POSHAN
Led by IFPRI

DISTRICT NUTRITION PROFILE

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.
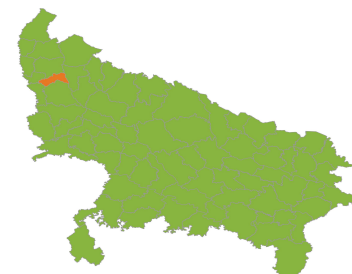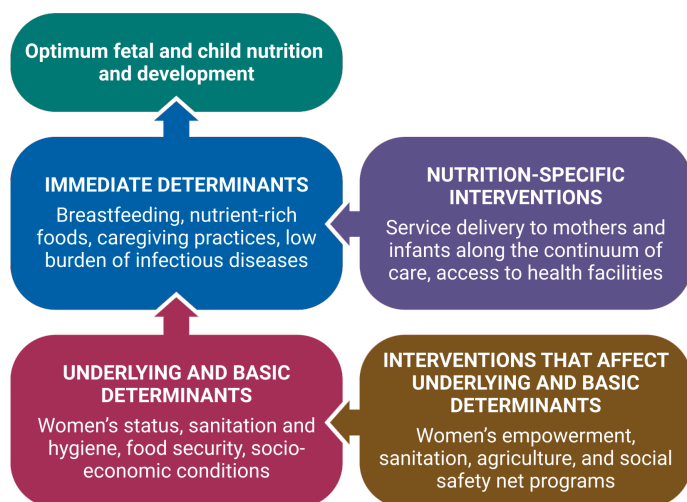
Figure 1: Map highlights district Hapur in the state/UT of Uttar Pradesh

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)

What factors lead to child undernutrition?

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   Hapur

917/1,000 Sex ratio (females per 1,000 males) of the total population	**NA** Number of women of reproductive age (15–49 yrs)	**46,239** Total number of pregnant women registered for ANC
36,415 Number of live births	**34,839** Number of institutional births	**NA** Total number of children under 5 yrs

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Uttar Pradesh

2020

Low-birth weight	NA
Stunted	30%
Wasted	19%
Severely wasted	9%
Underweight	27%
Overweight/obesity	5%
Anemia	69%
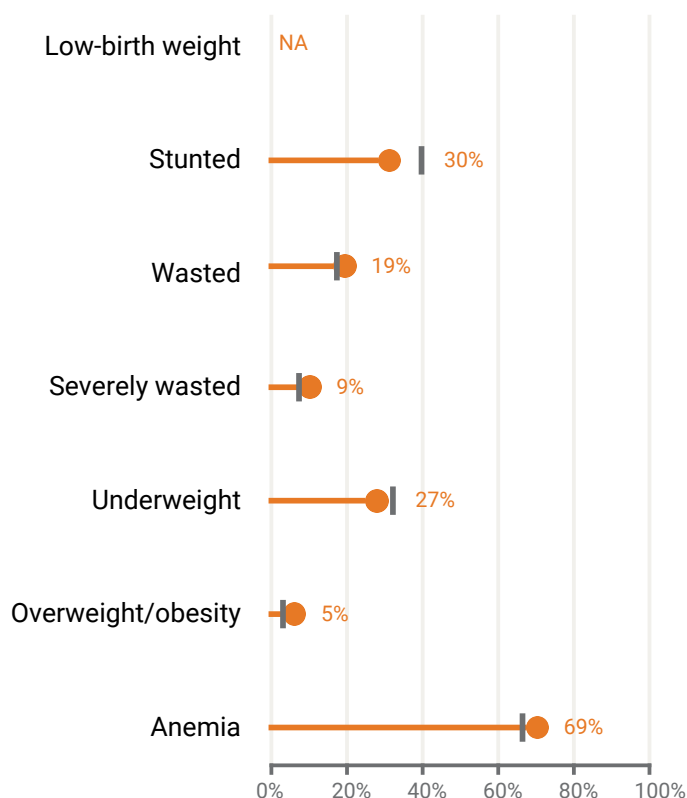
Burden of nutrition outcomes (2020)

Indicators	No. of children (<5 yrs)
Low-birth weight	NA
Stunted	NA
Wasted	NA
Severely wasted	NA
Underweight	NA
Overweight/obesity	NA
Anemia	NA
Total children	**NA**

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

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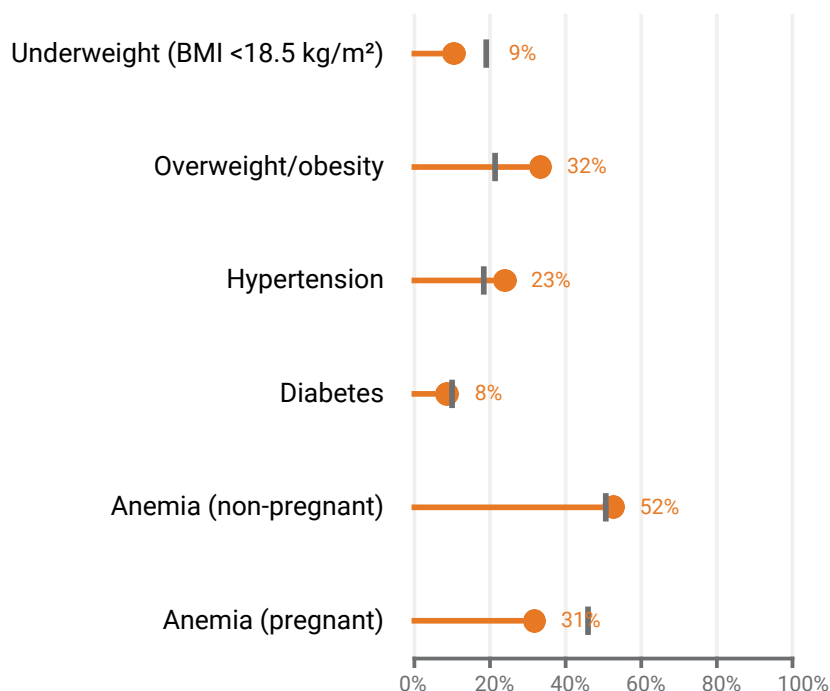- What are the trends in undernutrition among children under five years of age (stunting, wasting, underweight, and anemia)?
- What are the trends in overweight/obesity among children under five years of age in the district?

Uttar Pradesh

2020

Underweight (BMI <18.5 kg/m²)	9%
Overweight/obesity	32%
Hypertension	23%
Diabetes	8%
Anemia (non-pregnant)	52%
Anemia (pregnant)	31%

Burden of nutrition outcomes (2020)

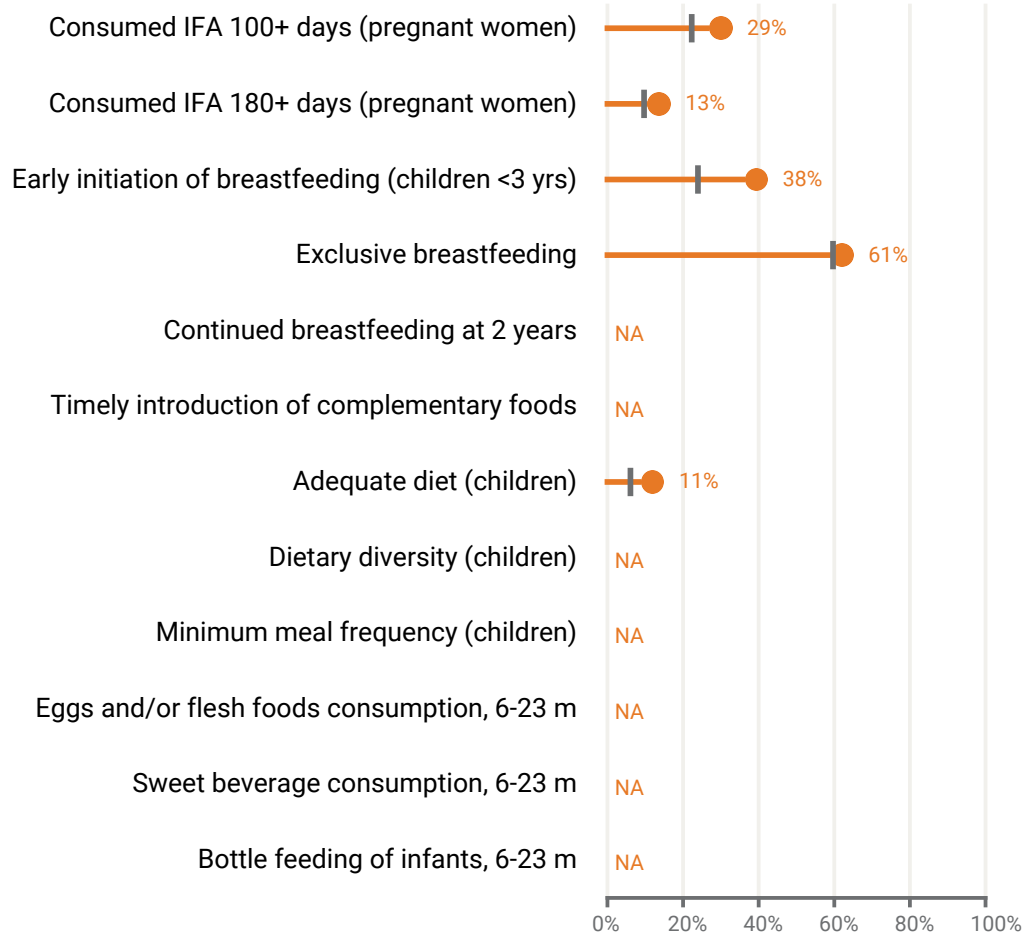| Indicators	No. of women (15-49 yrs)
Underweight	NA
Overweight/obesity	NA
Hypertension	NA
Diabetes	NA
Anemia (non-preg)	NA
Anemia (preg)	14,242
Total women (preg)	**46,239**
Total women	**NA**

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

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 — Hapur

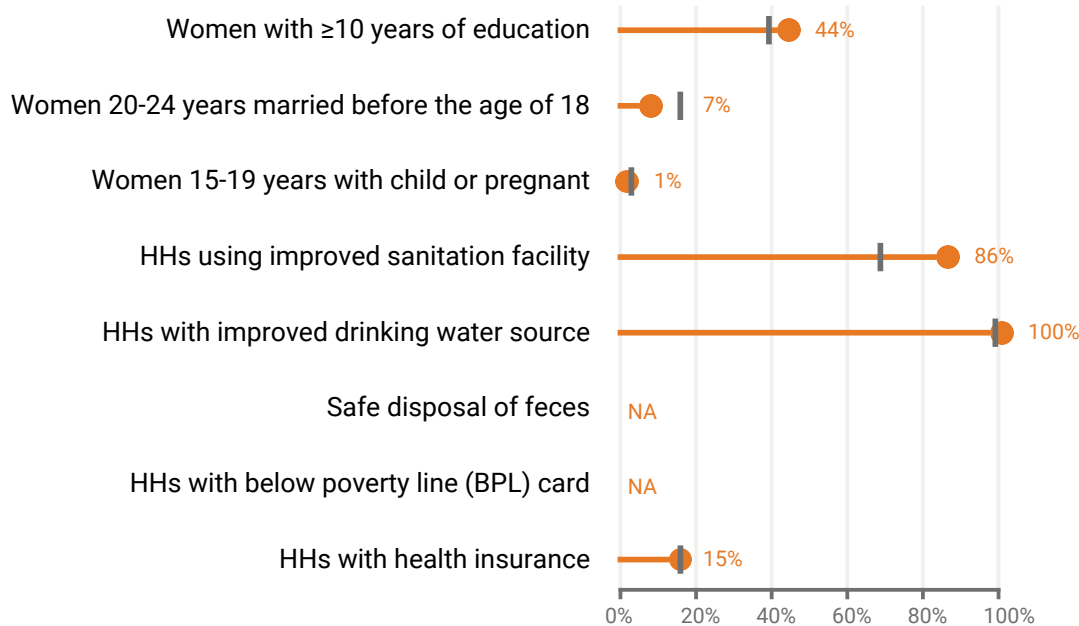| Indicator	Value
Consumed IFA 100+ days (pregnant women)	29%
Consumed IFA 180+ days (pregnant women)	13%
Early initiation of breastfeeding (children <3 yrs)	38%
Exclusive breastfeeding	61%
Continued breastfeeding at 2 years	NA
Timely introduction of complementary foods	NA
Adequate diet (children)	11%
Dietary diversity (children)	NA
Minimum meal frequency (children)	NA
Eggs and/or flesh foods consumption, 6-23 m	NA
Sweet beverage consumption, 6-23 m	NA
Bottle feeding of infants, 6-23 m	NA

Legend: Uttar Pradesh | 2020

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

Points of discussion:
- What are the trends in infant and young child feeding (early 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 — Hapur

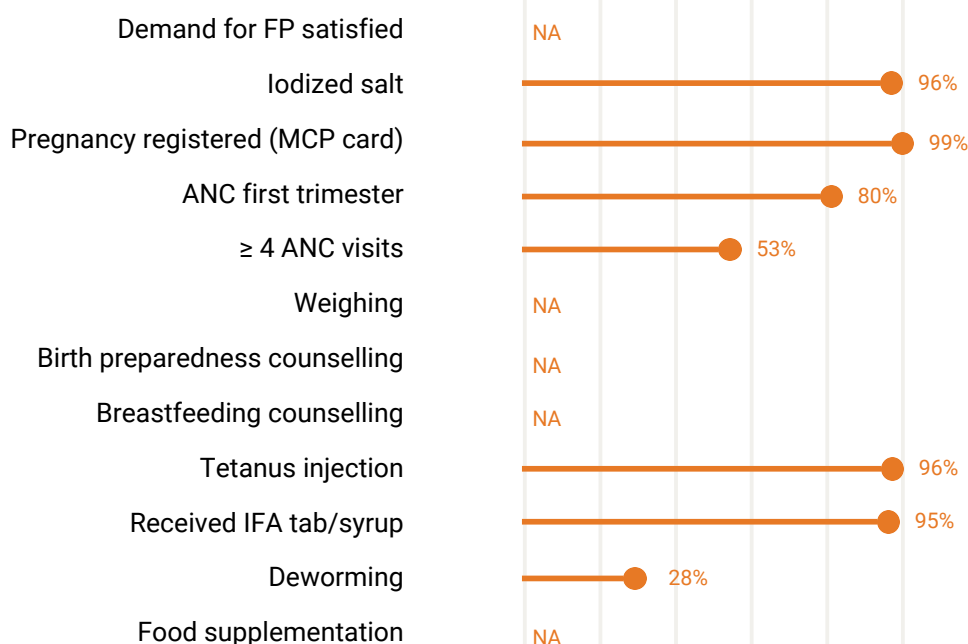| Indicator	Value
Women with ≥10 years of education	44%
Women 20-24 years married before the age of 18	7%
Women 15-19 years with child or pregnant	1%
HHs using improved sanitation facility	86%
HHs with improved drinking water source	100%
Safe disposal of feces	NA
HHs with below poverty line (BPL) card	NA
HHs with health insurance	15%

Legend: Uttar Pradesh | 2020

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

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?

2020

Pre and during pregnancy

Intervention	Value
Demand for FP satisfied	NA
Iodized salt	96%
Pregnancy registered (MCP card)	99%
ANC first trimester	80%
≥ 4 ANC visits	53%
Weighing	NA
Birth preparedness counselling	NA
Breastfeeding counselling	NA
Tetanus injection	96%
Received IFA tab/syrup	95%
Deworming	28%
Food supplementation	NA

Delivery and postnatal

Intervention	Value
Institutional birth	83%
Financial assistance (JSY)	23%
Skilled birth attendant	86%
Postnatal care for mothers	83%
Postnatal care for babies	83%
Food supplementation	NA
Health & nutrition education	NA
Health checkup (ICDS)	NA

Early childhood

Intervention	Value
Full immunization	84%
Vitamin A	82%
Pediatric IFA	NA
Deworming	NA
Food supplementation (6-35 months)	NA
Weighing	NA
Counselling on child growth	NA
ORS during diarrhea	NA
Zinc during diarrhea	NA
Careseeking for ARI	75%
Preschool at AWC	NA
Health checkup from AWC	NA

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

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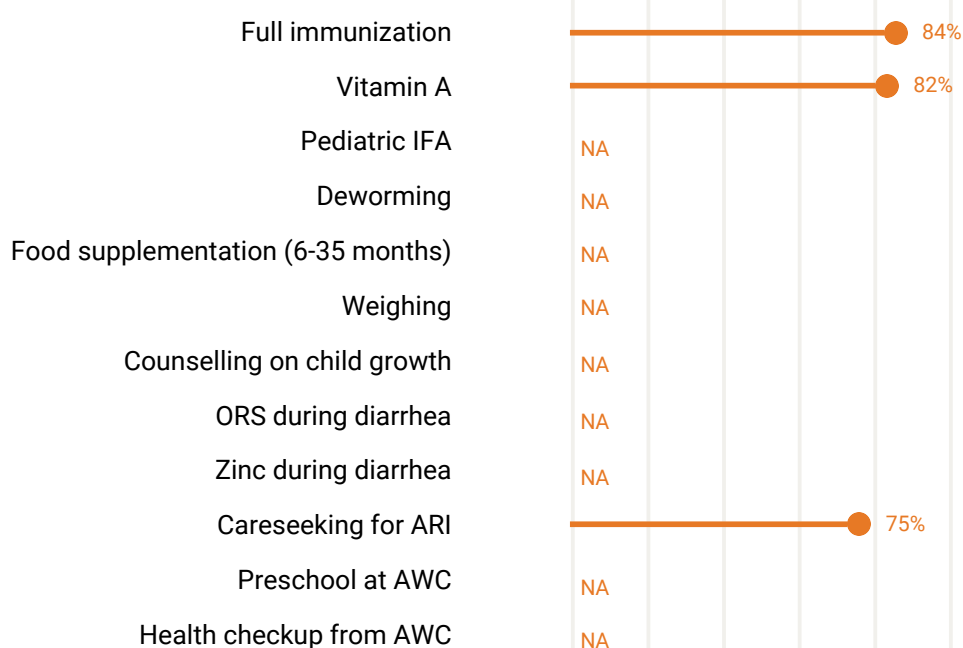- How does the district perform on health and nutrition interventions along the continuum of care? Does it adequately provide both prenatal and postnatal services to women of reproductive age, pregnant women, new mothers and newborns?
- How has access to health and ICDS services changed over time (food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