

Data Note

No. 45 | SEPTEMBER 2021

JAMMU AND KASHMIR

State Nutrition Profile: Jammu and Kashmir

ABOUT THIS DATA NOTE

This Data Note describes the trends for a set of key nutrition and health outcomes, determinants, and coverage of interventions. The findings here are based on data from the National Family Health Survey (NFHS) 3 (2005-2006), 4 (2015-2016), and 5 (2019-2020). In addition to standard prevalence-based analyses, this Data Note includes headcount-based analyses aligned to the POSHAN Abhiyaan monitoring framework and uses data from NFHS-5 to provide evidence that helps identify priority districts and number of districts in the state with public health concern as per the WHO guidelines.1 The Data Note includes a color-coded dashboard to compare the coverage of nutrition interventions across all the districts in the state. It concludes with key takeaways for children, women, and men and identifies areas where the state has potential to improve.

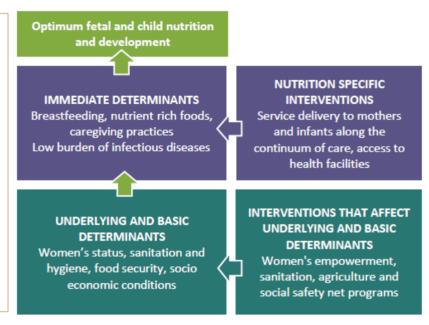
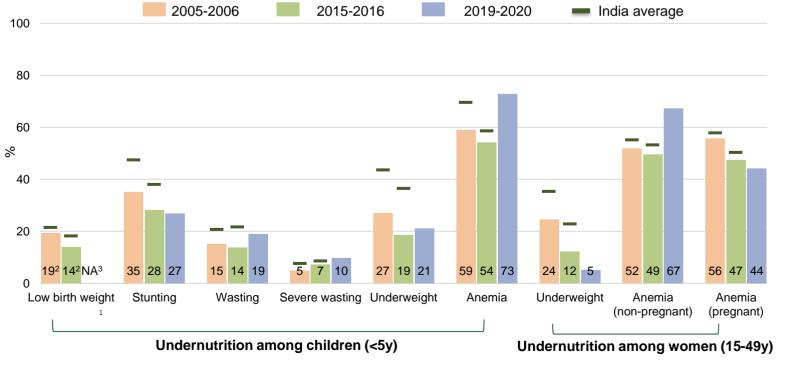


Figure 1. Trends in undernutrition outcomes 2005-2006, 2015-2016, 2019-2020



Source: NFHS-3 (2005-2006), NFHS-4 (2015-2016), and NFHS-5 state factsheets (2019-2020).

Note: Adult nutrition outcomes are based on the woman dataset, while child nutrition outcomes are based on all child data.

¹WHO. Nutrition Landscape Information System (NLiS). Help Topic: Malnutrition in children.

(https://apps.who.int/nutrition/landscape/help.aspx?menu=0&helpid=391&lang=EN).

²In NFHS-3, 84.7% of data was missing, while 32.7% of data was missing in NFHS-4. ³NA refers to the unavailability of data for a particular indicator in the specified NFHS round.

Map 1 & 2. Number of stunted & anemic children <5y, 2019-2020

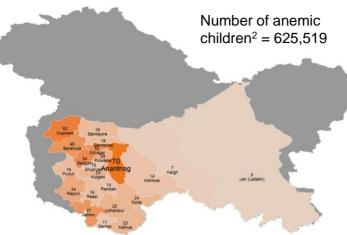
Number of stunted children² = 251,393

Note: Number in '000s in the above figure

	Highest burden districts	
1	Anantnag	27,578
2	Srinagar	24,680
3	Kupwara	21,982
4	Jammu	20,718
5	Badgam	19,025

No. of districts with public health concern¹: 18 of 20

Map 2. Anemia



Note: Number in '000s in the above figure

	Highest burd	den districts
1	Anantnag	69,576
2	Kupwara	62,491
3	Badgam	54,203
4	Srinagar	51,730
5	Baramulla	48,307

No. of districts with public health concern¹: 20 of 20

Map 3 & 4. Number of wasted children <5y, 2019-2020

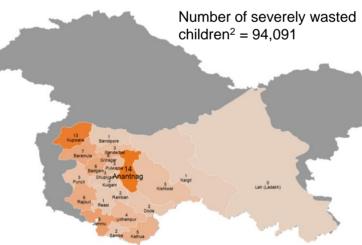
Number of wasted children² = 183,259

Note: Number in '000s in the above figure

	Highest burden dis	tricts
1	Anantnag	24,350
2	Kupwara	22,158
3	Srinagar	13,911
4	Baramulla	13,902
5	Jammu	13,812

No. of districts with public health concern¹: 19 of 20

Map 4. Severe Wasting



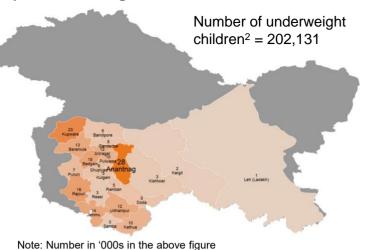
Note: Number in '000s in the above figure

	Highest burde	en districts
1	Anantnag	13,691
2	Kupwara	12,977
3	Jammu	7,980
4	Baramulla	6,722
5	Badgam	6,460

No. of districts with public health concern¹: 20 of 20

Map 5 & 6. Number of underweight children (<5y) & women (15-49y), 2019-2020

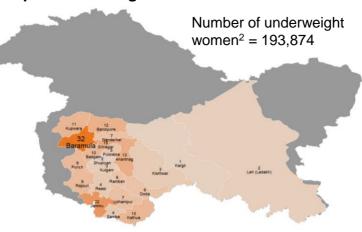
Map 5. Underweight children



	Highest burden districts			
1	Anantnag	27,675		
2	Kupwara	22,512		
3	Rajouri	16,039		
4	Badgam	14,623		
5	Jammu	13,505		

No. of districts with public health concern¹: 11 of 20

Map 6. Underweight women



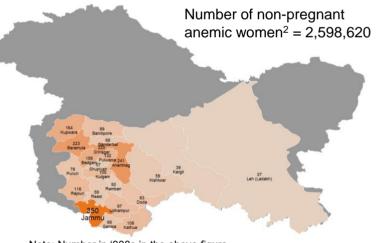
Note: Number in '000s in the above figure

	Highest burden distr	icts
1	Baramulla	32,372
2	Jammu	21,545
3	Srinagar	14,648
4	Anantnag	13,044
5	Bandipore	12,389

No. of districts with public health concern¹: 2 of 20

Map 7 & 8. Number of anemic women (15-49y), 2019-2020

Map 7. Anemia among non-pregnant women

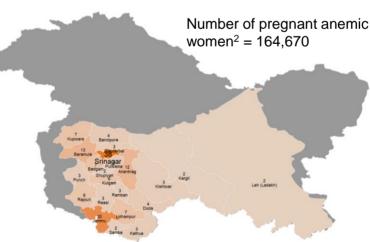


Note: Number in '000s in the above figure

Highest burden districts			
1	Jammu	349,848	
2	Anantnag	240,841	
3	Baramulla	223,242	
4	Srinagar	219,726	
5	Kupwara	164,023	

No. of districts with public health concern¹: 20 of 20

Map 8. Anemia among pregnant women



Note: Number in '000s in the above figure

Highest burden districts			
1	Srinagar	37,940	
2	Jammu	30,289	
3	Baramulla	13,105	
4	Anantnag	12,408	
5	Udhampur	7,306	

No. of districts with public health concern¹: 14 of 20

Source: IFPRI estimates - The headcount was calculated as the product of the undernutrition prevalence and the total eligible projected population for each district in 2019. Prevalence estimates were obtained from NFHS-5 (2019-2020; all child/woman data) and projected population for 2019 was estimated using Census 2011. Note: Gray area in Maps 5-8 indicates districts for which data are not available.¹Public health concern is defined as ≥20% for underweight (children), ≥10% for underweight (women), ≥40% for anemia among non-pregnant women, and ≥40% for anemia among pregnant women (WHO 2011). ²The total number of children <5 years is 937,413, pregnant women 15-49 years is 374,141, and non-pregnant women 15-49 years is 3,452,875.

Figure 2. Trends in overweight/obesity & NCDs¹ 2005-2006, 2015-2016, 2019-2020

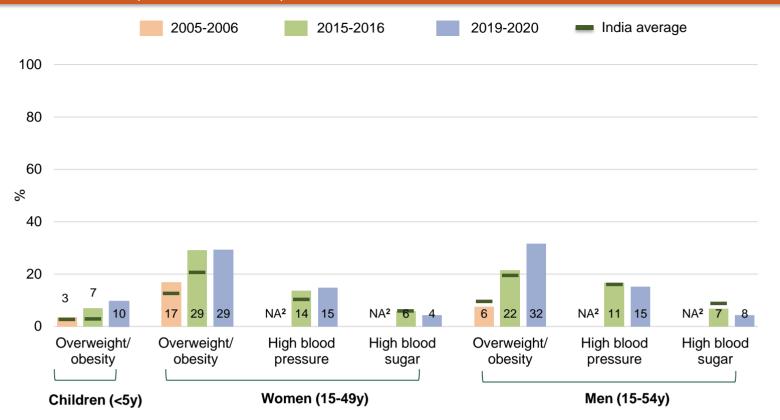


Table 1. Overweight/obesity & NCDs¹ at district-level 2015-2016, 2019-2020

Category	Outcomes	Worst performing districts (pp) ⁵	Best performing districts (pp) ⁵	Highest burden districts (thousands) ³	No of districts with public health concern ⁴ (total=20)
		Difference between (2019-2020) & (2015- 2016)	Difference between (2019-2020) & (2015- 2016)	2019-2020	2019-2020
Children <5 years	Overweight/ obesity	Kishtwar: +16.7 Kulgam: +15.9	Baramula: -7.6 Shupiyan: -5.8	Srinagar: 9 Badgam: 8	5
	Overweight/ obesity	Kathua: +13.6 Doda: +12.7	Srinagar: -13 Badgam: -6.1	Jammu: 196 Srinagar: 116	18
Women (15-49 years)	High blood pressure	Kathua: +7.8 Udhampur: +7.0	Kishtwar: -3.7 Srinagar: -3.3	Jammu:71 Baramulla: 53	1
	High blood sugar	Kathua: +3.4 Ramban: +2.8	Srinagar: -5.8 Shupiyan: -4.6	Jammu: 18 Anantnag: 15	0
	Overweight /obesity	Data not available a	nt district level		
Men (15-54 years)	High blood pressure	Udhampur: +8.2 Pulwama: +6.2	Ganderbal: -13.8 Rajouri: -10.7	Jammu: 85 Srinagar: 48	1
	High blood sugar	Ramban: +2.7 Udhampur: +2.0	Srinagar: -11.8 Jammu: -8.6	Jammu: 17 Kathua: 16	0

Source: NFHS-3 (2005-2006), NFHS-4 (2015-2016), and NFHS-5 state and district factsheets (2019-2020). pp: percentage points. Note: Adult nutrition outcomes are based on the woman/man dataset, while child nutrition outcomes are based on all child data.

¹NCDs: non-communicable diseases. ²NA refers to the unavailability of data for a particular indicator in the specified NFHS round. ³Burden: The headcount was calculated as the product of the overweight/obesity and NCDs prevalence and the total eligible projected population for each district in 2019. Prevalence estimates were obtained from NFHS-5 (2019-2020) and projected population for 2019 was estimated using Census 2011.

⁴Public health concern is defined as prevalence ≥15% for overweight/obesity (children), ≥20% for overweight/obesity (women and men), ≥ 20% high blood pressure (women and men), and ≥20% high sugar (women and men) (WHO 2011). ⁵The difference is calculated only between districts that are comparable between 2015-2016 and 2019-2020. All districts in Jammu and Kashmir are comparable across both periods.

Figure 3. Trends in immediate determinants (%) 2005-2006, 2015-2016, 2019-2020

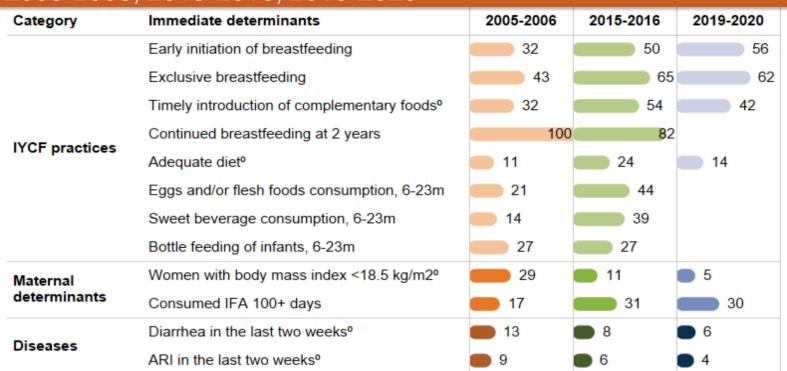


Table 2. Immediate determinants at district-level 2015-2016, 2019-2020

Category	Immediate determinants	Worst performing districts (pp) ² Best performing districts (pp) ²		Top coverage districts (%)¹	
		Difference between (2019-2020) & (2015-2016)	Difference between (2019-2020) & (2015-2016)	2019-2020	
	Early initiation of breastfeeding	Rajouri: -18.8 Kishtwar: -9.6	Srinagar: +34.8 Doda: +26.0	Srinagar: 69.2 Kulgam: 74.7	
IYCF	Exclusive breastfeeding	Samba: -19.3 Udhampur: -16.6	Punch: +21.4 GayaKulgam +16.7	Gopalganj: 83.5 Sheohar: 83.5	
practices	Timely introduction of complementary foods ⁰	Data not available at district level			
	Adequate diet ^o	Samba: -25.5 Kulgam: -22.2	Badgam: +6.1 Shupiyan: +2.0	Kathua: 24.6 Bandipora: 21.7	
Maternal	Women with BMI<18.5 kg/m2 ^o	Bandipore: +3.6 Srinagar: +2.5	Udhampur: -16.0 Rajouri: -15.9	Shopian: 2.0 Kulgam: 2.1	
determinants	Consumed IFA 100+ days	Udhampur: -31.3 Kathua: -24.5	Anantnag: +20.6 Kishtwar: +17.5	Jammu: 51.4 Samba: 46.5	
	Diarrhea in the last two weeks ⁰	Udhampur: +9.2 Baramula: +6.4	Ramban: -44.2 Kishtwar: -40.5	Reasi: 0.9 Srinagar: 1.2	
Diseases	ARI in the last two weeks ⁰	Anantnag: +3.4 Udhampur: +3.0	Ramban: -16.6 Kishtwar: -14.8	Kulgam: 0.0 Doda: 0.0	

pp: percentage points. Source: NFHS-3 (2005-2006), NFHS-4 (2015-2016), and NFHS-5 state and district factsheets and state reports (2019-2020).

Note: Immediate determinants are based on the last child data; data on continued breastfeeding at 2 years, egg and/or flesh foods consumption, sweet beverage consumption, and bottle feeding of infants not available in NFHS-5 factsheets (2019-20)/state report

Olndicator definition differs slightly between NFHS-4 and NFHS-5. For all indicators, top coverage districts refer to the districts with the highest prevalence in immediate determinants, except for women with a BMI of 18.5 kg/m2, diarrhea in the last two weeks, and ARI in the last two weeks, for which it refers to the districts with the lowest prevalence in coverage. The difference is calculated only between districts that are comparable between 2015-2016 and 2019-2020. All districts in Jammu and Kashmir are comparable across both periods.

Figure 4. Trends in underlying determinants (%) 2005-2006, 2015-2016, 2019-2020

Category	Underlying determinants	2005-2006	2015-2016	2019-2020
	Women who are literate ^o	43	66	77
Maternal	Women with ≥10 years education ^o	21	33	51
determinants	Girls 20-24 years married before age of 18 years ^o	42	33	5
	Women 15-19 years with child or pregnant		3	1
	HHs with improved drinking water source ^o	76	87	92
	HHs with improved sanitation facility ^o	19	47	76
	HHs with hand washing facility		75	
Household determinants	Open defecation ^o	41	24	6
	Safe disposal of feces	33	54	
	HHs with BPL card ^o	28	38	55
	HHs with electricity ^o	93	96	99

Table 3. Underlying determinants at district-level 2015-2016, 2019-2020

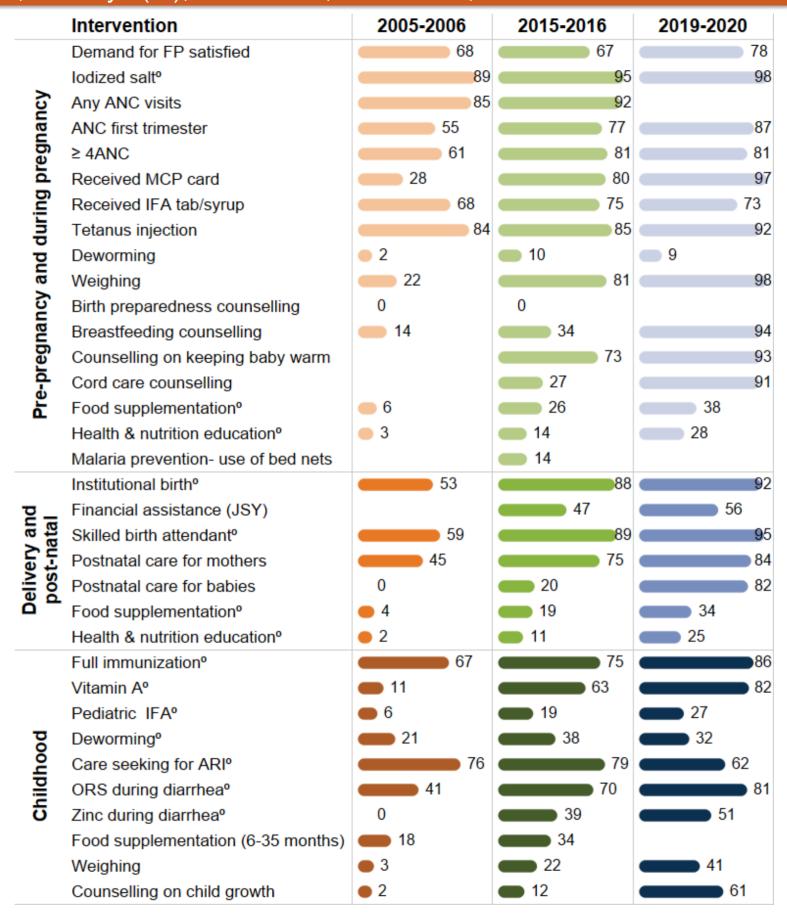
Category	Underlying determinants	Worst performing districts (pp) ³	Best performing districts (pp) ³	Top coverage districts (%) ²
		Difference between (2019-2020) & (2015-2016)	Difference between (2019-2020) & (2015-2016)	2019-2020
	Women who are literate ⁰	Samba: -4.9	Ramban: +26.8 Doda: +25.0	Jammu: 91.5 Kathua: 87.7
Maternal	Women with ≥10 years education ⁰	Not applicable ¹	Anantnag: +34.8 Shupiyan: +28.3	Jammu: 90.8 Kathua: 84.9
determinants	Girls 20-24 years married before age of 18 years ⁰	Not applicable ¹	Punch: -37.9 Rajouri: -36.7	Pulwama: 0.5 Kathua: 1.4
	Women 15-19 years with child or pregnant	Srinagar: +1.6 Badgam: +0.2	Kishtwar: -5.8 Doda: -4.6	Pulwama: 0.0 Kathua: 0.0
	HHs with improved drinking water source ⁰	Ramban: -8.2 Kulgam: -3.3	Udhampur: +14.6 Rajouri: +12.6	Jammu: 99.9 Anantnag: 99.3
Household determinants	HHs with improved sanitation facility ⁰	Not applicable ¹	Anantnag: +39.7 Udhampur: +37.5	Pulwama: 91.6 Srinagar: 86.8
	HHs with electricity ⁰	Baramula: -1.3 Ganderbal: -0.2	Reasi: +9.4 Doda: +8.3	Srinagar: 100.0 Jammu: 100.0

pp: percentage points. Source: NFHS-3 (2005-2006), NFHS-4 (2015-2016), and NFHS-5 state and district factsheets and state reports (2019-2020). Note: Underlying determinants are based on the last child data; safe disposal of feces not available in NFHS-5 factsheets (2019-20)/state report and data on HHs with hand washing facility not available in NFHS-3 (2005-06) and NFHS-5 factsheets (2019-20)/state report. Data on open defecation and HHs with BPL card for 2019-2020 are taken from NFHS-5 state reports.

⁰Indicator definition differs slightly between NFHS-4 and NFHS-5. ¹Prevalence did not increase or decrease in any of the districts.

²For all indicators, top coverage districts refer to the districts with the highest prevalence in underlying determinants, except for girls 20-24 years married before age of 18 years and women 15-19 years with child or pregnant for which it refers to the districts with the lowest prevalence in coverage. ³The difference is calculated only between districts that are comparable between 2015-2016 and 2019-2020. All districts in Jammu and Kashmir are comparable across both periods.

Figure 5. Trends in coverage of interventions across the first 1,000 days (%), 2005-2006, 2015-2016, 2019-2020



Source: NFHS-3 (2005-2006), NFHS-4 (2015-2016) & NFHS-5 state factsheets and state reports (2019-2020).
Indicator comparable between NFHS-3 and NFHS-4 but differs slightly from NFHS-5.

Note 1 : Interventions' coverage is based on the last child data.

Note 2: The following information is not available in the NFHS-5 factsheets and state reports (2019-20): receipt of at least one ANC visit, birth preparedness counselling, malaria prevention and food supplementation (6-35m). Information on use of bed nets during pregnancy is not available in NFHS-3 data (2006). Note 3: Data on food supplementation and health and nutrition education during pregnancy and post-natal care, and weight measurement during childhood and counselling on child growth for 2019-2020 are taken from NFHS-5 state reports.

Note 4: Refer to district dashboard for the inter-district variability in the coverage of interventions.

Counselling on child growth

Weighing

(sdtnom 28-8)

Not Available

%08>-09

40-<60%

Source: NFHS-5 district factsheets and state reports (2019-20)

receipt of at least one ANC visit, weighing, birth preparedness and breastfeeding counselling, counselling on keeping baby warm, cord care counselling, food supplementation, health and nutrition education and Note 1: The following information is not available in the NFHS-5 factsheets and state reports (2019-20): (1) Information on preconception and pregnancy-related indicators including demand for FP satisfied, malaria prevention; (2) Lactation-related indicators including, food supplementation and health and nutrition education; and (3) early childhood-related indicators including pediatric IFA, deworming, food supplementation (6-35m), weighing and counselling on child growth. Information on use of bed nets during pregnancy not available in NFHS-3 data (2005-2006). Note 2: Food supplementation during early childhood is for children aged 6-35 months; counselling on child growth during early childhood is conducted after taking weight measurement

Table 4. Intervention coverage at district-level 2015-2016, 2019-2020

Category	Interventions	Worst performing districts (pp) ¹	Best performing districts (pp) ¹	Top coverage districts (%)
		Difference between (2019-2020) & (2015-2016)	Difference between (2019-2020) & (2015-2016)	2019-2020
	ANC first trimester	Shupiyan: -8.1 Badgam: -3.1	Doda: +44.4 Reasi: +29.3	Pulwama: 96.6 Kulgam: 95.5
Pregnancy	≥4 ANC visits	Kathua: -61.7 Badgam: -29.2	Doda: +37.3 Ramban: +28.2	Samba: 96.2 Pulwama: 96.2
	Received MCP Card	Badgam: -3.4	Doda: +45.6 Rajouri: +34.3	Samba: 100.0 Kupwara: 99.3
	Tetanus injection	Baramula: -4.4 Pulwama: -3.9	Rajouri: +26.5 Doda: +20.0	Anantnag: 97.8 Badgam: 97.5
Delivery and post-natal	Institutional birth°	Anantnag: -2.0 Srinagar: -0.4	Kishtwar: +27.2 Doda: +22.0	Srinagar: 99.2 Kulgam: 98.9
	Skilled birth attendant°	Srinagar: -0.4	Kishtwar: +26.6 Ramban: +26.6	Kulgam: 99.6 Srinagar: 99.2
	Postnatal care for mothers	Ganderbal: -3.4 Baramula: -1.7	Doda: +32.5 Rajouri: +24.0	Pulwama: 95 Samba: 92.3
	Postnatal care for babies°	Not applicable ¹	Udhampur: +25.6 Kathua: +38.1	Pulwama: 93.7 Kulgam: 92.6
Early childhood	Full immunization	Baramula: -5.5 Pulwama: -3.0	Rajouri: +50.0 Bandipore: +22.6	Kathua: 100.0 Kulgam: 98.1
	Vitamin A supplementation°	Kishtwar: -11.6 Ramban: -10.5	Kathua: +48.5 Jammu: +37.6	Badgam: 93.5 Kulgam: 92.6
	Care seeking for ARI°	Ramban: -37.8 Badgam: -34.4	Kishtwar: +4.4 Anantnag: +3.4	Anantnag: 82.3 Poonch: 79.5
	ORS treatment during diarrhea°	Baramula: -17.0 Udhampur: -0.3	Kupwara: +39.9 Rajouri: +25.1	Kupwara: 95.9 Udhampur: 86.2
	Zinc treatment during diarrhea°	Baramula: -6.6	Kupwara: +26.2 Udhampur: +7.4	Kupwara: 61.0 Rajouri: 47.4

Key takeaways

Children: Stunting and wasting prevalence declined by 7 percentage points (pp) and 1pp respectively, between 2006 and 2016; stunting continued to decline by 1pp while wasting increased by 5pp between 2016 and 2020. Underweight declined by 8pp between 2006 and 2016 and continued to decline by 3pp between 2016 and 2020. Anemia declined by 5pp between 2006 and 2016 but increased by 19pp between 2016 and 2020.

Women: Underweight declined by 12pp between 2006 and 2016 and continued to decline by 7pp between 2016 and 2020. Anemia decreased by 3pp and 9pp among non-pregnant and pregnant women respectively, between 2006 and 2016; but increased by 18pp among non-pregnant women and decreased by 3pp among pregnant women between 2016 and 2020. Overweight/obesity increased by 12pp between 2006 and 2016 and remained constant at 29 percent between 2016 and 2020

Men: Overweight/obesity increased by 16pp between 2006 and 2016 and further increased by 10pp between 2016 and 2020.

Attention is needed to improve (%s in 2020):

- Outcomes: Anemia in children (73%) non-pregnant women (67%) and pregnant women (44%)
- Immediate determinants: Timely introduction of complementary foods (42%) adequate diet (14%); 100+ IFA (30%)
- Underlying determinants: Women with ≥ 10 years education (51%)
- Coverage of interventions: Food supplementation for women (34-38%); health and nutrition education for women (36-39%); postnatal care for mothers and children (25-28%); growth monitoring of children (41%)

Source: NFHS-3 (2005-2006), NFHS-4 (2015-2016), and NFHS-5 state and district factsheets (2019-2020). pp: percentage points. Note: Interventions' coverage are based on the last child data. Olndicator definition differs slightly between NFHS-4 and NFHS-5. Prevalence did not increase or decrease in any of the districts. The difference is calculated only between districts that are comparable between 2015-2016 and 2019-2020. All districts in Jammu and Kashmir are comparable across both periods.

Indicator definition

Nutrition outcomes	Definition
Low birth weight	Percentage of live births in the five years preceding the survey with a reported birth weight less than 2.5 kg, based on either a written record or the mother's recall
Stunting among children	Percentage of children aged 0-59 months who are stunted i.e., height-for-age z score < -2SD
Wasting among children	Percentage of children aged 0-59 months who are wasted i.e., weight-for-height z score < -2SD
Severe wasting among children	Percentage of children aged 0-59 months who are wasted i.e., weight-for-height z score < -3SD
Underweight children	Percentage of children aged 0-59 months who are underweight i.e., weight-for-age z score < -2SD
Anemia among children	Percentage of children aged 6-59 months who are anemic i.e., (Hb <11.0 g/dl)
Underweight women	Percentage of women aged 15-49 whose Body Mass Index (BMI) is below normal (BMI <18.5 kg/m2)
Anemia among non-pregnant women	Percentage of non-pregnant women aged 15-49 who are anemic (<12.0 g/dl)
Anemia among pregnant women	Percentage of pregnant women aged 15-49 who are anemic (<11.0 g/dl)
Overweight/obesity - children Overweight/obesity - women	Percentage of children aged 0-59 months who are overweight i.e., weight-for-height z score > 2SD Percentage of men aged 15-54 who are overweight or obese (BMI ≥25.0 kg/m2)
Overweight/obesity - men	Percentage of men aged 15-54 who are overweight or obese (BMI ≥25.0 kg/m2)
High blood pressure among women^	Percentage of women aged 15-49 with elevated blood pressure (Systolic >140 mm Hg or diastolic >90 mm Hg)
High blood pressure among men^	Percentage of men aged 15-54 with elevated blood pressure (Systolic >140 mm Hg or diastolic >90 mm Hg)
High sugar level among women^	Percentage of women aged 15-49 with elevated blood pressure (Systolic >140 mm Hg or diastolic >90 mm Hg)
High sugar level among men^	Percentage of men aged 15-54 with high blood sugar levels (141-160 mg/dl)
Immediate determinants	
Early initiation of breastfeeding	Percentage of children under aged 3 years breastfed within one hour of birth for the last child born in the 3 years before the survey
Exclusive breastfeeding	Percentage of youngest children under age 6 months living with mother who were exclusively breastfed
Timely introduction of complementary foods ⁰	¹ Percentage of youngest children aged 6-8 months living with mother who received solid or semi-solid food during the previous day; ² Percentage of youngest children aged 6-8 months living with mother who received solid or semi-solid food and breastmilk
Continued breastfeeding at 2 years ^{\$}	Percentage of youngest children 12–23 months of age who were fed breast milk during the previous day Percentage of youngest children 6–23 months of age who consumed a minimum acceptable diet during the previous
Adequate diet	day
Eggs and/or flesh foods consumption ^{\$}	Percentage of youngest children 6–23 months of age who consumed egg and/or flesh food during the previous day
Sweet beverage ^{\$} Bottle feeding for infants ^{\$}	Percentage of youngest children 6–23 months of age who consumed a sweet beverage during the previous day Percentage of youngest children 0–23 months of age who were fed from a bottle with a nipple during the previous day
Women with body mass index <18.5 kg/m ² °	¹ Percentage of women aged 15-49 with a youngest child < 5 years who have BMI below normal (BMI <18.5 kg/m²); ² Percentage of women aged 15-49 whose BMI is below normal (BMI <18.5 kg/m²)
Consumed IFA 100+ days	Percentage of mothers aged 15-49 who consumed iron folic acid for 100 days or more during the last pregnancy in last five years preceding the survey
Diarrhea in the last two weeks ⁰	¹ Percentage of youngest children under age five who had diarrhea in the two weeks preceding the survey; ² Percentage of children under age 5 who had diarrhea in the 2 weeks preceding the survey
ARI in the last two weeks ⁰	¹ Percentage of youngest children under age five who had symptoms of acute respiratory infection (ARI) in the two weeks preceding the survey; ² Percentage of children under age five who had symptoms of acute respiratory
	infection (ARI) in the two weeks preceding the survey
Underlying determinants	
Women who are literate ⁰	¹ Percentage of women aged 15-49 with a birth in five years preceding the survey who are literate i.e., those who completed standard 6 or higher and can read a whole sentence; ² Percentage of women aged 15-49 who are literate i.e., those who completed standard 9 or higher and can read a whole sentence or part of a sentence.
Women with ≥10 years education ⁰	¹ Percentage of women aged 15-49 with a birth in five years preceding the survey with 10 or more years of schooling; ² Percentage of women aged 15-49 with 10 or more years of schooling
Girls 20-24 years married before age of 18 years ⁰	¹ Percentage of women aged 20-24 years with a birth in five years preceding the survey who were married before age 18 years; ² Percentage of women aged 20-24 years who were married before age 18 years
Women 15-19 years with child or pregnant	Percentage of currently married women aged 15-49 who had their first birth before age 20 years and in the five years preceding the survey
HHs with improved drinking water source ⁰	¹ Percentage of youngest children under age 5 living in household that use an improved source of drinking water; ² Population living in households that use an improved sanitation facility
HHs with improved sanitation facility ⁰	¹ Percentage of youngest children under age 5 living in household that uses improved toilet facility; ² Population living in households that use an improved sanitation facility
HHs with hand washing facility ^{^\$}	Percentage of youngest children under age 5 living in household that had soap and water for washing hands
Open defecation [®] Safe disposal of feces ^{\$}	Percentage of youngest children under age 5 living in household that has no toilet facility/defecates in open Percentage of youngest children living with mother whose stools were disposed of safely
HHs with BPL card [®]	Percentage of youngest children under age 5 living in households with BPL card
HHs with electricity ⁰	¹ Percentage of youngest children under age 5 living in household that has electricity; ² Population living in households with electricity

[^]Indicator not available in NFHS-3. Indicator not available in NFHS-5 factsheets/state reports Indicator comparable between NFHS-3 and NFHS-4 but differs slightly from NFHS-5. [@] Indicator not available in NFHS-5 factsheets but available in NFHS-5 states reports.
¹ Definition per NFHS-3/NFHS-4. ² Definition as per NFHS-5 factsheet.

Indicator definition

Interventions	Definition
Demand for FP satisfied [®]	Percentage of currently married women aged 15-49 with demand for family planning satisfied by modern methods
Iodized salt ^o	¹ Percentage of women aged 15-49 living in HHs that use iodized salt; ² Percentage of households using iodized salt
Any ANC visits\$	Percentage of women aged 15-49 with a live birth in the five years who received at least one ANC for the last birth
ANC first trimester	Percentage of women (15-49 years of age) attended by any provider during the first trimester of pregnancy that led to
	the birth of the youngest child in the last 2 years
≥ 4ANC	Percentage of mothers aged 15-49 who had at least 4 antenatal care visits for last birth in the 5 years before the
Descrived MCD cord	Survey
Received MCP card	Percentage of mothers who registered last pregnancy in the 5 years preceding the survey for which she received a
Received IFA tab/syrup®	Mother and Child Protection (MCP) card Percentage of women who received IFA (given or purchased) tablets during the pregnancy for their most recent live
Received if A tab/syrup	birth in the 5 years preceding the survey
Tetanus injection	Percentage of women whose last birth was protected against neonatal tetanus (for last birth in the five years
	preceding the survey)
Deworming- pregnancy@	Percentage of women who took an intestinal parasite drug during the pregnancy for their most recent live birth in the
	5 years preceding the survey
Weighing- pregnancy@	Percentage of women aged 15-49 with a live birth in the five years preceding the survey who were weighed during
5: 4	ANC for the last birth
Birth preparedness counselling\$	Percentage of women who had at least one contact with a health worker in the three months preceding the survey
	and were counselled on birth preparedness; calculated among women aged 15-49 who gave birth in the five years
Breastfeeding counselling@	preceding the survey Percentage of women who met with a community health worker in the last three months of pregnancy and received
Dreastreeding counselling	advice on breastfeeding (for the last pregnancy in the five years preceding the survey)
Counselling on keeping baby	Percentage of women who met with a community health worker in the last three months of pregnancy and received
warm [®]	advice on keeping the baby warm for their most recent live birth in the five years preceding the survey
Cord care counselling ^{^@}	Percentage of women who met with a community health worker in the last three months of pregnancy and received
· ·	advice on cord care for their most recent live birth in the five years preceding the survey
Food supplementation -	¹ Percentage of youngest children under age 5 whose mother received supplementary food from AWC during
pregnancy [®]	pregnancy; ³ Among children under 6 years, percentage whose mother received specific benefits from AWC during
	pregnancy: supplementary food
Health & nutrition education –	¹ Percentage of mothers who received health and nutrition education from an Anganwadi Centre (AWC) during last
pregnancy [®]	pregnancy in the five years preceding the survey; ³ Among children under 6 years, percentage whose mother received
Malaria prevention- use of bed	specific benefits from AWC during pregnancy: health and nutrition education Percentage of women who used mosquito net during the pregnancy for their most recent live birth in the 5 years
nets ^{\\$}	preceding the survey
Institutional birth ⁰	Percentage of women aged 15-49 who gave birth in health/institutional facility for their most recent live birth in the 5
	years preceding the survey; ² Percentage of live births to women aged 15-49 in the five years preceding the survey
	that took place in a health/institutional facility
Financial assistance (JSY)@	Percentage of women who received financial assistance under JSY for their most recent live birth that took place in
	institutional facility in the 5 years preceding the survey
Skilled birth attendant ⁰	¹ Percentage of women whose last delivery was attended by a skilled health personnel for their most recent live birth
	in the 5 years preceding the survey; ² Percentage of births attended by skilled health personnel for births in the 5
Postnatal care for mothers	years before the survey Percentage of mothers who received postnatal care from a doctor/nurse/LHV/ANM/midwife/other health personnel
1 Ostriatal care for mothers	within 2 days of delivery for their most recent live birth in the five years preceding the survey
Postnatal care for babies	Percentage of children who received postnatal care from a doctor /nurse /LHV /ANM /midwife /other health personnel
	within 2 days of delivery for last birth in the 5 years before the survey
Food supplementation – postnatal®	¹ Percentage of youngest children under age 5 whose mother received supplementary food from AWC while
	breastfeeding; ³ Among children under 6 years, percentage whose mother received specific benefits from AWC while
	breastfeeding: supplementary food
Health & nutrition education –	¹ Percentage of youngest children under age 5 whose mother received health check-ups from AWC while
postnatal [@]	breastfeeding; ³ Among children under 6 years, percentage whose mother received specific benefits from AWC while
Full immunication()	breastfeeding: health and nutrition education
Full immunization ⁰	¹ Percentage of youngest living children aged 12-23 months fully vaccinated based on information from either vaccination card or mother's recall; ² Percentage of children aged 12-23 months fully vaccinated based on information
	from either vaccination card or mother's recall
Vitamin A – early childhood ⁰	¹ Percentage of youngest children aged 6-59 months who received Vitamin A supplementation in the last 6 months
manner cany annunced	preceding the survey; 2 Percentage of children aged 9-35 months who received a vitamin A dose in the last 6 months
Pediatric IFA ^{0@}	Percentage of youngest children aged 6-59 months who received iron supplements in the past 7 days preceding the
	survey
Deworming – early childhood ^{0@}	Percentage of youngest children aged 6-59 months who received deworming tablets in the last 6 months preceding
	the survey
Care seeking for ARI ⁰	¹ Percentage of youngest children under age 5 years with fever or symptoms of ARI in the 2 weeks preceding the
	survey taken to a health facility or health provider; ² Percentage of children under age 5 years with fever or symptoms
ORS during diarrhea ⁰	of ARI in the 2 weeks preceding the survey taken to a health facility or health provider ¹Percentage of youngest children under age 5 years with diarrhea in the 2 weeks preceding the survey who received
OKS during diarrileas	oral rehydration salts (ORS); 2Percentage of children under age 5 years with diarrhea in the 2 weeks preceding the
	survey who ORS
Zinc during diarrhea ⁰	¹ Percentage of youngest children under age 5 years with diarrhea in the 2 weeks preceding the survey who
Ç	received zinc; ² Percentage of children under age 5 years with diarrhea in the 2 weeks preceding the survey who
	received zinc
Food supplementation (children 6-	Percentage of youngest children aged 6-35 months who received food supplements from AWC in the 12 months
35 months) \$	preceding the survey
Weighing – early childhood®	Percentage of youngest children under age 5 who were weighed at AWC in the 12 months preceding the survey
Counselling on child growth [®]	Percentage of youngest children under age 5 whose mother received counselling from an AWC after child was
	weighed in the 12 months preceding the survey

[^]Indicator not available in NFHS-3. \$Indicator not available in NFHS-5 factsheets/state reports. @Indicator not available in NFHS-5 factsheets but available in NFHS-5 states reports. OIndicator comparable between NFHS-3 and NFHS-4 but differs slightly from NFHS-5.

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SUGGESTED CITATION

Christopher, A., R. Avula, S.K. Singh, R. Sarwal, N. Bhatia, R. Johnston, W. Joe, P. Menon, and P.H. Nguyen. 2021. *State Nutrition Profile: Jammu & Kashmir*. POSHAN Data Note 45. New Delhi, India: International Food Policy Research Institute.

ACKNOWLEDGEMENTS

Financial support for this Data Note was provided by the Bill & Melinda Gates Foundation through POSHAN, led by the International Food Policy Research Institute. The funder played no role in decisions about the scope of the analysis or the contents of the Note.

We thank Long Quynh Khuong (Independent Researcher) for creating the maps, Nishmeet Singh (IFPRI) and Anjali Pant (IFPRI) for working with the dataset and Julie Ghostlaw (IFPRI) & Abhilasha Vaid (Consultant) for editing and reviewing the Note.

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Disclaimer: The maps used in this Data Note are based on the districts in NFHS-5 factsheets/reports. The boundaries shown do not imply any official endorsement or acceptance by IFPRI.

ABOUT POSHAN

Partnerships and Opportunities to Strengthen and Harmonize Actions for Nutrition in India (POSHAN) is a multi-year initiative that aims to support the use of data and evidence in decision-making for nutrition in India. It is supported by the Bill & Melinda Gates Foundation and led by IFPRI in India. http://poshan.ifpri.info/

ABOUT DATA NOTES

POSHAN Data Notes focus on data visualization to highlight geographic and/or thematic issues related to nutrition in India. They draw on multiple sources of publically available data.

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