indian tribal groups

The twelfth, thirteenth and fourteenth technical sessions on morbidity and mortality, migration and HIV linkages and morbidity and mortality due to communicable diseases had eleven presentations that highlighted the key points listed below:

• Due to higher morbidity levels, women need to pay higher premium for health insurance coverage

- Need to develop health finance product for women using public- private partnership model.
- In Kerala, males had higher incidence of illness due to infectious and communicable diseases , and hospitalization
- Higher human risk index due to communicable diseases across districts of Odisha
- In view of the high risk behaviour of migrants from Ganjam district, there is a need to have interventions at place of origin as well as destination
- Migrant Hotel workers are at higher HIV risk due to age, economic independence, low level of education, group living, residing away from family, and proximity to other high risk sexual networks

The fifteenth technical session on ageing had three presentations that highlighted that elders' satisfaction with living arrangements depends on capacity to earn, decisive voice in family, health status etc

The sixteenth technical session on environment and health had three presentations that highlighted the key points listed below:

- Children living in rural areas had higher risk of ARI than their urban counterparts
- Prevalence of ARI is higher among children living in semi pucca house than pucca house. Availability of separate kitchen and use of clean fuels is associated with less risk of ARI
- Public health policy in situations of forced displacement caused by natural disasters and environmental hazards should be gender sensitive

The seventeenth technical session on Programme/service utilisation, and Public health challenges had ten presentations that highlighted the issues listed as under:

- Less utilization of child immunization services by rural-urban migrants than non migrants
- In spite of several IEC initiatives, still people are not aware of the need to utilize preventive health care services and this is a great concern
- Woman's autonomy leads to better utilisation of MCH services
- As education and standard of living improve, utilisation of public health services declines
- Need to look into the special needs of mentally disabled people

The eighteenth technical session on women issues and urban health had ten presentations with the emerging issues being the ones listed as follows:

• Though women face domestic violence more, communication between the couple regarding decision making contributes to reduction of domestic violence

- Education and occupation of woman, standard of living, media exposure, mobility and partner's alcoholic behaviour are key determinants of domestic violence faced by women.
- Women having less religious practices are less empowered and suffer greater psychosomatic health problems.
- Need interventions to reduce early childhood exposure to alcohol, regulating alcohol consumption at work and other environments to limit exposure and opportunities to drink

The nineteenth technical session on fertility and contraception had eight presentations that highlighted the issues listed below:

- In Kerala, the environmental deterioration and non pragmatic and unsound health policies contributed to disease burden as the state provides a case study of impact of low fertility in the absence of reasonable structural changes in economic and health fronts.
- Strikingly higher son preference in the EAG states compared to other states needs attention so as to reduce fertility levels in these states.
- Rural –urban migration seem to have contributed to reduction in fertility.
- There is a need to address the regional differences in unmet need for family planning in Odisha.

The twentieth technical session on Statistical approaches had five presentations that highlighted the utility of statistical approaches in the study of various demographic and health aspects including child mortality, child malnutrition, birth intervals, and life expectancy at birth.

Poster Sessions

The theme of the poster presentations included (1) Child health, nutrition and survival, HIV/AIDS, sexual health, and RCH (2) Ageing, environment and health, mortality and morbidity, Public health challenges/communication, tribal and urban health and (3)Fertility, contraception, NRHM, Programme/service utilisation, Delivery care, Women issues, Statistical approaches and miscellaneous

Memorial Lectures

One memorial lecture was organized as part of the conference. The George Simmons Memorial Lecture was delivered by Prof F. Ram, Director and Senior Professor, International Institute for Population Sciences, Mumbai, on the topic "A Discourse on Human Rights' Approach to Maternal and Child Health in India" on the first day of the conference.

Awards

On the last day of the conference, Dr. C. Chandrasekharan memorial award presentation was organized as commonly done in the IASP conferences. There were nine papers presented for the Dr. C. Chandrasekharan award by the young scholars in the field of Demography. The

evaluators selected the paper "Model Life Tables from Life Expectancies using WHO Data base" by Pallavi Gupta for the award.

Three best posters were given Dr. S.N. Singh award. The winners of the best posters were: Niranjan Rout, Kalyan B Saha, and Punit Kumar Mishra

Valedictory Session

The valedictory session of the conference was held on November 30, 2010. The participants expressed their satisfaction with the way the conference was organized and appreciated the efforts of the organising committee and IASP. Dr. U.V. Somayajulu presented the rapporteur general's report. The valedictory address was delivered by Dr Mark, UNFPA representative to India while Prof Arvind Pandey delivered the presidential address. Prof Binayak Rath, Vice Chancellor gave the chairman's remarks and thanked IASP for hosting the conference at Utkal University. Prof GK Panda, local organising secretary thanked the IASP members for their active participation in the conference.

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Prof. Arvind Pandey

President-IASP