

Partnerships and Opportunities to Strengthen and Harmonize Actions for Nutrition in India

## Data Note

**HIMACHAL PRADESH** 

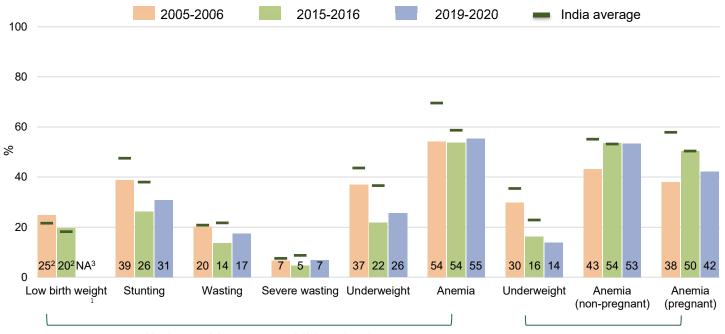
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### **State Nutrition Profile: Himachal Pradesh**

### **ABOUT THIS DATA NOTE**

Optimum fetal and child nutrition This Data Note describes the trends for a set of key nutrition and health outcomes, determinants, and and development coverage of interventions. The findings here are based on data from the National Family Health Survey (NFHS) NUTRITION SPECIFIC 3 (2005-2006), 4 (2015-2016), and 5 (2019-2020). In IMMEDIATE DETERMINANTS INTERVENTIONS addition to standard prevalence-based analyses, this Breastfeeding, nutrient rich foods, Service delivery to mothers Data Note includes headcount-based analyses aligned and infants along the caregiving practices to the POSHAN Abhiyaan monitoring framework and continuum of care, access to Low burden of infectious diseases uses data from NFHS-5 to provide evidence that helps health facilities identify priority districts and number of districts in the state with public health concern as per the WHO guidelines.<sup>1</sup> The Data Note includes a color-coded INTERVENTIONS THAT AFFECT UNDERLYING AND BASIC UNDERLYING AND BASIC dashboard to compare the coverage of nutrition DETERMINANTS interventions across all the districts in the state. It DETERMINANTS Women's status, sanitation and Women's empowerment, concludes with key takeaways for children, women, and hygiene, food security, socio sanitation, agriculture and men and identifies areas where the state has potential economic conditions social safety net programs to improve.

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



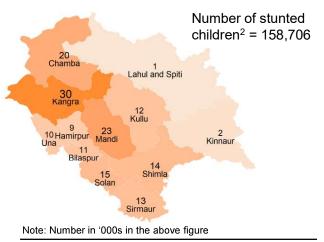
### Undernutrition among children (<5y)

#### Undernutrition among women (15-49y)

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. <sup>1</sup>WHO. Nutrition Landscape Information System (NLiS). Help Topic: Malnutrition in children. (<u>https://apps.who.int/nutrition/landscape/help.aspx?menu=0&helpid=391&lang=EN</u>). <sup>2</sup>In NFHS-3, 50.9% of data was missing, while 19.3% of data was missing in NFHS-4. <sup>3</sup>NA refers to the unavailability of data for a particular indicator in the specified NFHS round.

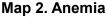
## Map 1 & 2. Number of stunted & anemic children <5y, 2019-2020

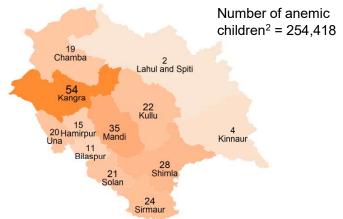
### Map 1. Stunting



	Highest burden districts			
1	Kangra	30,422		
2	Mandi	23,096		
3	Chamba	19,619		
4	Solan	14,630		
5	Shimla	14,205		
a of districts with withlis health someows 1, 40 of 40				

No. of districts with public health concern<sup>1</sup>: 12 of 12





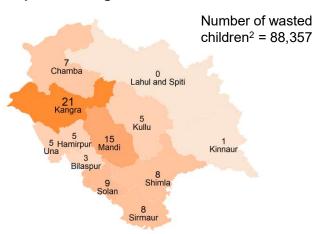
Note: Number in '000s in the above figure

	Highest burden districts			
1	Kangra	53,974		
2	Mandi	34,601		
3	Shimla	27,827		
4	Sirmaur	24,124		
5	Kullu	22,337		

No. of districts with public health concern<sup>1</sup>: 12 of 12

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

### Map 3. Wasting

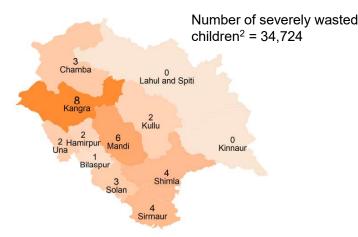


Note: Number in '000s in the above figure

Highest burden districts				
1	Kangra	21,078		
2	Mandi	14,684		
3	Solan	9,466		
4	Sirmaur	8,493		
5	Shimla	8,124		
	of districts with public health concern1, 12 of			

#### No. of districts with public health concern<sup>1</sup>: 12 of 12

#### Map 4. Severe Wasting



Note: Number in '000s in the above figure

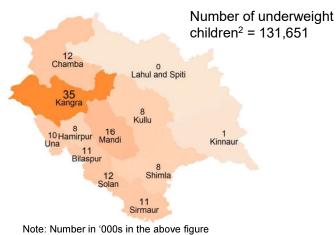
	Highest burden districts			
1	Kangra	8,366		
2	Mandi	5,903		
3	Sirmaur	4,178		
4	Shimla	4,088		
5	Chamba	2,671		

No. of districts with public health concern<sup>1</sup>: 12 of 12

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 data) and projected population for 2019 was estimated using Census 2011. <sup>1</sup>Public health concern is defined as  $\geq$ 20% for stunting,  $\geq$ 40% for anemia,  $\geq$ 10% for wasting, and  $\geq$ 2% for severe wasting (WHO 2011). <sup>2</sup>The total number of children <5 years is 511,000.

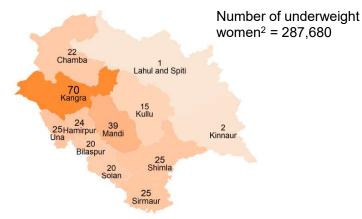
# Map 5 & 6. Number of underweight children (<5y) & women (15-49y), 2019-2020

### Map 5. Underweight children



	Highest burden distr	icts	
1	Kangra	34,768	
2	Mandi	15,717	
3	Solan	12,093	
4	Chamba	11,974	
5	Sirmaur	11,109	
No. of districts with public health concern <sup>1</sup> : 9 of 12			

#### Map 6. Underweight women

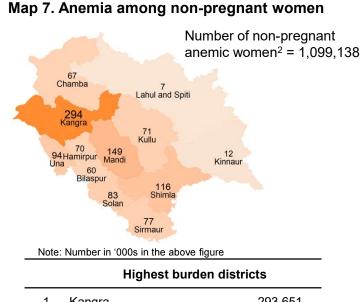


Note: Number in '000s in the above figure

	Highest burden districts	
1	Kangra	70,071
2	Mandi	38,820
3	Una	25,229
4	Shimla	24,632
5	Sirmaur	24,585

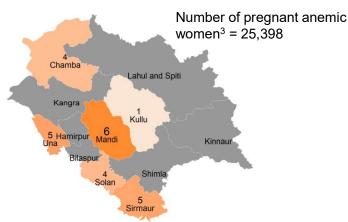
No. of districts with public health concern<sup>1</sup>: 9 of 12

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



No. of districts with public health concern <sup>1</sup> : 12 of 12			
5	Solan	82,819	
4	Una	94,106	
3	Shimla	116,192	
2	Mandi	148,607	
1	Kangra	293,651	

Map 8. Anemia among pregnant women<sup>3</sup>



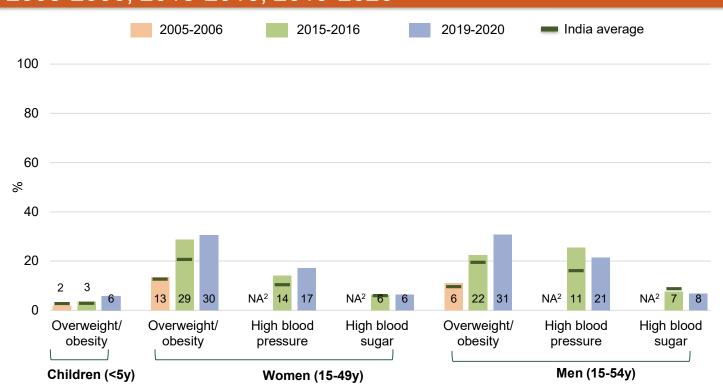
Note: Number in '000s in the above figure

	Highest burden districts			
1	Mandi	6,298		
2	Una	5,131		
3	Sirmaur	4,910		
4	Solan	3,880		
5	Chamba	3,684		

No. of districts with public health concern<sup>1</sup>: 4 of 12<sup>2</sup>

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 Map 8 indicates districts for which data are not available.<sup>1</sup>Public 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). <sup>2</sup>The total number of children <5 years is 511,000, pregnant women 15-49 years is 110527, and non-pregnant women 15-49 years is 1951487. <sup>3</sup>Anemia among pregnant women is only available for the districts Chamba, Kullu, Mandi, Sirmaur, Solan and Una.

## Figure 2. Trends in overweight/obesity & NCDs<sup>1</sup> 2005-2006, 2015-2016, 2019-2020



# Table 1. Overweight/obesity & NCDs<sup>1</sup> at district-level 2015-2016, 2019-2020

Category	Outcomes	Worst performing districts (pp)⁵	Best performing districts (pp)⁵	Highest burden districts (thousands) <sup>3</sup>	No of districts with public health concern <sup>4</sup> (total=12)
		Difference between (2019-2020) & (2015- 2016)	Difference between (2019-2020) & (2015- 2016)	2019-2020	2019-2020
Children <5 years	Overweight/ obesity	Kullu: +7.2 Kinnaur: +7.2	Hamirpur: -3.8 Kangra: -0.9	Mandi: 5 Shimla: 4	0
	Overweight/ obesity	Mandi: +7.4 Hamirpur: +6.2	Shimla: -4.8 Kinnaur: -1.4	Kangra: 142 Mandi: 95	12
Women (15-49 years)	High blood pressure	Chamba: +6.5 Kangra: +6.2	Kullu: -3.1	Kangra:93 Mandi: 45	2
	High blood sugar	Mandi: +3.3 Bilaspur: +2.5	Una: -0.9 Solan: -0.8	Kangra: 34 Mandi: 20	0
	Overweight /obesity	Data not available a	at district level		
Men (15-54 years)	High blood pressure	Chamba: +2.8 Shimla: +2	Kullu: -16.1 Sirmaur: -9.9	Kangra: 102 Mandi: 63	8
	High blood sugar	Bilaspur: +4.6 Mandi: +4.0	Solan: -2.8 Kullu: -2.2	Kangra: 27 Mandi: 25	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. <sup>1</sup>NCDs: non-communicable diseases. <sup>2</sup>NA refers to the unavailability of data for a particular indicator in the specified NFHS round. <sup>3</sup>Burden: 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. <sup>4</sup>Public 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). <sup>5</sup>The difference is calculated only between districts that are comparable between 2015-2016 and 2019-2020. All districts in Himachal Pradesh are comparable across both periods.

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

Category	Immediate determinants	2005-2006	2015-2016	2019-2020
	Early initiation of breastfeeding	45	44	45
	Exclusive breastfeeding	27	68	70
	Timely introduction of complementary foods <sup>o</sup>	<b>—</b> 17	59	68
IVOE	Continued breastfeeding at 2 years	100	67	
IYCF practices	Adequate diet <sup>o</sup>	25	<b>1</b> 5	19
	Eggs and/or flesh foods consumption, 6-23m	<b>—</b> 10 (	5	
	Sweet beverage consumption, 6-23m	37	28	
	Bottle feeding of infants, 6-23m	23	32	
Maternal	Women with body mass index <18.5 kg/m2º	34 (	<b>1</b> 5	<b>1</b> 4
determinants	Consumed IFA 100+ days	<b></b> 27 <b></b>	50	67
	Diarrhea in the last two weeks <sup>o</sup>	<b>1</b> 0	8	5
	ARI in the last two weeks <sup>o</sup>	1	2	2

# Table 2. Immediate determinants at district-level2015-2016, 2019-2020

Category	Immediate determinants	Worst performing districts (pp) <sup>3</sup>			
		Difference between (2019-2020) & (2015-2016)	Difference between (2019-2020) & (2015-2016)	2019-2020	
	Early initiation of breastfeeding	Kangra: -7.4 Una: -5.9	Lahul And Spiti: +11.7 Solan: +11.4	Sirmaur: 67.9 Kinnaur: 59.5	
IYCF	Exclusive breastfeeding	Chamba: -17 Kullu: -12.8	Sirmaur: +15.5	Sirmaur: 75.9 Kullu: 69.9	
practices	Timely introduction of complementary foods <sup>0</sup>	Data not available at district-level			
	Adequate diet <sup>o</sup>	Una: -8.4 Kinnaur: -6.1	Kullu: +26.6 Lahul And Spiti: +9.8	Hamirpur: 31.8 Kullu: 28.7	
Maternal determinants	Women with BMI<18.5 kg/m2⁰	Una: +8.8 Hamirpur: +4.6	Chamba: -8.6 Shimla: -4.9	Shimla: 9.9 Kinnaur: 9.9	
Geterminants	Consumed IFA 100+ days	Una:- 7.9	Mandi: +33.9 Sirmaur: +28.9	Shimla: 77.2 Solan: 75	
<b>D</b>	Diarrhea in the last two weeks⁰	Hamirpur: +4.9 Kullu: +4.8	Solan: -12.4 Bilaspur: -5.6	Shimla: 1.6 Mandi: 2.6	
Diseases	ARI in the last two weeks⁰	Solan: +3 Shimla: +2.3	Bilaspur: -4.6 2 Districts <sup>2</sup> : -2.8	Bilaspur: 0 Mandi: 0.4	

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

<sup>o</sup>Indicator definition differs slightly between NFHS-4 and NFHS-5. <sup>1</sup>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. <sup>2</sup>Districts: Mandi and Kinnaur. <sup>3</sup>The difference is calculated only between districts that are comparable between 2015-2016 and 2019-2020. All districts in Himachal Pradesh 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 <sup>o</sup>	83	95	92
Maternal	Women with ≥10 years education <sup>o</sup>	49	73	66
determinants	Girls 20-24 years married before age of 18 years <sup>o</sup>	27	22	5
	Women 15-19 years with child or pregnant		3	3
	HHs with improved drinking water source <sup>o</sup>	87	95	96
	HHs with improved sanitation facility <sup>o</sup>	34	71	82
	HHs with hand washing facility		69	
Household determinants	Open defecation <sup>o</sup>	58	15	<b>7</b>
	Safe disposal of feces	33	79	
	HHs with BPL card <sup>e</sup>	<b>—</b> 13	22	<b>1</b> 8
	HHs with electricity <sup>o</sup>	98	<b>9</b> 9	100

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

Category	Underlying determinants	Worst performing districts (pp) <sup>2</sup>	Best performing districts (pp) <sup>2</sup>	Top coverage districts (%) <sup>1</sup>
		Difference between (2019-2020) & (2015-2016)	Difference between (2019-2020) & (2015-2016)	2019-2020
	Women who are literate⁰	Kinnaur: -9.4 Lahul and Spiti: -8.8	Shimla: 2.1	Hamirpur: 94.8 Kangra: 94.4
Maternal	Women with ≥10 years education⁰	Lahul and Spiti: -17.3 Kangra: -16.1	Sirmaur: +0.4	Hamirpur: 76.1 Mandi: 71.8
determinants	Girls 20-24 years married before age of 18 years <sup>0</sup>	Not applicable <sup>3</sup>	Lahul and Spiti: -44 Shimla: -30.8	Kangra: 1.5 Una: 1.6
	Women 15-19 years with child or pregnant	Shimla: +4.2 Solan: +3.1	Lahul and Spiti: -4.4 Kullu: -3.3	Kangra: 0.8 Chamba: 2.0
	HHs with improved drinking water source <sup>0</sup>	Chamba: -7.6 Kullu: -1.8	Bilaspur: +12.4 Solan: +5.7	Una: 98.8 Kangra: 98.6
Household determinants	HHs with improved sanitation facility <sup>0</sup>	Not applicable <sup>3</sup>	Mandi: +19.4 Shimla: +17.4	Shimla: 87.3 Mandi: 87
	HHs with electricity <sup>0</sup>	Una: -0.6 Kinnaur: -0.4	Lahul and Spiti: +1.6 Chamba: +1.1	Shimla:100.0 Bilaspur: 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. <sup>0</sup>Indicator definition differs slightly between NFHS-4 and NFHS-5. <sup>1</sup>For 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. <sup>2</sup>The difference is calculated only between districts that are comparable between 2015-2016 and 2019-2020. All districts in Himachal Pradesh are comparable across both periods. <sup>3</sup>Prevalence did not increase or decrease in any of the districts.

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

	Intervention	2005-2006	2015-2016	2019-2020
	Demand for FP satisfied	89	72	77
	lodized salt <sup>o</sup>	92	99	99
cy	Any ANC visits	89	92	
lan	ANC first trimester	57	71	72
egr	≥ 4ANC	44	69	70
br	Received MCP card	68	89	99
bu	Received IFA tab/syrup	85	93	97
Iuri	Tetanus injection	81	83	90
Pre-pregnancy and during pregnancy	Deworming	<b>3</b>	<b>()</b> 11	24
an	Weighing	74	86	99
ICV	Birth preparedness counselling	<b>5</b>	• 1	
Jar	Breastfeeding counselling	<b>—</b> 18	<b>31</b>	88
egi	Counselling on keeping baby warm		71	85
-p-	Cord care counselling		25	82
Pre	Food supplementation <sup>o</sup>	32	79	83
_	Health & nutrition education <sup>o</sup>	<b>—</b> 14	43	73
	Malaria prevention- use of bed nets		<b>—</b> 15	
	Institutional birtho	44	79	88
<u>p</u> _	Financial assistance (JSY)		<b>— 1</b> 0	<b>1</b> 6
an	Skilled birth attendant <sup>o</sup>	49	80	87
Delivery and post-natal	Postnatal care for mothers	36	70	86
VII	Postnatal care for babies	0	29	86
å a	Food supplementation <sup>o</sup>	28	66	79
	Health & nutrition education <sup>o</sup>	<b>—</b> 12	36	68
	Full immunization <sup>o</sup>	74	70	89
	Vitamin A <sup>o</sup>	29	63	<b>77</b>
	Pediatric IFA <sup>o</sup>	<b>5</b>	20	38
po	Deworming <sup>o</sup>	<b>5</b>	<b>41</b>	<b>3</b> 4
Childhood	Care seeking for ARI <sup>o</sup>	<b>79</b>	<b>77</b>	<b>7</b> 6
ild	ORS during diarrhea <sup>o</sup>	<b>54</b>	65	74
ស	Zinc during diarrhea <sup>o</sup>	0	<b>1</b> 6	<b>2</b> 0
	Food supplementation (6-35 months)	<b>38</b>	84	
	Weighing	<b>21</b>	<b>5</b> 0	68
	Counselling on child growth	<b>8</b>	27	66

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

<sup>0</sup>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.

### Intervention coverage at district-level, 2019-2020

pregnancy		~		~		~	Pregnan	در			~	 L	~			De	Delivery & postnata	postnat				~		" Earl	Early childhood	ъ "	 	m
tles bezibol	stiziv JNA γnA	ANC first trimester	SNA ASCEIVED Card	Received MCP card Received IFA	quŋys/det Tetanus injection	Deworming	gnidgieW	Birth preparedness counselling	Breastfeeding counselling	Counselling on keeping baby warm	Cord care counselling	Food supplementation Health & nutrition	education Malaria prevention-	use of bed nets Institutional birth	Financial assistance	(JSKilled birth attendant	Postnatal care for	Postnatal care for	səided Food supplementation	Health & nutrition	education Full immuni Ilu7	A nimstiV	Paediatric IFA	Deworming	Care seeking for ARI ORS during diarrhea	Zinc during diarrhea	roitstnemelqqus boo7 (sdtnom 25-3)	BrifagiaW Counselling on child
99.1	2	72.4 7	70.3 98.	7 97	.4 90.0	.0 23.8								88.2	15	5.8 87	7.1 86.3	.3 86.	0		89.3	77.3		76	76.2 73.7	7 19.5		
98.7	~	76.4 8	81.4 99	99.3 96.4	6.4 92.4	.4 22.7								91.7	14	1.8 87	.6 92	.06 6.	0		100.0	75.4						
99.1		75.1 6	62.7 98.	3.7 96.3	5.2 94.0	.0 20.1								72.0	.0 13.	3.4 74.1	72	9 70.	<u>∞</u>		100.0	77.8						
99.2	9	67.5 5	59.4 97	97.8 97.	.9 82	.8 16.8							-	97.6	19	9.6 92.4	88	96.8	œ		74.3	80.0						
98.7		51.5 5	56.3 96.4	6.4 97.6	78.8	. <mark>8</mark> 23.3							-	90.2	0.2 11.8	87	7.5 88.	.7 85.9	<u>م</u>		83.9	79.0		72.4	4			
99.5	~	77.8 7.	75.3 97	97.5 96.	4 91	.3 16.8							-	82.7	28	3.8 84.	t.1 83.	.4 85.	.6		91.7	82.4		-	-			
99.8	9	62.1 6	66 0.09	99.3 96.2	5.2 91.8	.8 16.6							-	87.0	0.0 16.0	5.0 88.	3.1 84.	.6 86.	.6		80.2	85.2		-				
99.2	9	62.4 6	65.6 99.	9.4 91.7	1.7 95.4	.4 19.2								86.4	23	3.6 86.7	5.7 81.	.1 81.	0.		77.9	74.5						
98.9	8	81.2 7	70.3 100	100.0 99.4	95.5	.5 31.4								86.6	6.16.1	5.1 86.4	5.4 84.	.2 83.	2		94.1	72.8						
6.66	8	83.1 8	85.3 100	100.0 96.5	95	.5 20.8								92.2	22 27	2.9 91	.3 91	.6 91.	2		96.5	73.9						
98.5	5	91.0 8	85.2 100	100.0 97.1	98	.8 23.0								87.	.4 17.1	7.1 88.	3.2 88.	.7 85.	رت ا		93.9	75.1		78.	2			
99.1	00	87.1 8	88.2 98	98.6 98.6	3.6 95.2	.2 30.6								90.2	0.2 16.2	5.2 86.8	5.8 85.9	.988.	7		92.6	78.5		79.1	1.			
98.6	~	2 2 0 2	717 00	0 1 0E 1	1 26.7	C C C L								00	1 10	0 1 00	0.04	07.0	-		75.2	70.1		0 2 0	C.			

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

receipt of at least one ANC visit, weighing, birth preparedness and breastfeeding 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.

40-<60% 60-<80% >=80% Not Available

20-<40%

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

Category	Interventions	Worst performing districts (pp) <sup>2</sup>	Best performing districts (pp)²	Top coverage districts (%)
		Difference between (2019-2020) & (2015- 2016)	Difference between (2019-2020) & (2015- 2016)	2019-2020
	ANC first trimester	Not applicable <sup>3</sup>	Not applicable <sup>3</sup>	Kullu: 28.7 Mandi: 24.4
	≥4 ANC visits	Kangra: -25.6 Hamirpur: -14.1	Bilaspur: +21.8 Sirmaur: +21.1	Solan: 88.2 Shimla: 85.3
Pregnancy	Received MCP Card	Not applicable <sup>3</sup>	Bilaspur: +14.3 Lahul and Spiti: +13.2	Mandi: 100.0 Shimla: 100.0
	Tetanus injection	Kangra: -10.4	Lahul and Spiti: +17.7 Chamba: +14.7	Sirmaur: 98.8 Shimla: 95.5
	Institutional birth°	Not applicable <sup>3</sup>	Mandi: +17.7 Kullu: +14.6	Hamirpur: 97.6 Shimla: 92.2
Delivery and	Skilled birth attendant°	Kangra: -2.7	Mandi: +14.8 Chamba: +13.8	Hamirpur: 92.4 Shimla: 91.3
post-natal	Postnatal care for mothers	Not applicable <sup>3</sup>	Mandi: +28.1 Lahul and Spiti: +18.6	Bilaspur: 92.9 Shimla: 91.6
	Postnatal care for babies°	Not applicable <sup>3</sup>	Mandi: +64 Hamirpur: +63.9	Hamirpur: 96.8 Shimla: 91.2
	Full immunization	Not applicable <sup>3</sup>	Bilaspur: +39.1 Chamba: +36.4	Bilaspur: 100.0 Chamba: 100.0
	Vitamin A supplementation°	Hamirpur: -2.2 Bilaspur: -0.3	Kullu: +26.2 Kinnaur: +23.2	Kullu: 85.2 Kinnaur: 82.4
Early childhood	Care seeking for ARI°	Kangra: -12.2 Sirmaur: -3.8	Una: +5.5	Una: 85.2 Solan: 79.1
	ORS treatment during diarrhea°	Data not available at c	listrict-level	
	Zinc treatment during diarrhea°	Data not available at c	listrict-level	

### Key takeaways

**Children:** Stunting and wasting prevalence declined by 13 percentage points (pp) and 6pp respectively between 2006 and 2016; but both stunting and wasting increased by 5pp and 3pp respectively, between 2016 and 2020. Underweight declined by 15pp between 2006 and 2016 but increased by 4pp between 2006 and 2016. Anemia prevalence remained constant at 54 percent between 2006 to 2016 but increased by 1pp between 2016 and 2020. **Women**: Underweight declined by 14pp between 2006 and 2016 and 2016 and continued to decline by 2pp between 2016 and 2020. **Women**: Underweight declined by 11pp and 12pp among non-pregnant and pregnant women respectively, between 2006 and 2016, but decreased by 1pp and 8pp, respectively between 2016 and 2020. Overweight/obesity increased by 16pp between 2006 to 2016 and 2020. **Women**: Overweight/obesity increased by 16pp between 2006 and 2016 and 2020.

Men: Overweight/obesity increased by 16pp between 2006 and 2016 and further increased by 9pp between 2016 and 2020.

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

- Outcomes: Anemia in children (55%); in non-pregnant women (53%) and pregnant women (42%)
- Immediate determinants: Early initiation of breastfeeding (45%); adequate diet (19%)
- **Underlying determinants:** Women with  $\geq$  10 years education (66%)
- Coverage of interventions: Zinc during diarrhea (20%)

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. <sup>0</sup>Indicator definition differs slightly between NFHS-4 and NFHS-5. <sup>2</sup>The difference is calculated only between districts that are comparable between 2015-2016 and 2019-2020. All districts in Himachal Pradesh are comparable across both periods. <sup>3</sup>Prevalence did not increase or decrease in any of the districts.

## 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	Percentage of children aged 0-59 months who are overweight i.e., weight-for-height z score > 2SD
Overweight/obesity - women	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 <sup>^</sup>	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 <sup>1</sup> Percentage of youngest children aged 6-8 months living with mother who received solid or semi-solid food during the
Timely introduction of complementary foods <sup>0</sup>	previous day; <sup>2</sup> 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 <sup>\$</sup>	Percentage of youngest children 12-23 months of age who were fed breast milk during the previous day
Adequate diet	Percentage of youngest children 6–23 months of age who consumed a minimum acceptable diet during the previous day
Eggs and/or flesh foods consumption <sup>\$</sup>	Percentage of youngest children 6-23 months of age who consumed egg and/or flesh food during the previous day
Sweet beverage <sup>\$</sup>	Percentage of youngest children 6-23 months of age who consumed a sweet beverage during the previous day
Bottle feeding for infants <sup>\$</sup>	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 <sup>20</sup>	<sup>1</sup> Percentage of women aged 15-49 with a youngest child < 5 years who have BMI below normal (BMI <18.5 kg/m2) ; <sup>2</sup> Percentage of women aged 15-49 whose BMI is below normal (BMI <18.5 kg/m <sup>2</sup> )
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 <sup>0</sup>	<sup>1</sup> Percentage of youngest children under age five who had diarrhea in the two weeks preceding the survey; <sup>2</sup> Percentage of children under age 5 who had diarrhea in the 2 weeks preceding the survey
ARI in the last two weeks <sup>0</sup>	<sup>1</sup> Percentage of youngest children under age five who had symptoms of acute respiratory infection (ARI) in the two weeks preceding the survey; <sup>2</sup> 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 <sup>0</sup>	<sup>1</sup> 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; <sup>2</sup> 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 <sup>0</sup>	<sup>1</sup> Percentage of women aged 15-49 with a birth in five years preceding the survey with 10 or more years of schooling; <sup>2</sup> Percentage of women aged 15-49 with 10 or more years of schooling
Girls 20-24 years married before age of 18 years <sup>0</sup>	<sup>1</sup> Percentage of women aged 20-24 years with a birth in five years preceding the survey who were married before age 18 years; <sup>2</sup> 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	<sup>1</sup> Percentage of youngest children under age 5 living in household that use an improved source of drinking water;
source <sup>0</sup> HHs with improved sanitation	<sup>2</sup> Population living in households that use an improved sanitation facility <sup>1</sup> Percentage of youngest children under age 5 living in household that uses improved toilet facility; <sup>2</sup> Population living
facility <sup>0</sup> HHs with hand washing facility^\$	in households that use an improved sanitation facility Percentage of youngest children under age 5 living in household that had soap and water for washing hands
Open defecation <sup>@</sup> Safe disposal of feces <sup>\$</sup>	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 <sup>®</sup>	Percentage of youngest children under age 5 living in households with BPL card
	<sup>1</sup> Percentage of youngest children under age 5 living in household that has electricity; <sup>2</sup> Population living in households
HHs with electricity <sup>0</sup>	with electricity

<sup>^</sup> Indicator not available in NFHS-3. <sup>\$</sup> Indicator not available in NFHS-5 factsheets/state reports <sup>0</sup>Indicator comparable between NFHS-3 and NFHS-4 but differs slightly from NFHS-5. <sup>@</sup> Indicator not available in NFHS-5 factsheets but available in NFHS-5 states reports. <sup>1</sup> Definition per NFHS-3/NFHS-4. <sup>2</sup> Definition as per NFHS-5 factsheet.

## Indicator definition

Interventions	Definition
Demand for FP satisfied <sup>@</sup>	Percentage of currently married women aged 15-49 with demand for family planning satisfied by modern methods
lodized salt <sup>0</sup>	<sup>1</sup> Percentage of women aged 15-49 living in HHs that use iodized salt; <sup>2</sup> Percentage of households using iodized salt
Any ANC visits <sup>\$</sup>	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
Received MCP card	survey Percentage of mothers who registered last pregnancy in the 5 years preceding the survey for which she received a
	Mother and Child Protection (MCP) card
Received IFA tab/syrup@	Percentage of women who received IFA (given or purchased) tablets during the pregnancy for their most recent live
	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
Dirth menoreduces equipaelling\$	ANC for the last birth
Birth preparedness counselling <sup>\$</sup>	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
	preceding the survey
Breastfeeding counselling@	Percentage of women who met with a community health worker in the last three months of pregnancy and received
Breastreeding 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 <sup>@</sup>	advice on keeping the baby warm for their most recent live birth in the five years preceding the survey
Cord care counselling <sup>@</sup>	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 -	<sup>1</sup> Percentage of youngest children under age 5 whose mother received supplementary food from AWC during
pregnancy@	pregnancy; <sup>3</sup> Among children under 6 years, percentage whose mother received specific benefits from AWC during
	pregnancy: supplementary food
Health & nutrition education –	<sup>1</sup> 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; <sup>3</sup> 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 <sup>^\$</sup>	preceding the survey
Institutional birth <sup>0</sup>	<sup>1</sup> 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; <sup>2</sup> 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 <sup>0</sup>	<sup>1</sup> 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; <sup>2</sup> 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
	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@	<sup>1</sup> Percentage of youngest children under age 5 whose mother received supplementary food from AWC while
	breastfeeding; <sup>3</sup> Among children under 6 years, percentage whose mother received specific benefits from AWC while
	breastfeeding: supplementary food
Health & nutrition education –	<sup>1</sup> Percentage of youngest children under age 5 whose mother received health check-ups from AWC while
postnatal@	breastfeeding; <sup>3</sup> Among children under 6 years, percentage whose mother received specific benefits from AWC while
Full immunization <sup>0</sup>	breastfeeding: health and nutrition education <sup>1</sup> Percentage of youngest living children aged 12-23 months fully vaccinated based on information from either
Full immunization <sup>0</sup>	vaccination card or mother's recall; <sup>2</sup> Percentage of children aged 12-23 months fully vaccinated based on information
	from either vaccination card or mother's recall
Vitamin A – early childhood <sup>0</sup>	<sup>1</sup> Percentage of youngest children aged 6-59 months who received Vitamin A supplementation in the last 6 months
	preceding the survey; 2 Percentage of children aged 9-35 months who received a vitamin A dose in the last 6 months
Pediatric IFA <sup>0</sup> @	Percentage of youngest children aged 6-59 months who received iron supplements in the past 7 days preceding the
	survey
Deworming – early childhood <sup>o@</sup>	Percentage of youngest children aged 6-59 months who received deworming tablets in the last 6 months preceding
	the survey
Care seeking for ARI <sup>0</sup>	<sup>1</sup> 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; <sup>2</sup> Percentage of children under age 5 years with fever or symptoms
ORS during diarrhea <sup>0</sup>	of ARI in the 2 weeks preceding the survey taken to a health facility or health provider <sup>1</sup> Percentage of youngest children under age 5 years with diarrhea in the 2 weeks preceding the survey who received
ONS during diarmea	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 <sup>0</sup>	<sup>1</sup> Percentage of youngest children under age 5 years with diarrhea in the 2 weeks preceding the survey who
5	received zinc; <sup>2</sup> 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) <sup>\$</sup>	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

<sup>^</sup> Indicator not available in NFHS-3. <sup>§</sup>Indicator not available in NFHS-5 factsheets/state reports. <sup>®</sup>Indicator not available in NFHS-5 factsheets but available in NFHS-5 states reports. <sup>®</sup>Indicator comparable between NFHS-3 and NFHS-4 but differs slightly from NFHS-5. <sup>1</sup>Definition per NFHS-3/NFHS-4. <sup>2</sup>Definition as per NFHS-5 factsheet. <sup>3</sup>Definition as per NFHS-5 state reports.

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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.

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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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