Child survival is one thing, the other side of the coin is quality of life for those children who have survived the odds and growing to be adults, citizens of the state in near future.

With more and more advanced medical care (mostly borrowed from R&D in developed nations). number of babies born with critical health conditions as well as premature and low birth weight etc, issues are surviving now.

Not all of those babies grow without physical and mental disability. These differently able children later become the major responsibility of the family (only).

Is the state equipped to share physical, mental, financial responsibility (burden?) for these differently able children? Good nutrition and education are basic needs for them (likes all other children): immunization, physiotherapy, speech therapy, vocation guidance and employability are other special areas.

Does our development programs ensure good infrastructure to make those children's movement easier? to make their life easyy and dignified. Every child is wanted and special to every parent, cannot deny right to life to any child but now the statistics! Can we device some criteria/policies for share of the health expenditure to be shifted from increasing survival numbers to increasing quality of those survived numbers? Just improving the survival number will not help, rather aggravate the already existing issue of child nutrition, health, growth and development etc, self sufficiency, employability and contribution to family, society and to the state/nation as a good powerful citizen are different issues altogether.

Medical advances are to be seen (and used) for betterment of physical and mental (& ultimately social) health of children (and people of all ages for that matter) if we wish really to take advantage of our demagraphic dividend!

Instead of getting (rather false) satisfaction of trying to match the international statistics of child survival (especially comparing with those of developed nations), we need to device (and implement) strong and robust policies for our own children's sake! Of course, no denying that that the government is proactive in this area related to health and nutrition especially.

It may sound rude to say (but to be frank and honest as a doctor myself!) that time and money spent for growth and development of healthy full term new born should be seen as an investment over and above showing increased (statistically) survival of 400gm (for example) prematurely born babies without depicting their future.

Instead, why not try to reduce number of births of premature, low birth weight and babies with life threatening issues? That would require good care of our mothers that again is a long term goal, how? A girl child to survive, to be well nourished, educated to get social security to grow as a healthy offspring involves multiple steps at every stage of life! Lifestyle change, stress reduction, family support, parental counseling (premarital pre and post conception) requires the proactive social structure. We make the state, so we are responsible; for our actions and actions taken by the state!

Long way to go! But can make it short especially if every adult female person decides and acts on it.

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