

**ICPD+30: India's Country Monitoring Report**

**Are the Sustainable  
Development Goals  
furthering the agenda of  
gender equality?  
Review of progress  
in India**

**SUMMARY**

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## ICPD and SDGs

The ICPD (International Conference on Population and Development) and the SDG (Sustainable Development Goals) agendas share common principles of universality, non-discrimination, and a rights-based approach. Gender equality and women's empowerment are crucial aspects of the SDGs and the ICPD Program of Action (POA). ICPD+30, celebrating "human-centered sustainable development," highlights these shared goals. As part of the ICPD+30 India monitoring report, SAHAJ, one of CommonHealth's partners, undertook an overview of India's progress on the SDGs, focusing on SDG 3 (Good Health and Well-being) and SDG 5 (Gender Equality).

## About SAHAJ's work on SDGs

Since 2017, SAHAJ has been working at the community level with partners on selected targets from SDG 3 and SDG 5 both at the national level and in specific states, such as Assam and Gujarat. Their efforts aim to localise the SDGs with a gender perspective, demonstrating the connection between local actions and global goals. One point of focus is maternal health in Assam, a state with a high maternal mortality ratio (MMR).

## Progress of India and its states on SDGs

India measures its progress towards achieving the SDGs using the SDG India Index developed by the NITI Aayog.<sup>1</sup> The SDG India Index 3.0 (2020-21) takes into account the COVID-19 pandemic and aims to 'build back together.' This report delineates multi-stakeholder partnership models and the advantages of collaborative frameworks. The global SDG agenda of 'Leave No One Behind' is incorporated through partnerships. The report delves into the progress of India and its states on select SDG indicators. The Index score ranges from 0 to 100.

### ***SDG 3: Good Health and Well-being***

The SDG India Index categorizes scores into four groups: Aspirants (0-49), Performers (50-64), Front Runners (65-99), and Achievers (100). The 2020-21 report shows that at the national level, the score improved by 13 points for SDG 3, despite the COVID-19 pandemic. State-wise performance varies, with Gujarat rising to the top position and Kerala dropping to the 14<sup>th</sup> position due

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<sup>1</sup> The NITI Aayog, a public policy thinktank of the Government of India established to achieve the Sustainable Development Goals (SDGs), has developed the SDG India Index to 'provide a holistic view on the social, economic and environmental status of the country and its States' within the SDG framework.

to the introduction of new indicators. Key indicators used for SDG 3 include maternal mortality, institutional deliveries, health-related workforce, and road traffic deaths.

**Table 1: India's overall performance and the top-performing and lowest-performing states on selected SDG 3 indicators as per the SDG India Index 3.0 (2020-21)**

Indicator	India score	Top-performing state	Lowest-performing state
Maternal mortality ratio	113*	Kerala (43)	Assam (215)
Under-5 mortality rate	36	Kerala (10)	Madhya Pradesh (56)
Full immunisation rate for children (9-11 months)	91	Maharashtra (100)	Nagaland (54)
Total case notification rate for tuberculosis	177	Haryana (255)	Tripura (70)
HIV incidence	0.05	Kerala, Karnataka and Himachal Pradesh (0.02)	Mizoram (1.18)
Suicide rate	10.4	Bihar (0.5)	Sikkim (33.1)
Death rate from road traffic accidents	11.56	Nagaland (1.02)	Goa (19.38)
Proportion of institutional deliveries	94.4	Goa, Karnataka, Kerala, Tamil Nadu and Telangana (99.9)	Meghalaya (60.4)
Proportion of out-of-pocket expenditure on health	13	Chhattisgarh (6.6)	Arunachal Pradesh and Kerala (17)
Total number of physicians, nurses, and midwives per 10,000 population	37	Kerala (115)	Nagaland (1)

\* The recent value for the MMR from the SRS (2018-20) is 97, but we have considered the SRS 2016-18 value for this table, as the SDG India Index 3.0 (2020-21) has done the same.

Despite improvements, significant challenges remain. For example, Assam has the highest MMR among the states. The national average for institutional deliveries has increased, but the health workforce has slightly decreased.

Newly included indicators, like road traffic deaths, highlight ongoing issues needing attention.

### ***SDG 5: Gender Equality***

Discrimination against women and girls is deeply rooted globally, manifesting in practices like child marriages and violence. India has made progress towards gender equality in recent years with legal advances, such as the Transgender Persons (Protection and Rights) Act of 2019, highlighting progress towards non-discrimination and recognition of gender diversity. The Gender Inequality Index (GII)<sup>2</sup> ranks India 122 out of 170 countries, with a value of 0.490, which is better than the South Asia regional average but worse than the global average. According to the EM2030 SDG Gender Index, India is among the fastest-progressing countries on gender equality but still scores poorly overall, indicating the need for intensified efforts.

Gender equality is a cross-cutting issue across the 17 SDGs. Gender-sensitive development strategies, equal rights, access to economic resources, and ownership and control over land and other forms of property, inheritance, natural resources, and financial resources are integral to the SDG 1 targets. Access to SRHR for all women and girls is part of SDG 3. In addition, SDG 5 targets dealing with gender-related issues of violence, trafficking, sexual exploitation, and under-representation in leadership and decision-making positions.

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<sup>2</sup> The Gender Inequality Index (GII) was developed by the United Nations Development Programme (UNDP). It provides insights into gender disparities in health, empowerment, and the labor market. Unlike the human development index (HDI), however, higher values in the GII indicate lower levels of achievement. The GII uses five gender indicators: the Maternal Mortality Ratio (MMR) - SDG 3.1; Adolescent birth rate - SDG 3.7; Percentage share of women in seats in the parliament - SDG 5.5; Population with at least some secondary education - SDG 4.4; and the Labour force participation rate - SDG 8.5.

**Table 2: India's overall performance and the top-performing and lowest-performing states on selected SDG 5 indicators as per the SDG India Index 3.0 (2020-21)**

Indicator	India score	Top-performing state	Lowest-performing state
Sex ratio at birth	899*	Kerala (957)	Uttarakhand (840)
Ratio of female to male average wage/ salary earnings	0.74	Uttar Pradesh (0.94)	West Bengal and Assam (0.53)
Rate of crimes against women	62.4	Nagaland (4.1)	Assam (177.8)
Proportion of women who have experienced physical violence by husbands or his relatives	19.54	Nagaland (0)	Assam (70.73)
Percentage of women elected to the state legislative assembly	8.46	Chhattisgarh (14.44)	Mizoram and Nagaland (0)
Percentage of female to male labor force participation rate (LFPR)	0.33	Himachal Pradesh (0.8)	Bihar (0.06)
Proportion of women in managerial positions including women in board of directors, in listed companies (per 1,000 persons)	190	Chhattisgarh (250)	Meghalaya (111)
Percentage of demand for family planning satisfied by modern methods among currently married women	72	Andhra Pradesh (93.6)	Manipur (23.6)
Proportion of female-operated operational land holdings	13.96	Meghalaya (34.32)	Punjab (1.55)

\*The most recent value for sex ratio at birth from SRS 2017-19 is 904, but we have considered the SRS 2016-18 value in this table as the SDG India Index 3.0 (2020-21) has considered the same value.

## Localizing SDGs

Localization of SDGs involves defining, implementing, and monitoring strategies at the local level to achieve global, national, and subnational sustainable development targets. The NITI Aayog recognized the need for localization early and integrated it within official structures. Different states have developed various models for localization. For instance, Maharashtra integrated SDG planning with local self-governance, Assam aligned its budgets with the SDGs, and Gujarat prepared a state-level roadmap and role matrix.

SAHAJ's approach to localizing SDGs extends beyond official definitions and emphasizes training, awareness, and community involvement in SDG processes. For SAHAJ, localizing the SDGs with a focus on SDGs 3 and 5 in two states (Gujarat and Assam) in the present context meant:

- Enabling local communities to monitor the implementation of schemes and programs proposed for achieving the SDGs;
- Helping CSOs document their work with local and marginalized groups in ways that can generate evidence for the SDGs' commitment to 'Leave No One Behind'; and
- Facilitating/enabling/strengthening local organizations to become part of district-level and state-level fora and ensuring that the voices of marginalized groups are heard and their issues are included in planning at all levels.

## Case Study: Assam

Assam is characterized by a multi-ethnic, multilingual population in a diverse landscape, facing challenges like flooding and political conflict. Despite adopting the SDG framework early and integrating it into state-level planning, Assam still struggles with achieving many SDG targets. The state established an SDG Cell, created a vision document, and prepared action plans for implementing programs toward achieving the SDGs. However, the state's performance remains low on many SDG indicators.

### *Maternal Mortality Ratio (MMR) in Assam*

Assam has the highest MMR in India at 195 per 100,000 live births. Early identification of high-risk pregnancies is crucial to reducing the MMR, but only 64 per cent of women report antenatal care (ANC) registration in their first trimester. The state faces challenges in the timely identification and treatment of high-risk pregnancies, contributing to high maternal deaths. Efforts to reduce the MMR include improving ANC access, skilled delivery care, and postnatal support.

### *Gender Equality in Assam*

Assam's performance on SDG 5 is notably poor, with the state ranking lowest on all nine gender equality indicators. These include the ratio of female to male average wages, the rate of crimes against women, and women's representation in leadership roles. The worsening gender wage gap and increasing rates of crimes against women highlight significant areas that need improvement.

## Overall recommendations for the country

Despite significant efforts and progress, India and its states face ongoing challenges in achieving SDG targets, particularly in health and gender equality. Recommendations for further progress include:

1. **Strengthening Health Systems:** For this, improving access to antenatal care, skilled delivery, and postnatal support are crucial. States with high MMRs should focus on early identification and treatment of high-risk pregnancies.
2. **Enhancing Gender Equality:** Legal and policy frameworks must be strengthened to protect women's rights and promote gender equality. Efforts should include addressing wage gaps, reducing violence against women, and increasing women's representation in leadership roles.



3. **Improving Data Collection:** Accurate and comprehensive data collection on gender and health indicators is essential for tracking progress and identifying gaps. It is vital that official data covers information on marginalized groups.
4. **Promoting Localized Action:** Action towards SDGs should involve community engagement, capacity building, and strategies tailored to local contexts and needs. Collaborative frameworks with civil society organizations can enhance implementation and monitoring.
5. **Addressing Socioeconomic Inequalities:** Efforts to reduce poverty and improve access to education, healthcare, and economic resources are crucial for achieving the SDG targets. Inclusive policies should focus on marginalized and vulnerable populations.

**A detailed report of the study is available at <https://commonhealth.in/ch-publications/>**





### **About ARROW**

Asian-Pacific Resource and Research Centre for Women -ARROW is a regional and non-profit women's NGO based in Kuala Lumpur, Malaysia, and has consultative status with the Economic and Social Council of the United Nations. Since it was established in 1993, it has been working to advance women's health, affirmative sexuality and rights, and to empower women through information and knowledge, evidence generation, advocacy, capacity building, partnership building and organisational development.

### **About CommonHealth**

CommonHealth - Coalition for Reproductive Health and Safe Abortion, constituted in 2006, is a rights-based, multi-state coalition of organisations and individuals that advocates for increased access to sexual and reproductive health care and services to improve health conditions of women and marginalized communities in India. Within sexual and reproductive health and rights, CommonHealth concentrates its efforts largely on maternal health and safe abortion. The coalition draws its membership from diverse disciplines, thematic areas and geographies within the country.

