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# TODAY'S ANALYSIS

## (09 April 2025)

### TOPICS TO BE COVERED

- MATERNAL MORTALITY IN INDIA: A UN REPORT
- WOMEN AND MEN IN INDIA, 2024. (REPORT)
- MCQs



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# MATERNAL MORTALITY IN INDIA: A UN REPORT

- A report from the **United Nations** titled *Trends in Maternal Mortality 2000-2023* highlighted the current situation of maternal deaths globally.
- **India** was shown prominently as one of the **countries with the highest maternal mortality rates**.
- This report was prepared by the **World Health Organization (WHO), UNICEF, UN Population Fund, World Bank, and UN Department of Economic and Social Affairs**.
- It sheds light on significant trends, causes, and regional disparities that contribute to maternal mortality in India and across the world.

## KEY FACTS & FIGURES FROM THE REPORT

- **India's Global Ranking:**
  - **India** recorded **19,000 maternal deaths** in 2023, ranking second globally, tied with the **Democratic Republic of Congo (DRC)**.

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- **Nigeria** reported the highest number of maternal deaths in 2023, with approximately **75,000 deaths**, which accounted for **28.7%** of all maternal deaths globally.
- **India** and **DRC** each represented **7.2%** of global maternal deaths, while **Pakistan** had about **11,000 deaths**, accounting for **4.1%**.
- These 4 countries—**Nigeria, India, DRC, and Pakistan**—together accounted for **47%** of all maternal deaths worldwide in 2023.
- **Maternal Mortality Ratio (MMR) in India:**
  - India's **Maternal Mortality Ratio (MMR)** (deaths per 100,000 live births) improved from **362 in 2000** to **80 in 2023**, marking a **78% reduction** over the 23-year period.
  - By comparison, **China** reduced its MMR from **56 in 2000** to **16 in 2023**, a **70% reduction** in the same timeframe.
  - Despite these improvements, India's **MMR of 80 in 2023** is still higher than that of China, signaling ongoing challenges in maternal health in India.

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- **Global Trends in Maternal Mortality:**

- Globally, **maternal deaths** decreased by **40%** from 2000 to 2023, with an estimated **260,000 maternal deaths** worldwide in 2023.
- This equates to one maternal death approximately **every 2 minutes** globally.
- The **global decline in maternal deaths** is largely attributed to **improved access to essential health services**, such as antenatal care, skilled birth attendance, and emergency obstetric care.

- **The Impact of COVID-19 on Maternal Mortality:**

- The **COVID-19 pandemic** had a significant impact on maternal mortality. In **2021, 40,000 additional women** died during pregnancy or childbirth due to the pandemic.
- This increase in deaths was caused by **COVID-related complications**, as well as the **disruption of maternal health services**.
- Many healthcare systems were overwhelmed, and women couldn't access the necessary medical care, leading to higher death rates.
- The total number of maternal deaths in 2021 was estimated at **322,000**, compared to **282,000** the previous year.

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## CAUSES OF MATERNAL MORTALITY

Maternal deaths are generally caused by complications during pregnancy, childbirth, or the postpartum period. The report identifies three main categories of causes:

- **Direct Obstetric Causes:**

- **Haemorrhage** (severe bleeding) is the **leading cause of maternal death** globally, particularly during childbirth or the immediate postpartum period.
- Other significant direct causes of maternal death include **hypertensive disorders** (e.g., pre-eclampsia), **infections** (such as sepsis), and complications from **unsafe abortion**.

- **Indirect Causes:**

- **Non-communicable diseases (NCDs)** like **diabetes, hypertension, and heart conditions** are increasing indirect causes of maternal death.
- These conditions may predate pregnancy or develop during pregnancy, increasing the risk for the mother.
- **Mental health issues**, including **depression** and **substance use disorders**, are also factors that complicate maternal health.

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- Other conditions like **gestational diabetes, epilepsy, and asthma** also increase the risk of complications during pregnancy.

## REGIONAL DISPARITIES IN INDIA

- **Southern vs. Northern India:**

- **Southern states** like **Kerala, Tamil Nadu, and Karnataka** have seen substantial improvements in maternal health, mainly due to better access to **private healthcare** and **better public health infrastructure**. These regions have managed to reduce maternal mortality significantly.
- **Northern states**, including **Uttar Pradesh, Bihar, and Madhya Pradesh**, continue to face higher maternal mortality rates.
  - i. This is mainly due to **limited healthcare infrastructure, lack of trained healthcare professionals, and low socio-economic conditions**.
  - ii. In these northern states, **primary health centers (PHCs) and community health centers (CHCs)** often lack the **resources and specialized staff** to handle **complicated pregnancies or emergency situations**, leading to many preventable deaths.

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## SOCIO ECONOMIC DISPARITIES

- Women from **poorer** and **rural** regions often have **limited access** to **quality healthcare**.
- In these regions, **private hospitals** may be inaccessible due to high costs, and many families rely on **under-resourced government healthcare centers**.
- The **economic capacity** to afford private healthcare is higher in southern states, leading to better maternal health outcomes there.
- In contrast, **northern states** with poorer socio-economic conditions see more maternal deaths due to the **lack of emergency obstetric care**.

## PUBLIC HEALTH CENTRES & COMMUNITY HEALTH CENTRES

- PHCs and CHCs in India are generally equipped to handle **normal deliveries**, but they often struggle with **complicated cases**.
- They are often **understaffed, under-equipped**, and unable to provide **advanced obstetric care** (such as **Caesarean sections** or **blood transfusions**) when needed.
- Women with **complicated pregnancies** may be **referred to higher-level facilities**, but many do not have the means to reach them in time, particularly in remote areas.

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## PREVENTABLE CAUSES OF MATERNAL DEATHS

- Many of the causes of maternal deaths, such as **haemorrhage, hypertensive disorders, infections, and unsafe abortions**, are **preventable** with **timely medical intervention**.
- However, despite the availability of **clinical interventions** to treat these conditions, many women still die due to **inaccessible** or **inadequate care**.
- This is especially true in **low-income** or **conflict-affected areas**, where healthcare systems are weak and resources are scarce.

## KEY RECOMMENDATIONS TO ADDRESS MATERNAL MORTALITY

- **Improving Healthcare Access:**
  - There is a need to **strengthen healthcare infrastructure**, particularly in **rural and underserved areas**.
  - **Primary health centers** and **community health centers** need to be equipped with **trained staff, medical resources, and specialized care** to handle **complicated pregnancies**.

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- **Increasing Emergency Obstetric Care:**

- Improving **emergency obstetric care** (e.g., **Caesarean sections, blood transfusions**) in **public healthcare centers** can help reduce maternal mortality, particularly in regions where women have limited access to **private hospitals**.

- **Health Education and Family Planning:**

- **Family planning services** should be expanded, and women should have better access to **birth control, prenatal care, and post-natal care**.
- **Health education** should be focused on encouraging **regular check-ups** and teaching women the importance of seeking care early during pregnancy to prevent complications.

- **Tackling Socio-Economic Barriers:**

- Governments should focus on reducing **socio-economic inequalities** by improving access to healthcare for **low-income families**, and ensuring that all women, especially in remote areas, have access to **skilled medical care**.

- **Addressing the Impact of COVID-19:**

- Ensuring **continuity of maternal health services** during pandemics and other crises is crucial.

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- Pregnant women need reliable access to **routine check-ups** and **emergency care**, even during public health emergencies.

## CONCLUSION

India has made notable progress in reducing maternal mortality, but much work remains. The **high maternal mortality rate** is still a significant challenge, especially in rural areas and poorer states. Improvements in **healthcare infrastructure**, **training of healthcare providers**, and **better access to emergency obstetric care** are necessary to save more lives. Addressing **socio-economic disparities** and ensuring **equal access to healthcare** for all women, regardless of their economic status or location, will be critical in achieving further reductions in maternal mortality in India.

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## **WOMEN & MEN IN INDIA, 2024**

- In **April, 2025**, the **Ministry of Statistics and Programme Implementation (MoSPI)**, Government of India, released the **26th edition** of its annual publication titled “**Women and Men in India 2024: Selected Indicators and Data**”.
- This publication offers a comprehensive overview of the gender landscape in India, presenting **gender-disaggregated data** from official sources across key sectors such as **population, education, health, economic participation, and decision-making**.
- The data is analyzed across both **urban-rural divides** and **geographic regions**.
- It is providing a detailed understanding of the challenges and progress in gender equality in India.
- The publication is an important resource for **policymakers, researchers**, and other stakeholders aiming to develop gender-sensitive policies that foster **sustainable and inclusive development**.

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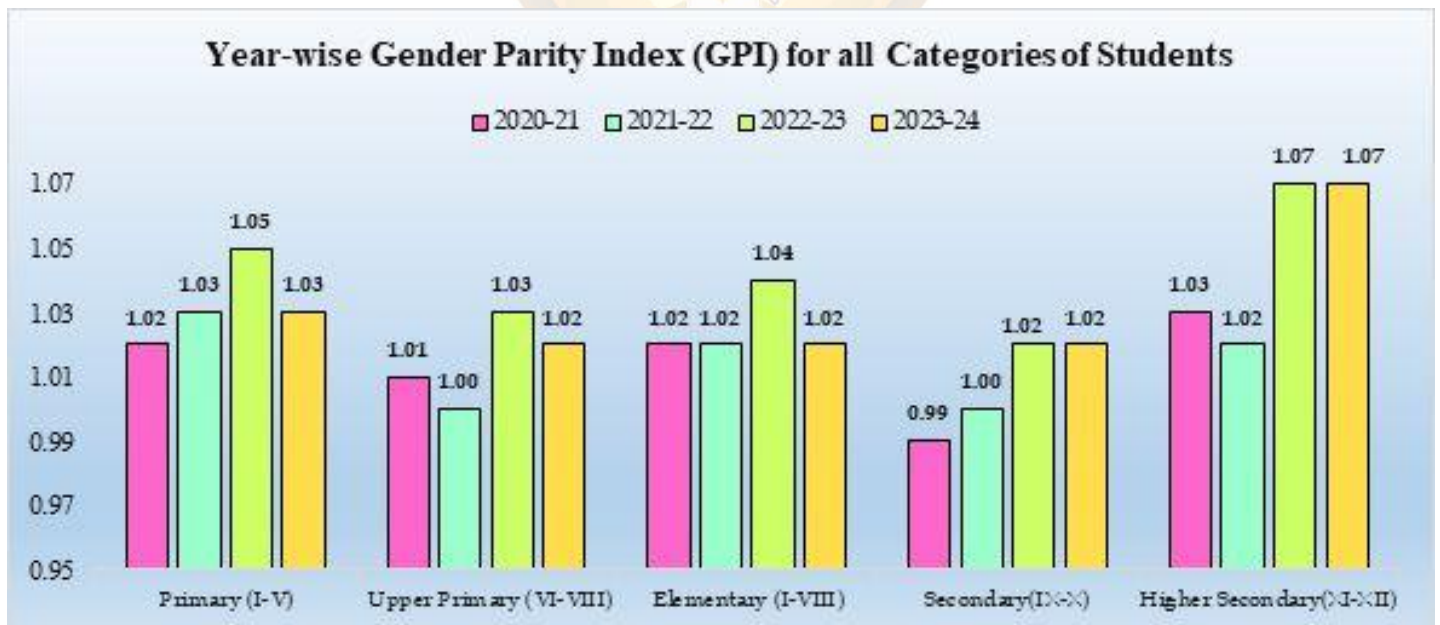


## KEY HIGHLIGHTS

- **Gender Parity in Education**

- **Primary and Higher Secondary Education:**

- **Gender Parity Index (GPI)** is consistently high at the **primary and higher secondary levels**, indicating a **strong female enrolment** in these educational stages.
- However, there have been **fluctuations** in GPI at the **upper primary and elementary levels**, though it generally remains close to **parity**.



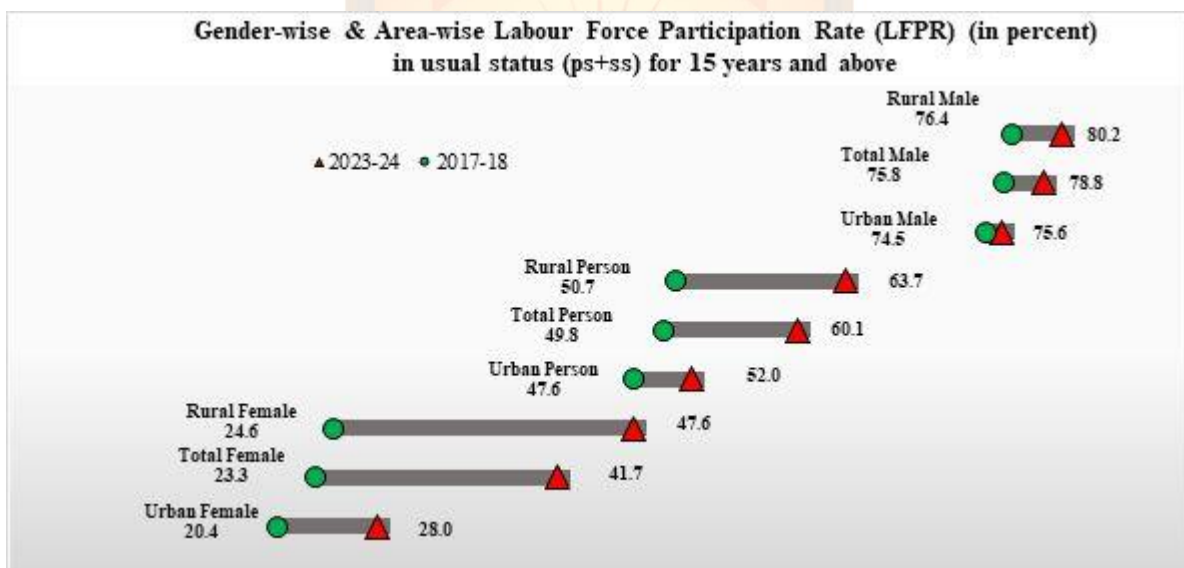
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- **Labour Force Participation Rate (LFPR):**

- **Labour Force Participation Rate (LFPR) for women aged 15 years and above improved from 49.8% in 2017-18 to 60.1% in 2023-24.**
- This represents a significant rise in women's participation in the workforce, reflecting both improved opportunities and efforts towards gender equality in employment.



- **Financial Inclusion**

- **Bank Accounts and Deposits:**

- **Women own 39.2% of all bank accounts in India and contribute 39.7% to total bank deposits.**

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- **Female participation** in banking is highest in **rural areas**, where women make up **42.2%** of bank account holders. This reflects a positive trend towards **financial inclusion**.
- **DEMAT Accounts (Stock Market Participation)**
  - There has been a significant increase in the number of **DEMAT accounts** in India.
  - From **March 31, 2021**, to **November 30, 2024**, the total number of DEMAT accounts grew from **33.26 million** to **143.02 million**, marking a rise of over **4 times**.
  - Although **male account holders** still outnumber **female account holders**, **female participation** in the stock market is growing.
  - The number of **female DEMAT accounts** rose from **6.67 million** in 2021 to **27.71 million** in 2024.
  - Similarly, **male DEMAT accounts** increased from **26.59 million** in 2021 to **115.31 million** in 2024.

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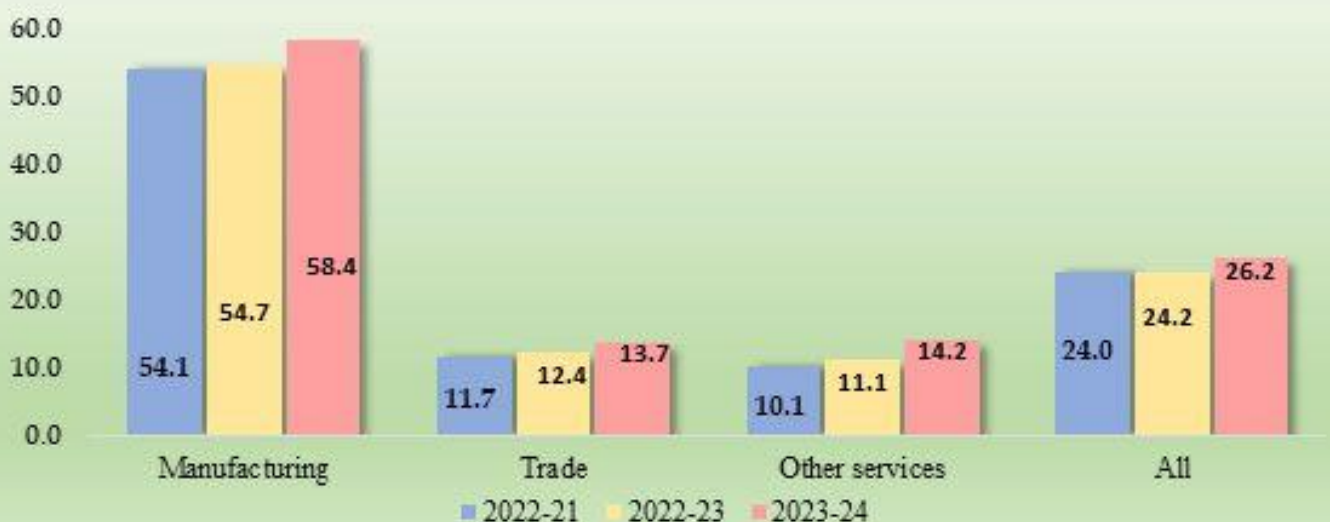




- **Women in Entrepreneurship:**

- The publication highlights the **growing trend of women entrepreneurship**.
- The number of **female-headed proprietary establishments** has risen across sectors such as **manufacturing, trade, and other services** over the years 2021-22, 2022-23, and 2023-24.
- Moreover, there has been a notable increase in the number of **startups with at least one woman director**.
- The number of such startups increased from **1,943 in 2017** to **17,405 in 2024**, reflecting the increasing **entrepreneurial spirit** among women in India.

**Percentage of Female Headed Proprietary Establishments**



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- **Electoral Participation:**

- **Growth in Electors:**

- The total number of **electors** in India increased from **173.2 million** in **1952** to **978 million** in **2024**.
- This shows the expanding electorate over the decades.

- **Female Voter Registration:**

- There has been a **notable rise in female voter registration**, showing increasing participation of women in the democratic process.

- **Female Voter Turnout:**

- Female voter turnout has varied over the years. It reached **67.2%** in the **2019 elections**, but slightly declined to **65.8%** in **2024**.
- Despite this slight decline, **female voter turnout** surpassed **male voter turnout** in **2024**, indicating that women are more engaged in the electoral process than before.

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## GENDER & SOCIO ECONOMIC TRENDS

- **Gender Parity Index (GPI) in Education:**

- The **high GPI** in education at the **primary** and **secondary levels** reflects the increasing importance placed on girls' education.
- However, efforts are needed to maintain and improve gender parity, especially at the **upper primary** and **elementary** levels.

- **Labour Force Participation:**

- The increase in **LFPR** is a positive sign, but it is crucial to ensure that the **quality of employment** for women improves alongside the increase in numbers.
- Gender-specific barriers in the workplace, such as pay disparities and lack of leadership opportunities, still need to be addressed.

- **Financial Inclusion:**

- **Women's involvement in the financial sector**, especially through **bank accounts** and **DEMAT accounts**, is growing.
- This is important for ensuring **economic empowerment** and reducing the gender gap in financial literacy and access to financial services.

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## KEY DATA TRENDS & GENDER GAPS

- **Women in Leadership and Entrepreneurship:**

- The rising number of **female entrepreneurs** and **women directors** in startups suggests a positive shift, but there are still challenges in ensuring equal access to resources, networks, and opportunities for women entrepreneurs across different sectors.

- **Women in Decision-Making Roles:**

- Although there is progress, women remain underrepresented in **senior leadership** and **decision-making positions** across various sectors.
- Targeted efforts to break glass ceilings and foster equal leadership opportunities are necessary to achieve true gender equality.

## CONCLUSION & IMPLICATIONS

The release of “**Women and Men in India 2024: Selected Indicators and Data**” by MoSPI provides a detailed, data-driven snapshot of **gender equality trends** in India. The data shows progress in several areas, including **education**, **financial inclusion**, **entrepreneurship**, and **electoral participation**, but challenges remain, particularly in areas such as **decision-making**, **leadership**, and **economic participation**.

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## MCQs

1. Which of these organisations was part of releasing the report titled Trends in Maternal Mortality 2000-2023?

1. WHO
  2. UNICEF
  3. World Bank
- (A) Only 1  
(B) Only 1 & 2  
(C) Only 1 & 3  
(D) All of the above



**Ans. (D)**

2. Consider the following statements wrt Maternal Mortality from 2000 to 2023 and mark the correct one:

1. Maternal Mortality reduced by more than 70% in India.
  2. The reduction in MMR in India has been more than China in percentage terms.
- (A) Only 1  
(B) Only 2  
(C) Both 1 & 2  
(D) Neither 1 nor 2

**Ans. (C)**

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3. Which of these are considered as factors responsible for high MMR in India?

1. Lack of obstetric care.
2. Diabetes & Hypertension.
3. Mental Health.
4. Lack of availability of adequate nutrition during pregnancy.

- (A) Only 1 & 4  
(B) Only 2 & 3  
(C) Only 1, 2 & 4  
(D) All of the above



**Ans. (D)**

4. Which organisation releases Women and Men in India report?

- (A) Ministry of Social Justice  
(B) NITI Aayog  
(C) Ministry of Statistics and Program Implementation  
(D) None of the above

**Ans. (C)**

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