

## **Socio-economic Inequalities in Early Neonatal Mortality in India**

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*About three-fourths of neonatal deaths take place within the first week of life. Mortality reduction should be focused on early neonatal period but progress varies across different groups of population. This paper examines this inequality and its determinants. It is based on the latest round of National Family Health Survey data (NFHS-3; 2005-2006). The sample size is 56,438 live births during five years preceding the survey. The concentration index is used to measure inequality in early neonatal mortality and the decomposition analysis has been carried out to know its determinants. There is inequality and deaths are concentrated among the poor. EAG region shows lower inequality with higher mortality and in other region higher inequality with lower mortality. The major contributors of inequality are mother's education, antenatal care utilization, household's economic status, place of residence and exposure to mass media. There is a need for reduction of inequalities in education, wealth and ante natal care utilization to achieve equity.*

### **I Introduction**

Newborn survival is a major concern in developing countries as about 99 per cent of neonatal deaths (deaths under four weeks of age) occur in them. They accounted for 41 per cent of under-five deaths in 2009. Three-fourths of neonatal deaths occur during the first week of life (Lawn, *et. al.* 2005). Of the total global neonatal deaths, India's share is nearly 28 per cent (Oestergaard, *et. al.* 2011). As per RGI's estimate for India, in 2009 neonatal mortality shared two-thirds of infant mortality and half of the under-five mortality. But early neonatal mortality (deaths during the first week of life) shared 79 per cent of neonatal mortality and 42 per cent of under-five mortality and its rate was 27 per thousand of live births (RGI 2009).

Major direct causes of death during the first week of life are pre-term birth, birth asphyxia and severe infection. Most of them are preventable by simple and low cost interventions (Lawn, *et. al.* 2005 and Ngoc, *et. al.* 2006). The risk factors of death are absence or inadequate antenatal care, poor socio-economic status, demographic characteristics of mother and child and lack of essential

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