

Maternal and Newborn Health Disparities

Nepal



© UNICEF/UN1187347/Shrestha

Maternal and Newborn Health Disparities in Nepal

Key Facts

Nepal reference table

Demographic indicators		
Total population (thousands) ¹	2015	28,514
Total live births (thousands) ¹	2015	577
Total Fertility Rate (number of children per woman) ¹	2015	2
Adolescent birth rate (per 1,000 women 15-19) ¹⁰	2008	87
Impact indicators		
Maternal mortality ratio (per 100,000 live births) ⁴	2015	258
Average annual rate of MMR reduction between 1990 and 2015 (%) ⁵	2015	5.0
Lifetime risk of maternal death: 1 in x ⁴	2015	150
Stillbirth rate (per 1,000 total births) ⁶	2015	18
Preterm birth rate (per 100 live births) ⁷	2010	14
Under-five mortality rate (per 1,000 live births) ³	2015	36
Under-five deaths that are newborn (%) ³	2015	62
Neonatal mortality rate (per 1,000 live births) ³	2015	22
Neonatal deaths (thousands) ³	2015	12
Service Delivery		
Availability of EmONC Services (% of minimum acceptable level) ⁸	2007	46
Physician density (per 1,000 population) ⁹	2004	0.2
Nurse and midwife density (per 1,000 population) ⁹	2004	0.5

Maternal and Newborn Health Disparities

Nepal

In 2015, approximately 600,000 babies were born in Nepal, or around 1,600 every day.¹

Among young women (aged 20-24), 16 percent gave birth by age 18.²

Approximately 34 babies will die each day before reaching their first month³; 28 stillbirths occur every day.⁶

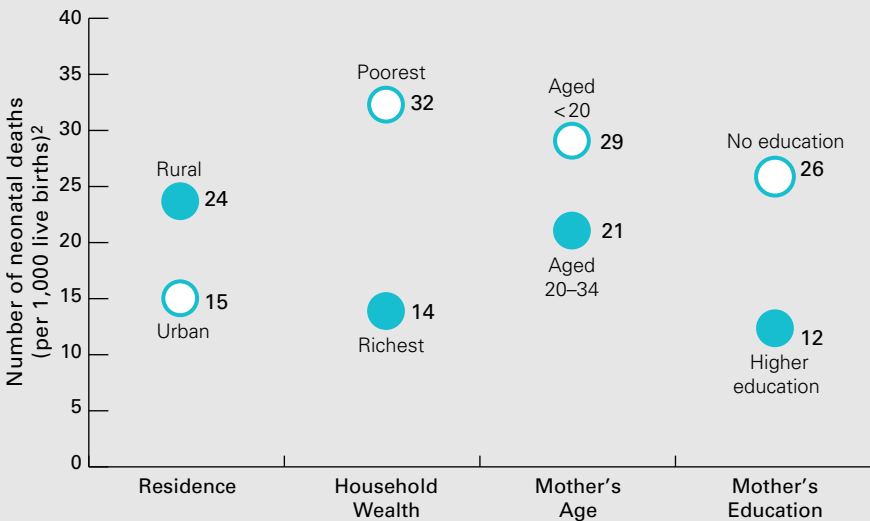
Neonatal mortality rate:

Nepal's neonatal mortality rate (NMR)⁴ is 22 deaths per 1,000 live births.³

NMR in rural areas is 24 deaths per 1,000 live births and 15 deaths per 1,000 live births in urban areas for an urban-to-rural ratio of 1.1.²

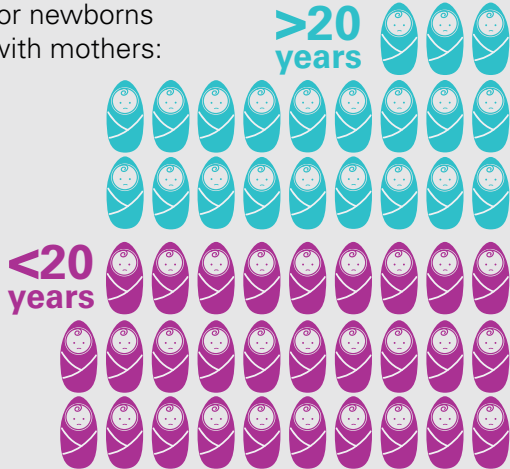
NMR among the poorest households is 32 neonatal deaths per 1,000 live births, compared to 14 deaths per 1,000 live births among the richest households.²

Neonatal mortality rates, by background characteristics, 2014



Neonatal mortality rate

for newborns with mothers:



The NMR for younger mothers (29 per 1,000 live births) is 1.4 times higher than for mothers aged 20-34 (21 per 1,000 live births).²

1 in 6

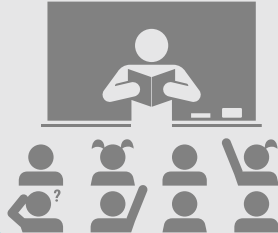
young women (aged 20-24) have given birth by age 18.²



Newborns with less educated mothers are

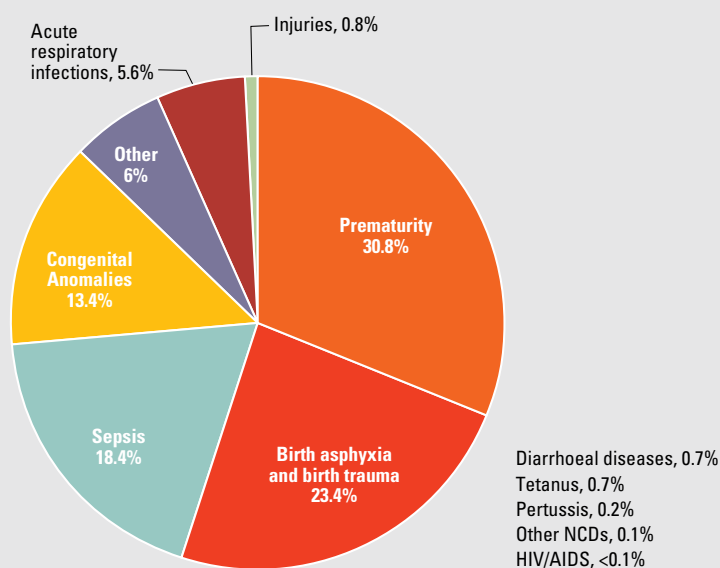
2.2x

more likely to die during the first month compared to those born to mothers with higher education.²



Nepal – Causes of Neonatal Mortality, 2015

In Nepal, the main causes of neonatal deaths in 2015 were prematurity (30.8 percent), birth asphyxia and trauma (23.4 percent) and Sepsis (18.4 percent).¹¹



Disparities in key maternal and newborn health interventions, Nepal, 2014²

		Coverage – care for mothers					
		Demand for contraception satisfied (%)	Antenatal care coverage at least 4 times (%)	Skilled attendant at birth (%)	Institutional delivery (%)	Delivered by caesarean section (%)	Postnatal care of mothers within 2 days (%)
Residence	Urban	69.5	84.0	90.3	88.3	19.0	87.6
	Rural	65.6	55.9	50.5	50.3	7.1	53.5
Residence ratio (urban to rural)		1.1	1.5	1.8	1.8	2.7	1.6
Household Wealth	Richest	67.5	88.4	93.3	90.7	25.3	90.2
	Poorest	62.8	40.6	25.5	27.9	1.0	33.4
Household wealth ratio (richest to poorest)		1.1	2.2	3.7	3.3	25.3	2.7
Mother's age	Less than 20		51.8	56.1	53.9	4.3	58.9
	20-34		62.6	56.8	56.5	9.6	59.0
	35-49		40.7	38.1	40.3	8.6	40.3
Mother's education	No education	74.5	40.8	36.2	36.6	3.5	40.6
	Primary	64.7	62.1	47.3	45.8	6.6	50.5
	Secondary	58.0	64.7	66.6	67.7	7.1	67.6
	Higher	55.8	83.2	82.3	79.6	20.5	82.1
Mother's education ratio (highest to lowest)		0.7	2.0	2.3	2.2	5.9	2.0

Maternal and newborn health coverage indicators

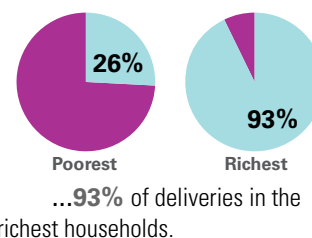
By residence:²

- In rural areas, 56 percent of women made at least 4 antenatal care (ANC) visits compared to 84 percent in urban areas.
- Coverage of skilled attendance at birth is 51 percent in rural areas, compared to 90 percent in urban areas.
- 95 percent of newborns in rural areas received the BCG vaccine, compared to 99 percent in urban areas.

By household wealth:²

- 88 percent of mothers among richest households made at least four ANC visits, compared to 41 percent of mothers from the poorest households.
- Only 26 percent of deliveries in the poorest households had a skilled attendant at birth, compared to 93 percent of deliveries among the richest households.
- 98 percent of newborns in the richest households received the BCG vaccine, compared to 97 percent among the poorest households.

Only **26%** of deliveries in the poorest households have a **skilled attendant at birth** compared to...



Coverage – care for newborns								Other	
Postnatal care of newborns within 2 days (%)	Newborn weighed at birth (%)	Early initiation of breast-feeding (%)	Exclusive breast-feeding (<6 months) (%)	BCG vaccine for newborn (%)	Hepatitis B vaccination at birth (%)	Tetanus protection for newborns (%)	Birth registration (%)	Births by age 18 (%) [#]	
87.1	90.4	44.6	53.9	98.9	49.9	84.1	56.6	8.2	Urban
53.3	55.6	49.3	57.4	95.3	43.1	76.3	58.3	18.2	Rural
1.6	1.6	0.9	0.9	1.0	1.2	1.1	1.0	0.5	Residence ratio (urban to rural)
91.2	94.3	39.7	52.9	98.0	64.0	88.7	57.5	5.5	Richest
32.9	37.7	90.0	43.3	96.9	18.2	58.9	54.6	21.5	Poorest
2.8	2.5	0.4	1.2	1.0	3.5	1.5	1.1	0.3	Household wealth ratio (richest to poorest)
58.2	62.3								Less than 20
58.8	61.0								20-34
36.9	41.2								35-49
40.2	39.6	54.0	61.1	92.0	42.7	67.1	58.4	35.1	No education
49.1	55.9	49.9	52.2	96.6	44.4	76.1	60.1	26.8	Primary
67.4	71.7	48.5	58.8	98.3	41.2	82.5	56.8	20.5	Secondary
82.5	84.8	38.8	50.4	99.1	48.7	89.5	57.3	2.0	Higher
2.1	2.1	0.7	0.8	1.1	1.1	1.3	1.0	0.1	Mother's education ratio (highest to lowest)

Key for tables:

0-24 %

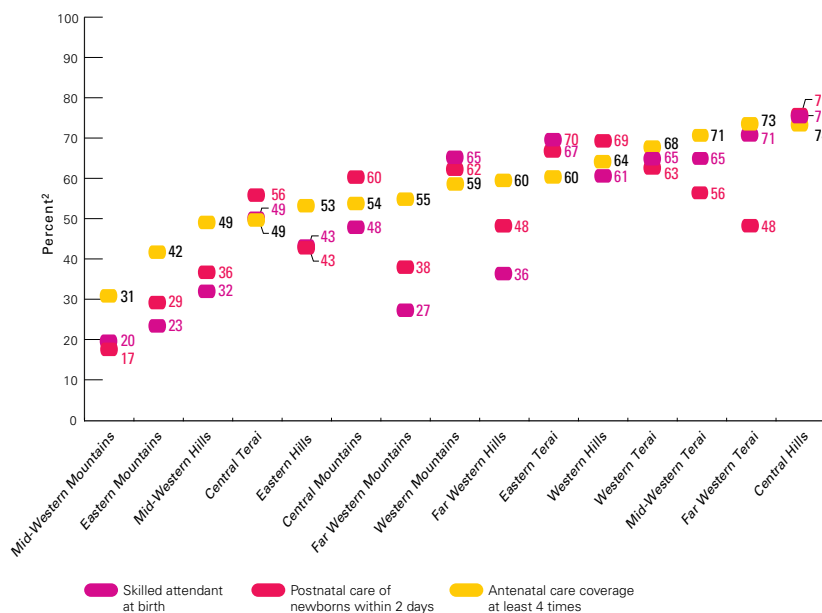
25-49 %

50-74 %

75-100%

Data not available

Selected maternal and newborn health indicators, by region, 2014



By mother's age:²



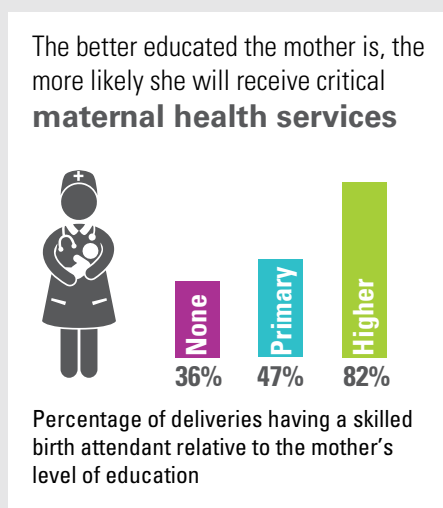
- 63 percent of mothers aged 20-34 made at least four ANC visits, compared to 52 percent among younger mothers (aged less than 20).
- 57 percent of deliveries among mothers aged 20-34 had a skilled attendant at birth, compared to 56 percent of deliveries among younger mothers (aged less than 20).
- Their newborns receive similar levels of postnatal care: 59 percent and 58 percent, respectively.

Disparities in key maternal and newborn health interventions, Nepal, 2014²

Coverage – care for mothers						
	Demand for contraception satisfied (%)	Antenatal care coverage at least 4 times (%)	Skilled attendant at birth (%)	Institutional delivery (%)	Delivered by caesarean section (%)	Postnatal care of mothers within 2 days (%)
National estimate	66.3	59.5	55.6	55.2	8.6	57.9
Region						
Eastern Mountains	72.5	41.7	23.2	23.6	2.7	27.9
Eastern Hills	61.7	53.3	42.9	40.5	6.5	43.4
Eastern Terai	66.9	60.2	66.7	65.1	18.6	70.5
Central Mountains	72.1	53.8	47.7	45.4	7.1	59.0
Central Hills	67.8	73.6	75.4	74.9	17.1	75.9
Central Terai	65.5	49.2	49.3	45.1	5.6	55.2
Western Mountains	77.9	(58.6)	(65.2)	(59.3)	(16.9)	(62.2)
Western Hills	58.9	64.3	60.5	58.0	8.8	70.2
Western Terai	66.8	67.5	65.1	65.4	10.1	62.4
Mid-Western Mountains	71.2	30.5	19.5	25.5	0.9	16.2
Mid-Western Hills	63.9	48.9	31.9	32.4	2.0	33.5
Mid-Western Terai	71.8	70.7	64.8	67.0	3.6	61.0
Far Western Mountains	72.8	54.7	27.0	32.7	0.6	37.9
Far Western Hills	59.3	59.5	35.9	50.0	1.4	48.7
Far Western Terai	77.5	73.4	70.7	74.5	3.1	51.1

By mother's education:²

- 83 percent of mothers with a higher education made at least four ANC visits, compared to only 41 percent of mothers with no education.
- Only 36 percent of deliveries among mothers with no education had a skilled attendant at birth, compared to 47 percent of deliveries among mothers with primary education and 82 percent of deliveries among mothers with a higher education.
- 92 percent of newborns born to mothers with no education received the BCG vaccine, compared to 97 percent of mothers with a primary education and 99 percent of mothers with a higher education.



By geographic regions:²

- Central Hills saw the highest rate of antenatal care coverage (at least four visits) of 74 percent, compared to the lowest coverage of 31 percent in Mid-Western Mountains.
- The region with the highest coverage of skilled birth attendance is Central Hills with 75 percent; the lowest coverage is Mid-Western Mountains with 20 percent – a difference of 3.9 times.

Coverage – care for newborns								Other	
Postnatal care of newborns within 2 days (%)	Newborn weighed at birth (%)	Early initiation of breast-feeding (%)	Exclusive breast-feeding (<6 months) (%)	BCG vaccine for newborn (%)	Hepatitis B vaccination at birth (%)	Tetanus protection for newborns (%)	Children under five who have birth certificates (%)	Births by age 18 (%) [*]	
57.6	60.0	48.7	56.9	95.7	44.0	77.3	58.1	16.0	National estimate
29.2	30.3	42.4	46.4	100.0	1.0	75.4	41.6	16.9	Eastern Mountains
43.2	41.5	43.9	35.5	98.1	15.7	79.5	66.6	8.8	Eastern Hills
69.7	72.4	29.6	56.0	92.0	46.5	85.8	59.9	15.8	Eastern Terai
60.1	52.7	74.6	38.9	(100)	(13.0)	69.8	39.5	15.0	Central Mountains
75.1	76.8	45.6	54.3	92.2	48.6	72.3	45.1	10.2	Central Hills
55.9	47.8	58.2	65.1	96.4	70.3	81.2	60.1	21.5	Central Terai
(62.2)	(56.2)	(41.9)	(78.2)			(69.3)	58.7	(4.8)	Western Mountains
69.3	66.6	45.3	68.9	100.0	21.9	82.5	59.8	18.3	Western Hills
62.6	69.7	49.0	33.5	98.4	51.1	76.8	70.6	12.8	Western Terai
17.3	37.6	67.5	69.6	90.1	7.9	66.3	84.4	29.7	Mid-Western Mountains
36.4	43.7	51.1	53.6	97.0	28.9	67.3	59.8	23.0	Mid-Western Hills
56.2	73.5	41.4	45.5	89.4	65.6	80.2	66.4	18.4	Mid-Western Terai
37.7	36.9	48.4	49.9	100.0	10.5	73.6	41.7	15.3	Far Western Mountains
48.0	49.3	65.2	59.6	97.7	4.1	59.5	40.7	22.1	Far Western Hills
48.0	74.2	59.3	72.2	96.3	60.3	72.6	46.2	11.4	Far Western Terai

Key for tables: 0-24 % 25-49 % 50-74 % 75-100% Data not available

Sources:

- 1 United Nations, Department of Economic and Social Affairs, Population Division (2015). World Population Prospects: The 2015 Revision.
- 2 Central Bureau of Statistics, 2015. Nepal Multiple Indicator Cluster Survey 2014, Final Report. Kathmandu, Nepal: Central Bureau of Statistics and UNICEF Nepal.
- 3 United Nations Inter-agency Group for Child Mortality Estimation (UNICEF, WHO, United Nations Population Division and the World Bank).
- 4 United Nations Maternal Mortality Estimation Inter-agency Group (WHO, UNICEF, UNFPA, United Nations Population Division and the World Bank).
- 5 Trends in maternal mortality: 1990 to 2015: estimates by WHO, UNICEF, UNFPA, World Bank Group and the United Nations Population Division.
- 6 Lawn JE, Blencowe H, Waiswa P, et al, for The Lancet Ending Preventable Stillbirths Series study group with The Lancet Stillbirth Epidemiology investigator group. Stillbirths: rates, risk factors, and acceleration towards 2030. Lancet 2016; published online Jan 18. [http://dx.doi.org/10.1016/S0140-6736\(15\)00837-5](http://dx.doi.org/10.1016/S0140-6736(15)00837-5).
- 7 Blencowe H, Cousens S, Oestergaard M, Chou D, Moller AB, Narwal R, Adler A, Garcia CV, Rohde S, Say L, Lawn JE. National, regional and worldwide estimates of preterm birth rates in the year 2010 with time trends since 1990 for selected countries: a systematic analysis and implications. The Lancet, June 9 2012, 379(9832): 2162-72.
- 8 Averting Maternal Death and Disability, United Nations Children's Fund, and United Nations Population Fund special data compilation, 2015.
- 9 Global Health Workforce Statistics database, World Health Organization, Geneva. (<http://www.who.int/hrh/statistics/hwfstats/>).
- 10 United Nations, Department of Economic and Social Affairs, Population Division (2015). 2015 Update for the MDG Database.
11. WHO-MCEE estimates for child causes of death, 2000-2015. (http://www.who.int/healthinfo/global_burden_disease/estimates_child_cod_2015/)

Notes:

- ^ Reference period: five years preceding the survey.
- # Births by age 18 among 20-24 year olds.
- () Based on small denominators (typically 25-49 unweighted cases). No data based on fewer than 25 unweighted cases are displayed.