

RESEARCH BRIEF

Association between modern contraceptive use and child mortality in India: A calendar data analysis of the National Family Health Survey (2015-16)

Previous research showing the inverse association of contraceptive use on child survival often attributes the full effect of contraception to lengthening the intrapregnancy birth interval. However, few studies have explored the possibility of both an indirect and direct link between contraceptive use and child survival. This study examines both the indirect (through birth intervals) and direct contribution of modern contraceptive use on child survival in the Indian context.



Photo Credit: Population Council

HIGHLIGHTS



Contraception is not only centred around avoiding births but spacing them as well. Access to reliable birth control methods will allow women to time the birth of the next child, and improve women's own health as well as their children's.



Usage of contraceptives among women can be considered as a proxy for their contact with health workers or their access to health facilities. This way, they are equipped with more knowledge leading to better access to maternal and child health programs.



Advocacy messaging about the benefits of voluntary modern contraceptive use could lead to decreasing maternal and child mortality—both directly and through increasing birth intervals.



Photo Credit: Population Council

Modern contraceptive use is associated with longer birth intervals and is also associated with lower risk of infant and child mortality. Such information is important for promoting evidence-based advocacy to expand use of family planning services.

FINDINGS

- For women who were not using modern contraception preceding the most recent birth, the infant mortality rate (IMR) is 44/1000 live births compared to 35/1000 live births among women who used modern contraception.
- Similarly, the under-five mortality rate (U5MR) was 61/1000 live births for women who were not using modern contraception preceding the most recent birth compared to 41/1000 live births for women who used modern contraception.
- Based on the results of logistic regression, women who used modern contraception preceding the birth were less than half as likely (OR=0.46) to have a high-risk birth as women who did not use modern contraception.
- Women who used modern contraceptives in the preceding period to their most recent birth were at significantly lower risk of having a child die. The influence of modern contraceptive use was direct and indirect, through increasing the birth interval by 4 months.

METHOD

This secondary analysis used the reproductive history calendar of the National Family Health Survey of India (2015–16). Bivariate analyses and multivariable Cox proportional hazard model were applied.

RASTA

RASTA (Research and Analyses for Scientific Transformation and Advancement) is a multi-institutional research utilization initiative led by Population Council. For more information please contact raستا@popcouncil.org,

EVIDENCE

The Evidence Project uses implementation science—the strategic generation, translation, and use of evidence—to strengthen and scale up family planning and reproductive health programs to reduce unintended pregnancies worldwide. The Evidence Project is led by the Population Council.

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