

**GOVERNMENT OF NATIONAL CAPITAL TERRITORY OF DELHI** 

# HOUSEHOLD SOCIAL CONSUMPTION ON HEALTH

# **IN DELHI**

Based On NSS 75<sup>th</sup> ROUND SURVEY (July 2017-June 2018) STATE SAMPLE

DIRECTORATE OF ECONOMICS & STATISTICS 3<sup>rd</sup> FLOOR, B-WING, VIKAS BHAWAN-2 CIVIL LINES, DELHI – 110054 Website: http://des.delhigovt.nic.in



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#### PREFACE

The present report is based on the results of the State Sample of 75<sup>th</sup> National Sample Survey on 'Household Social Consumption: Health'. This survey was carried out by this Directorate during July 2017 - June 2018. The survey was aimed at procuring basic quantitative information on health sector.

The report covers information on rate of Morbidity among various age-sex group, Hospitalization or medical care received as in-patient of medical institution, extent of receipt of Pre-natal & Post-natal care by women, Immunization of children age 0-5 years expenditure incurred on treatment received from Public and Private sectors, use of AYUSH, information on condition of aged persons (60+) *viz.* state of health, economic dependencies, degree of isolation, living arrangement and perception of aged persons about their well-being.

The report has been prepared by DPA unit under the valuable guidance of Shri C. K. Dutta, Joint Director, Shri K. R. Chhibber, Assistant Director assisted by Shri Ajai Kumar Mathur, Statistical Officer, Shri Nitin Pal, Shri Rajeev Kumar, Ms. Shailja Sharma, Shri Gajab Singh, and Ms. Seema, Statistical Assistants who made untiring efforts for completion of this report. The field work of the survey was supervised by Shri Mukesh Sharma, Statistical Officer and Shri Peeru Lal, Statistical Officer. Data processing was done by Team of EDP Cell under the supervision of Shri Praveen Kumar Srivastava, System Analyst.

The field work was completed by the staff of Socio Economic Unit whereas scrutiny and tabulation work was completed by Data Processing & Analysis unit (DPA). Data Processing work has been done by EDP unit.

Technical Support including designing of survey schedule, methodology, sampling etc. provided by National Statistics Office (NSO), Government of India is highly acknowledged.

The Directorate is gratified to the households for extending active co-operation to the field Staff. It is expected that this document will be found useful by planners, policy makers and researchers. Suggestions for improvement of future version of the report are welcome.

Place: Delhi

Date: October, 2020

ASHOK KUMAR Director

# TEAM

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# **Executive Summary**

- 1. The report has been prepared on the basis of estimated population of 130.19 lakh from 32.82 lakh households.
- 2. Out of total households, 97.08% households are living in Urban.
- 3. Sex ratio has been reported as 868 while the average household size has been reported as 4.0.
- 4. The highest percentage of persons i.e. 29.4% out of total population are in the age group of 15-29 years.
- 5. The morbidity rate has been reported as 12431 persons per lakh population and the highest percentage of ailing persons i.e. 64.85% are reported in the age group of 60 years and above.
- 6. The highest percentage of ailing persons i.e. 27.90% are reported to be suffering from Infections (including fevers, jaundice, HIV/AIDS, diarrhea etc.).
- 7. 94.6% of ailing persons in Delhi are being treated by Allopathy system of medicine.
- 8. The average amount of expenditure incurred per spell of ailment is Rs. 827/-.
- 9. Medicines constituted the major component i.e. 61.15% of medical expenditure incurred per spell of ailment.
- 10. The rate of hospitalization cases (excluding childbirth) per lakh population is reported as 2833.
- 11. The highest percentage of hospitalization cases (excluding childbirth) per thousand persons is reported as 120 for the persons in the age group of 60 years and above.
- The highest proportion of hospitalization (excluding childbirth) cases has been reported as 29.8% in the category of Infections (including fevers, jaundice, HIV/AIDS, diarrhea etc.).

- 13. The highest percentage of expenses i.e. 90.5% incurred on treatment of hospitalisation cases are financed by the households from their own income/savings.
- 14. The average medical expenditure incurred per hospitalization case (excluding child birth) is Rs. 27553/-.
- 15. The average total expenditure per hospitalization case (excluding childbirth) is Rs. 30577.
- 16. The highest percentage of institutional births in Delhi i.e 57.46% is reported in Public/Government hospitals.
- 17. The average total expenditure on child birth is Rs.14,916/-, whereas the average total expenditure on Institutional child birth is Rs.16,017/-.
- 18. Overall 90% children in the age group of 0-5 years are reported to be receiving immunization/are fully immunized.
- 19. The average expenditure on immunization per child is Rs. 396/-.
- 20. 82.7% children in the age group of 0-5 years have received/are receiving immunization from government health setups.
- 21. Out of total population, the percentage of aged persons is 4.85% and on an average there are 2 aged persons per ten households.
- 22. 88.3% of the aged persons in Delhi are physically mobile.
- 23. 39% of the aged persons are economically self-dependent and out of the dependent aged persons, 76% are economically dependent on their own children.

# **SECTION ONE**

# **INTRODUCTION**

#### 1.1. Background

The first survey on morbidity under NSS rounds was undertaken during the 7<sup>th</sup> round conducted between October 1953 - March, 1954 and subsequently under 11<sup>th</sup> to the 13<sup>th</sup> rounds (1956 - 58) virtually on exploratory basis. The aim of these surveys was to evolve an appropriate data collection method for studying morbidity profile. These surveys were followed up by a pilot survey in the 17<sup>th</sup> round (September 1961 - July 1962) to examine alternative approaches of morbidity reporting. With the aid of the findings of these exploratory surveys, a full-scale survey on morbidity was conducted in the 28<sup>th</sup> round (October 1973 - June 1974). Since then no separate morbidity survey was undertaken. However, collection of data on morbidity became a part of the decennial surveys on social consumption. The first Survey on Social Consumption was conducted in NSS 35<sup>th</sup> round (July 1980 - June 1981) and the topics covered included health services like mass immunisation and family welfare programmes. The second survey on Social Consumption was carried out in the 42<sup>nd</sup> round (July 1986 - June 1987) with some modifications in the coverage of subjects. Topics like problems of aged persons were included in this round. The third survey on Social Consumption was carried out in the 52<sup>nd</sup> round (July 1995 - June 1996). The fourth survey on 'Morbidity and Healthcare' was undertaken during NSS 60<sup>th</sup> round (January - June, 2004). After a gap of about ten years, for the fifth time, survey on Social Consumption on Health was conducted as a part of 71<sup>st</sup> NSS round (January 2014-June 2014). The sixth time survey on Social Consumption on Health was undertaken as a part of 75<sup>th</sup> NSS Round (July 2017 to June 2018).

#### **1.2.** Scope coverage and objective

The survey on Social Consumption on Health in 75<sup>th</sup> NSS Round was aimed to generate basic quantitative information on the health sector. One of the vital components of the schedule was dedicated to collect information which was relevant for determination of the prevalence rate of morbidity among various age-sex groups. Further, measurement of the extent of use of health services provided by the Government was an indispensable part of this exercise.

Special attention was given to hospitalization, or medical care received as in-patient of medical institutions. The ailments for which such medical care was sought, the extent of use of Government hospitals and the expenditure incurred on treatment received from public and private sectors, were investigated by the survey. Break-up of expenditure by various heads was estimated for expenses on medical care received both as in-patient and otherwise. Emphasis was laid on collecting information on 'out of pocket' expenditure for various episodes of illness.

For the first time in NSS health survey, the data collected had enabled assessment of population who are affected by some widespread communicable diseases. The role of alternative systems of medicine in respect of prevalence of use, cost of treatment and type of ailments were covered. Besides, the survey was meant to ascertain the extent of use of private and public hospitals for childbirth, the cost incurred and the extent of receipt of prenatal and post-natal care by women who gave childbirth. Moreover, an initiative was made to collect detailed information on status of immunisation of children (age 0-5 years). Finally, information on certain aspects of the condition of the 60 plus persons was also obtained which have a bearing on their state of health, economic independence and degree of isolation. For most important parameters, the survey provided estimates separately for males and females.

#### **1.3. Reference period**

The enquiry on morbidity was conducted with a reference period of 15 days. All spells of ailment suffered by each member, both living as well as the deceased, of the sample household, during the 15 days preceding the date of enquiry, whether or not the patient was hospitalized for treatment, were covered in the survey. For hospitalised treatment, information was collected for every event of hospitalisation of a member, whether living or deceased at the time of survey, during the 365 days preceding the date of enquiry. Similarly, for availability of pre-natal and post-natal care, incidence of childbirth cases and expenditure incurred per childbirth, reference period was 365 days preceding the date of survey.

# **SECTION TWO**

#### **CONCEPTS AND DEFINITIONS**

#### 2.1. Illness and Hospitalisation

Ailment: Ailment (illness or injury) means any deviation from a person's state of physical and mental well-being. For the purpose of this survey, "ailment" included (a) All types of injuries, such as cuts, wounds, hemorrhage, fractures and burns caused by an accident, including bites to any part of the body (b) Cases of abortion–natural or accidental. Ailments excluded (i) Cases of sterilization, insertion of IUD, medical termination of pregnancy, etc. (ii) A state of normal pregnancy without complications (iii) Cases of pre-existing visual, hearing, speech and locomotor disabilities (iv) Minor skin ailments, minor headaches and body aches, and minor gastric discomfort after meals even if of long-standing nature, unless the patient insists that they cause restriction of his/her activities, and (v) Cases of pre-existing disabilities, unless a course of treatment of the disability on medical advice for a period of one month or more was continuing as on the date of survey.

**Chronic ailment:** A chronic ailment existing on the date of survey was identified as an ailment satisfying one of the following criteria I and II. (I) Symptoms of the ailment (subject to the exclusions (i)- (iv) mentioned in the definition of ailment) persisting for more than one month on the date of survey. (II) A course of treatment of the ailment (no exclusions), on medical advice, continuing for a month or more on the date of survey.

Spell of ailment: A spell is a continuous period of sickness due to a specific ailment.

**Hospitalisation:** To be hospitalised means to be *admitted as an in-patient* in a medical institution. A person who underwent surgery in a temporary camp or day care centre was also considered to have been hospitalised for the purposes of this survey.

**Case of hospitalisation:** Each admission to hospital was counted as a separate hospitalisation case for the purpose of this survey.

#### 2.2. Healthcare facilities used

**Level of care**: This term is used for the classification of treated ailments by healthcare facility used. The complete level-of-care classification used in the schedule of enquiry was

as follows: Government/Public hospital (incl. HSC/PHC/CHC etc.) Charitable/trust/NGOrun hospital, Private hospital, Private doctor/clinic and Informal healthcare provider.

**ASHA** (Accredited Social Health Activist): ASHAs are local women trained to act as health educators and promoters in their communities. There is one ASHA for every 1000 population. Their tasks include motivating women to give birth in hospitals, bringing children to immunisation clinics, encouraging family planning (e.g. usage of condoms, IUDs, surgical sterilization), treating basic illness and injury with first aid, keeping demographic records and improving village sanitation. They have a drug kit-which has tablets like paracetamol, anti-malarials, oral contraceptives, co-trimoxazole (an antibiotic), etc.

**AWW** (**Anganwadi Worker**): These are the staff of the Anganwadi centre in the village. There is one Anganwadi centre for every 1000 population. These centres provide supplementary nutrition, non-formal pre-school education, nutrition and health education, immunisation, health check-up and referral services. They are provided with a drug kit and may give tablets for about 1 to 3 children in a day.

#### ANM (Auxiliary Nurse/ Midwives): See HSC

**HSC (Health Sub-Centre):** This is the most peripheral facility in the primary health care system. There is one sub-centre for every 3000 population in hilly/tribal/difficult areas and 5000 population in plains. Each sub-centre is staffed by one or two Auxiliary Nurse/ Midwives (ANM) (female health worker) and may have a male health worker. Their main task (as perceived) is to provide immunisation to children and antenatal care. Some sub-centres also conduct normal delivery but they have no beds and the sub-centre is not considered as an institution with in-patients. They perform some outpatient care largely in the form of treatment for basic illnesses. Any treatment taken from ANM during her visit to the village can be considered as treatment taken at sub-centre.

**Dispensary:** This is a public institution from which medical supplies, preparations, and treatments are dispensed, but which does not have facilities for treatment of in-patients. Dispensaries are staffed by one or more doctors.

**PHC (Primary Health Centre):** PHC is staffed by a Medical Officer (MBBS or AYUSH) and Paramedical staff. They provide curative OPD services and ante natal checkups and deliveries. They usually have 4-6 beds to conduct delivery. They may or may not have

facilities for in-patient treatment. There is one PHC for every 30000 population in the plains and for every 20000 populations in hilly/tribal/difficult areas. The terms "additional PHC", "mini-PHC" and "new PHC" are considered synonymous with PHC. PHCs in Bihar and Uttar Pradesh are the equivalent of CHCs in other States that their area of coverage is a block and may even have 30 beds. Admissions/in-patients are always there in this facility type. The equivalent of a PHC in these States is called an additional PHC.

**CHC** (**Community Health Centre**): CHC is usually located at block/division or *taluk* level and serves as a referral centre for PHCs. It is to be staffed by medical specialists and medical officers and AYUSH doctors - but in practice there are usually only medical officers. It always has provision for in-patients and 10 to 30 beds. It usually has an OT, X-Ray, Labour Room and laboratory facilities.

**Government/Public Hospital:** All other Government hospitals, including district hospitals in the district headquarters town (which acts as referral site for all the CHCs and PHCs and sub-centres), Government medical college hospitals, ESI hospitals, other Government hospitals like Maternity hospitals, Cancer hospitals, TB or Leprosy hospitals, Railway hospitals, etc. run by the Government covered under the category 'Public hospital' for the purposes of this survey.

**Private Hospital/Private Clinic:** Any other hospital/nursing home/day care centre with facilities for in-patient treatment is called a private hospital. A private clinic is one with facilities for consultation with private doctor(s) but no in-patient facility.

**Medical institution:** This includes all HSC, PHC, CHC, public dispensaries with facilities for in-patient treatment, any public hospital (district hospital/state general hospitals/medical college hospitals etc), and private hospital of any kind (private nursing home, day care centre, private medical college and hospital, super specialty hospitals etc.).

**Informal healthcare provider:** This term covers a variety of health service providers who are untrained and work outside regulatory frameworks.

#### 2.3. Nature of treatment

**Allopathy:** This refers to the broad category of medical practice that is sometimes called Western medicine, biomedicine, evidence-based medicine, or modern medicine. According to Med Terms Dictionary, allopathic medicine is defined as "the system of medical practice

which treats disease by the use of remedies which produce effects different from those produced by the disease under treatment".

Indian System of Medicines (ISM): This includes Ayurveda, Siddha, Unani and Sowa-Rig-Pa medicines. These medicines are also called *Desi Dawaiyan* in India. Herbal medicines are also included in this category of medicines. The practitioners of these systems may be called (*Jadi-Booti wale*) Vaidji, Vaidya, Siddha Vaidya, Hakim, etc. This category also includes home-made medicines and *Gharelu Nuskhe*, Herbal Medicines (*Jadi-Bootiyan or Desi Dawa*), and the medicines given by local Vaidya/Hakim. e.g. Neem leaves for skin diseases, *Tulsi* leaves for common cold, *Haldi* (turmeric) for injuries and fracture, *Adarak* (ginger) for cough, cold, throat problem etc., *Lahasun* (garlic) for *gathiya/*joint pain, *Kali Mirch* (pepper) and honey for dry and productive cough, *Ashwagandha, Chyawanprash* as tonic, Rasayana for energy, *Gulabjal* for eye diseases and face wash, *Saunf* for indigestion, *Ajowain* and *Hing* for stomach pain, *Methi* seeds, *Ajawain*, *Pudina* (mint), *Jeera, Sunthi* (dry ginger), *Laung* (clove), oil for toothache, *triphala* powder for problems like indigestion, loss of appetite, constipation, *Bilva* (*bel*) powder for diarrhoea, etc.

**Homoeopathy:** Homeopathy is a system of medicine that uses highly diluted doses from the plant, mineral and animal kingdoms to stimulate natural defenses in the body. Oral Homoeopathy medicine is available in many forms, including the traditional homoeopathic pellets (balls), liquid dilution, tablets (lactose-based) and mother tincture.

**Yoga and Naturopathy:** Yoga is a combination of breathing exercises (pranayam), physical postures (asanas) and meditation for curing illness and releasing stress, both physical and mental. In Naturopathy, treatments are based on five elements of nature, namely, (i) Earth (mud baths, mud packs, mud wraps) (ii) Water (hydrotherapy methods like baths, jets, douches, packs, immersions, compresses/fomentations) (iii) Air (breathing exercises, outdoor walking, open-air baths) (iv) Fire (sun baths, magnetized water) (v) Ether (fasting therapy).

**AYUSH:** Each letter of the word AYUSH represents a specific system of medicine: A for Ayurveda, Y for Yoga and Naturopathy, U for Unani, S for Siddha, and H for Homeopathy. Thus AYUSH encompasses the Indian System of Medicines, Yoga and Naturopathy, and Homeopathy. Treatment by any of these systems therefore qualified as AYUSH treatment, and medicines used by any of these systems were called AYUSH medicines.

#### 2.4. Medical Expenditure

**Medical expenditure in a case of hospitalisation:** This includes bed charges, doctor's/surgeon's fees, total amount paid for medicines, diagnostic tests, attendant charges, physiotherapy, personal medical appliances, blood, oxygen, etc. during stay at the hospital (within the reference period of last 365 days) - whether made available by the hospital or procured from outside. Expenses on transportation of the patient to or from the hospital are excluded, and so is expenditure on food.

**Package component:** "Packages" of treatment involving specific surgical or non-surgical medical procedures, inclusive of different items like operation theatre (OT) charges, OT consumables, medicines, doctor's fees, bed charges, etc. are common now a days in all private hospitals. (Normally, packages do not include additional diagnostic tests, attendant charges, physiotherapy, personal medical appliances, blood, oxygen, etc.). When expenditure for a hospitalisation case involves a package component, the usual break-up of total expenditure by its various components such as bed charges, doctor's/surgeon's fees, etc. will not be available. Therefore, in deriving the break-up of expenditure (aggregate or per-hospitalisation-case) by its components, (i) a "package component" has to be shown (ii) the expenditures on the other components get under-estimated to the extent that packages of treatment are a common feature.

Medical expenditure. out-of-pocket medical expenditure, and amount of reimbursement: In cases of both hospitalised and non-hospitalised treatment, some amount of medical expenditure may be reimbursed by employers or by insurance companies (public or private), or by other agencies. In this survey, expenditures were recorded when (and only when) borne initially by the patient's household, whether or not reimbursed later. The amount reimbursed later was also separately recorded. In cases where reimbursement was of the cashless form, the payment (made to hospital or doctor directly by the employer or insurance company) was not recorded by the survey. Thus (i) the estimates of medical expenditure given in this document include expenses reimbursed later, but not expenses that the household did not have to bear even initially (ii) estimates of amount of reimbursement include only the reimbursement that was made later, with the initial payment having been made by the household.

#### 2.5. Immunisation

**Full immunisation:** A child who has received BCG, OPV-1, OPV-2, OPV-3, DPT-1, DPT 2, and DPT-3 and measles vaccine is referred as fully immunized.

**BCG:** This injection is meant for immunizing the child from an attack of tuberculosis, and is usually injected in a single dose at birth or as early as possible before one year of age.

**Oral Polio Vaccine (OPV):** OPV is generally given as oral liquid and sometimes as injection in 3 or 4 doses at an interval of 4 weeks. The first dose is given at birth or as early as possible within the first 15 days. Booster doses are also given when the child is 16-24 months of age.

**DPT vaccine:** This is usually injected in 3 doses at an interval of 1-2 months for immunising the child from diphtheria, whooping cough and tetanus. Generally a booster dose is also injected when the child is 16-24 months of age.

**DPT/Pentavalent:** Pentavalent vaccine contains five antigens, viz., Hepatitis B, Diphtheria+Pertussis+Tetanus (DPT is a trivalent vaccine) and Haemophilus influenza b (Hib) vaccine. Pentavalent vaccination is provided to children at the age of 6, 10 and 14 weeks as primary dose. The vaccine has replaced DPT and Hep B vaccine in the immunisation schedule. However, birth doses of Hepatitis B and two booster doses of DPT (at 16-24 months and 5 years of age) continue to be given.

# 2.6. Maternity and childbirth

**Pre-natal care:** This is also known as antenatal care and is a type of preventive healthcare with the goal of providing regular check-ups that allow doctors or midwives to treat and prevent potential health problems throughout the course of the pregnancy while promoting healthy lifestyles that benefit both mother and child. Pre-natal care starts with history taking and is followed by examination of the woman, which basically includes: recording weight and height, blood test for anaemia, blood pressure measurement, regular abdominal examination, etc. She is also provided with Tetanus Toxoid (TT) immunisation and IFA tablets/syrup along with other treatment in case of complication. As per schedule, the first pre-natal care check is to be done within 12 weeks, the second check between 14-26 weeks, the third check between 28-34 weeks and the fourth check between 36-40 weeks, but due to unawareness, mobility, distance, etc. the timing of checks may vary.

**Post-natal care:** The post-natal period is defined as the first six weeks after birth (42 days) and is critical to the health and survival of a mother and her newborn, being the most vulnerable time for both. Lack of care in this time period may result in death or disability as well as missed opportunities to promote healthy behaviours, affecting women, new-borns, and children. Ensuring post-natal care within first 24 hours of delivery and subsequent home visits on the 3<sup>rd</sup>, 7<sup>th</sup> and 42<sup>nd</sup> day are the important components of identification and management of emergencies occurring during the post-natal period. Health workers such as ANMs and staff nurses are oriented and trained to tackle problems identified during these visits.

Abbreviation	Expanded form
NSS	National Sample Survey
ASHA	Accredited Social Health Activist
AWW	Anganwadi Worker
ANM	Auxiliary Nurse/ Midwife
HSC	Health Sub Centre
РНС	Primary Health Centre
СНС	Community Health Centre
ESI	Employees' State Insurance
ESIC	Employees' State Insurance Corporation
CGHS	Central Government Health Scheme
RSBY	Rashtriya Swasthya Bima Yojana
PSU	Public Sector Undertaking
ISM	Indian System of Medicines
AYUSH	Ayurveda, Yoga and Naturopathy, Unani, Siddha, and Homeopathy
OT	Operation Theatre
ТВ	Tuberculosis
BCG	Bacille Calmette-Guérin (BCG)
DPT	Vaccine for Diphtheria, Pertussis and Tetanus
OPV	Oral Polio Vaccine
FSU	First Stage Units
UFS	Urban Frame Survey
SRS	Simple Random Sampling
SRSWOR	Simple Random Sampling Without Replacement
PPSWR	Probability Proportional to Size With Replacement
SSS	Second Stage Strata
PAP	Proportion of Ailing Persons

#### 2.7. Abbreviations

#### SECTION THREE

#### SAMPLE DESIGN AND ESTIMATION PROCEDURE

#### 3.1. Introduction

National Sample Survey, set up by the Government of India in 1950 to collect socio economic data employing scientific sampling methods, conducted its 75<sup>th</sup> round during the period July 2017 – June 2018. Apart from "Household Social Consumption: Health", two other subjects were covered: "Household Consumer Expenditure" and "Household Social Consumption: Education".

#### 3.2. Outline of survey programme

Geographical coverage: The survey covered the whole part of Delhi.

**Period of survey:** The survey period was of one year duration starting on 1<sup>st</sup> July 2017 and ending on 30<sup>th</sup> June 2018. The survey was divided in to four sub rounds of three months each as per the duration given below:

sub-round 1	:	July – September, 2017
sub-round 2	:	October – December, 2017
sub-round 3	:	January – March, 2018
sub-round 4	:	April – June, 2018

In each of these four sub-rounds, equal number of sample villages/blocks (FSUs) were allotted for survey with a view to ensuring uniform spread of sample FSUs over the entire survey period. Attempt had been made to survey each of the FSUs during the sub round to which it was allotted.

Schedules of enquiry: The following schedules of enquiry were canvassed:

Sch. 0.0	:	List of Households
Sch. 1.0	:	Household Consumer Expenditure
Sch. 25.0	:	Household Social Consumption: Health
Sch. 25.2	:	Household Social Consumption: Education

#### 3.3. Sample Design

**Outline of sample design:** A stratified multi-stage design was adopted for the 75<sup>th</sup> round survey. The first stage units (FSU) were the Census villages in the rural sector and Urban Frame Survey (UFS) blocks in the urban sector. The ultimate stage units (USU) in both sectors were the households. In the case of large FSUs, the selection of two sub-FSUs (hamlet-groups in villages and sub-blocks in UFS blocks) was an intermediate stage of sampling.

**Sampling frame for first stage units:** For the rural areas, the list of 2011 Census villages constituted the sampling frame. For the urban sector, the list of UFS blocks (UFS 2007-12 and 2012-17) was the sampling frame.

#### 3.3.1. Stratification

In Delhi, two basic strata were formed: (i) rural stratum comprising of all rural areas of Delhi and (ii) urban stratum comprising of all the urban areas of Delhi. However, for each town with population one lakh or more as per Population Census, a separate basic stratum was formed and the remaining urban areas of Delhi have been considered as another basic stratum.

#### 3.4. Sub-stratification

**Rural sector:** If 'r' was the sample size allocated for a rural stratum, the number of substrata formed was r/4. The villages as per frame were first arranged in ascending order of population. Then sub-strata 1 to r/4 were demarcated in such a way that each sub-stratum comprised a group of villages of the arranged frame and had more or less the equal population.

**Urban sector:** If 'u' was the sample size allocated for an urban stratum, the number of substrata formed was 'u/4'. For all strata, if u/4 > 1, implying formation of 2 or more sub-strata, all the UFS blocks within the stratum were first arranged in ascending order of total number of households in the UFS blocks as per UFS frame 2007-12 and 2012-17. Then sub-strata 1 to 'u/4' were demarcated in such a way that each sub-stratum had more or less equal number of households.

- **3.5. Total sample size (FSUs):**172 urban and 8 rural FSUs were allocated for the state sample in Delhi.
- **3.6.** Allocation to strata: Within each sector, the respective sample size was allocated to the different strata in proportion to the population as per Census 2011. Stratum level allocation was adjusted to multiples of 4 with a minimum sample size of 4.
- **3.7.** Allocation to sub-strata: Allocation for each sub-stratum was 4 in both rural and urban sectors.

#### 3.8. Selection of FSUs

For the rural sector, from each sub-stratum, sample villages were selected with Probability Proportional to Size With Replacement (PPSWR), size being the population of the village as per Census 2011.

For the urban sector, from each stratum/sub-stratum, FSUs were selected by Probability Proportional to Size With Replacement (PPSWR), size being the number of households of the UFS block.

Both rural and urban samples were drawn in the form of two independent sub samples.

#### 3.9. Hamlet-groups/sub-blocks formation and selection

**Criterion for hamlet-group/sub-block formation**: After identification of the boundaries of the FSU, it was first determined whether listing was to be done in the whole sample FSU or not. In case the population of the selected FSU was found to be 1200 or more, it was divided into a suitable number (say, D) of "hamlet-groups" in rural sector and "sub-blocks' in urban sector by more or less equal population as shown in the table given below:

Approximate present population of sample FSU	No. of hgs/sbs formed
less than 1200	1
1200 to 1799	3
1800 to 2399	4
2400 to 2999	5
3000 to 3599	6
and so on	-

Formation and selection of hamlet-groups/sub-blocks: In case hamlet-groups/sub blocks were formed in the sample FSU, the same was done by more or less equalizing population.

Note that while doing so, it was ensured that the hamlet-groups/ sub blocks formed were clearly identifiable in terms of physical landmarks.

Two hamlet-groups(hg)/sub-blocks(sb) were selected from a large FSU wherever hamlet groups/sub-blocks were formed in the following manner- one hg/sb with maximum percentage share of population was always selected and termed as hg/sb1; one more hg/sb was selected from the remaining hg's/ sb's by Simple Random Sampling (SRS) and termed as hg/sb2. Listing and selection of the households were done independently in the two selected hamlet-groups/sub-blocks. The FSUs without hg/sb formation was treated as sample hg/ sb number 1.

# **3.10.** Formation of Second Stage Strata (SSS) and allocation of households for Schedule 25.0

Households listed in the selected FSU/hgs/sbs were stratified into three second-stage strata (SSS). The composition of the second-stage strata and the numbers of households planned to be surveyed from different SSS were as follows:

		Number of households surveyed			
SSS	Composition of SSS	in an FSU	FSU with hgs/sbs		
222	Composition of SSS	without hg/sb	(for each hgs/sbs)		
		formation			
SSS 1	Households having at least one	2	1		
	child of age less than 1 year				
SSS 2	From the remaining, households with at				
	least one member (including deceased	4	2		
	former member) hospitalised during last				
	365 days				
SSS 3	Other households	2	1		

**3.11. Selection of households:** From each SSS, the sample households were selected by SRSWOR.

#### **3.12. Estimation procedure**

#### Notations

 $s = subscript for s^{th} stratum$ 

- t =subscript for  $t^{th}$  sub-stratum
- m = subscript for sub-sample (m =1, 2)
- *i*= subscript for *i*<sup>th</sup> FSU [village (*panchayat*ward)/block]
- d =subscript for a hamlet-group/sub-block (d = 1, 2)

j = subscript for j<sup>th</sup> second stage stratum in an FSU/hg/sb

- k = subscript for  $k^{\text{th}}$  sample household within an FSU/ hg/sb
- D = total number of hg's/sb's formed in the sample FSU
- $D^* = 0$  if D = 1
- = (D 1) for FSUs with D > 1

Z = total size of a sub-stratum (sum of sizes for all the FSUs of a sub-stratum)

z = size of sample FSU used for selection.

n = number of sample FSUs surveyed including 'uninhabited' and 'zero cases' but excluding casualty for a particular sub-sample and sub-stratum.

H = total number of households listed in a second-stage stratum of an FSU /hamlet-group or sub- block of sample FSU

h = number of households surveyed in a second-stage stratum of an FSU/hamlet-group or sub-block of sample FSU

x, y = observed value of characteristics x, y under estimation

 $\hat{X}, \hat{Y}$  = estimate of population total *X*, *Y* for the characteristics *x*, *y* 

In terms of the above symbols,

 $y_{stmidik}$  = observed value of the characteristic y for the k<sup>th</sup> household of the j<sup>th</sup> second stage

stratum of the  $d^{\text{th}}$  sub-FSU of the  $i^{\text{th}}$  FSU belonging to the  $m^{\text{th}}$  sub-sample for the  $t^{\text{th}}$  sub-stratum of the  $s^{\text{th}}$  stratum.

However, for ease of understanding, a few symbols have been suppressed in following paragraphs where they are obvious.

# 3.13. Estimation (Sch. 25.0) of aggregates for a specific sub-sample and sub-stratum

# **Rural/Urban**

(i) For j-th second-stage stratum of a sub-stratum:

$$\hat{Y}_{j} = \frac{Z}{n_{j}} \sum_{i=1}^{n_{j}} \frac{1}{z_{i}} \left[ \frac{H_{i1j}}{h_{i1j}} \sum_{k=1}^{h_{i1j}} y_{i1jk} + D_{i}^{*} \times \frac{H_{i2j}}{h_{i2j}} \sum_{k=1}^{h_{i2j}} y_{i2jk} \right]$$

(ii) For all second-stage strata combined:

$$\widehat{Y} = \sum_{j} \widehat{Y}_{j}$$

#### 3.14. Overall Estimate of an aggregate for a sub-stratum

Overall estimate for aggregates for a sub-stratum  $(\hat{Y}_{st})$  based on two sub-samples in a substratum is obtained as:

$$\widehat{Y}_{st} = \frac{1}{2} \sum_{m=1}^{2} \widehat{Y}_{stm}$$

#### 3.15. Overall Estimate of an aggregate for a stratum

Overall estimate for a stratum  $(\hat{Y}_s)$  is obtained as

$$\hat{Y}_s = \sum_t \hat{Y}_{st}$$

# 3.16. Overall Estimate of aggregates at State/UT/all-India level

The overall estimate  $\hat{Y}$  at the State/ UT/ all-India level is obtained by summing the stratum estimates  $\hat{Y}_s$  over all strata belonging to the State/ UT/ all-India.

#### 3.17. Estimates of Ratios

Let  $\hat{Y}$  and  $\hat{X}$  be the overall estimates of the aggregates Y and X for two characteristics y and x respectively at the State/UT/ all-India level.

Then the combined ratio estimate  $(\hat{R})$  of the ratio  $\left(R = \frac{Y}{X}\right)$  will be obtained as

$$\widehat{R} = \frac{\widehat{Y}}{\widehat{X}}$$

3.18. Estimates of Error: The estimated variances of the above estimates will be

# For aggregate $\widehat{\boldsymbol{Y}}$

$$V\hat{a}r(\hat{Y}) = \sum_{s} V\hat{a}r(\hat{Y}_{s}) = \sum_{s} \sum_{t} V\hat{a}r(\hat{Y}_{st})$$

where  $V\hat{a}r(\hat{Y}st)$  is given by

$$V\hat{a}r(\hat{Y}_{st}) = \frac{1}{4}\left(\hat{Y}_{st1} - \hat{Y}_{st2}\right)^2$$

where  $\hat{Y}_{st1}$  and  $\hat{Y}_{st2}$  are the estimates for sub-sample 1 and sub-sample 2 respectively for stratum sand sub-stratum *t*.

# For ratio $\hat{R}$

$$M\hat{S}E(\hat{R}) = \frac{1}{4\hat{X}^2} \sum_{s} \sum_{t} \left[ \left( \hat{Y}_{st1} - \hat{Y}_{st2} \right)^2 + \hat{R}^2 \left( \hat{X}_{st1} - \hat{X}_{st2} \right)^2 - 2\hat{R} \left( \hat{Y}_{st1} - \hat{Y}_{st2} \right) \left( \hat{X}_{st1} - \hat{X}_{st2} \right) \right]$$

Estimates of Relative Standard Error(RSE)

$$R\hat{S}E(\hat{Y}) = \frac{\sqrt{V\hat{a}r(\hat{Y})}}{\hat{Y}} \times 100$$
$$R\hat{S}E(\hat{R}) = \frac{\sqrt{M\hat{S}E(\hat{R})}}{\hat{R}} \times 100$$

#### 3.19. Multipliers

The formulae for multipliers (for Sch. 25.0) at stratum/sub stratum/second- stage stratum level for a sub-sample are given below:

#### Formula for multipliers

hg / sb 1	hg / sb 2
$\frac{Z_{st}}{n_{stmj}} \times \frac{1}{Z_{stmi}} \times \frac{H_{stmi1j}}{h_{stmi1j}}$	$\frac{Z_{st}}{n_{stmj}} \times \frac{1}{z_{stmi}} \times D^*_{stmi} \times \frac{H_{stmi2j}}{h_{stmi2j}}$
j	= 1, 2, 3

# Note:

- (i) For estimating any characteristic for any domain not specifically considered in sample design, indicator variable may be used.
- (ii) Multipliers have to be computed on the basis of information available in the listing schedule irrespective of any misclassification observed between the listing schedule and detailed enquiry schedule.

Separate estimates for the transgender category cannot be presented because the sample sizes do not permit it. Transgender persons have not been clubbed with either "male" or "female", but included in "all (genders)".

#### SECTION FOUR

#### SUMMARY OF FINDINGS

This section summarizes the important findings of the survey and discusses the salient features pertaining to the curative aspects of the general healthcare system in Delhi. The important parameters that have emerged from this survey include proportion of ailing persons, cases of hospitalisation, overall expenditure on medical treatment and status of aged persons. Wherever possible, the results of the earlier rounds have been placed side by side so that trends and changes over the periods of survey may be examined. The results in respect of vital indicators have been presented gender wise for different sectors (Rural/Urban). The findings of the report are based on survey of 64 rural and 1373 urban sample households.

The discussion starts with observations on the distribution of households over some important characteristics that have relevance, directly or indirectly, with the conditions of living and health of the individuals, followed by the analysis of morbidity rates, in general, and treatment of ailments, particulars of hospitalisation and cost of treatment jointly with related characteristics to reveal the multi-dimensional aspects of the health care system. For the first time in health survey, the data collected has enabled assessment of population who is affected by some widespread communicable diseases. The results on use of private and public hospitals for childbirth, the cost incurred and the extent of receipt of pre-natal and post-natal care by women who gave childbirth, detailed information on status of immunisation of children (age 0-5 years) and finally, discussion on the condition of the aged (those with age 60 years or more) have been presented in this Section. This section also highlights the structure and composition of the aged in respect of age, sex, dependency ratio, etc. and the conditions of the aged in respect of their economic dependency, number of dependents, living arrangements, persons supporting the aged, physical immobility etc.

#### 4.1. Demography profile

Distribution of population, households, household size and sex ratio by sector is presented in Statement 4.1.1. Population of Delhi is estimated as 130.19 lakhs and estimated households are 32.82 lakhs. Out of the total households, about 97.08 per cent are reported in Urban and the rest of 2.92 per cent are in rural.

The average household size has been reported as 4.0. It is reported as 4.8 in rural and 3.9 in the urban areas. Sex ratio in Delhi is reported as 868, whereas it is reported as 865 in rural and 868 females per 1000 male population in urban.

Sector	Sample	Estimated	Estin	nated No.	ersons	Average	Sex	
	Households	Households	Male	Female	Trans- gender	All	HH size	Ratio
			Numb	er ('00')				
Rural	64	960	2486	2151	0	4637	4.8	865
Urban	1373	31863	67174	58340	37	125552	3.9	868
All	1437	32823	69660	60491	37	130188	4.0	868
			Percent	age share				
Rural	4.45	2.92	53.61	46.39	0.00	100	-	-
Urban	95.55	97.08	53.50	46.47	0.03	100	-	-
All	100	100	53.51	46.46	0.03	100	-	-

Statement 4.1.1: Sector wise distribution of Population and Households

(See Table 1 & 3 of Annexure)

Distribution of sector-wise and gender-wise estimated population of Delhi by quintile class of Usual Monthly Per Capita Expenditure (UMPCE) has been presented in statement 4.1.2 for meaningful presentation of data on various important aspects of social consumption of health such as distribution of hospitalisation cases excluding childbirth etc.

Quintile	<b>TT</b>		Estimated Number ('00') of Persons										
class of	House holds	Rural				Urban			All				
UMPCE	noius	М	F	Т	All	М	F	Т	All	М	F	Т	All
1 <sup>st</sup>	5194	606	526	0	1132	13023	11761	0	24784	13629	12287	0	25917
2 <sup>nd</sup>	5712	501	443	0	944	14133	10685	0	24818	14634	11128	0	25762
3 <sup>rd</sup>	6499	394	311	0	705	13813	11839	6	25657	14207	12149	6	26362
4 <sup>th</sup>	7420	438	583	0	1020	13666	11947	0	25613	14104	12529	0	26633
5 <sup>th</sup>	7998	547	288	0	835	12539	12109	31	24680	13086	12398	31	25515
All	32823	2486	2151	0	4637	67174	58340	37	125552	69660	60491	37	130188
M-Male, F	M-Male, F-Female T-Transgender												

Statement 4.1.2: UMPCE class wise distribution of Households and Population

(See Table 4 of Annexure)

#### 4.1.3. Age group wise distribution

Any study relating to a human population remains incomplete unless it's age composition is known. Thus, the distribution of population by age-group and sex, will certainly help in easy understanding of the results, particularly the study of various indicators of morbidity. It can be seen in statement 4.1.3 that the highest proportion of population has been reported as 29.4% in the age group of 15-29 years followed by 26.7% in the age group of 30-44 years. The lowest proportion of population has been reported as 4.9% in the age group of 60 and above years.

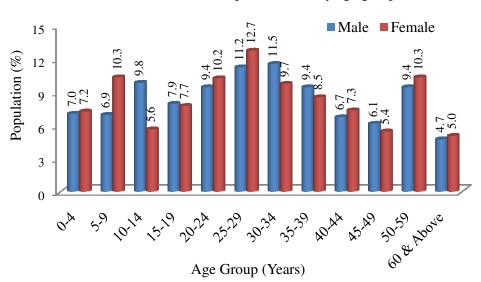
Age	Estimated Population ('00')								
Group (Years)	Male	Population (%)	Female	Population (%)	All	Population (%)			
0-4	4865	7.0	4371	7.2	9235	7.1			
5-9	4814	6.9	6247	10.3	11066	8.5			
10-14	6801	9.8	3379	5.6	10179	7.8			
5-14	11615	16.7	9625	15.9	21246	16.3			
15-19	5492	7.9	4653	7.7	10145	7.8			
20-24	6536	9.4	6157	10.2	12693	9.8			
25-29	7822	11.2	7666	12.7	15488	11.9			
15-29	19850	28.5	18476	30.5	38326	29.4			
30-34	7982	11.5	5893	9.7	13878	10.7			
35-39	6577	9.4	5145	8.5	11721	9.0			
40-44	4649	6.7	4445	7.3	9122	7.0			
30-44	19208	27.6	15482	25.6	34721	26.7			
45-49	4261	6.1	3268	5.4	7529	5.8			
50-59	6581	9.4	6230	10.3	12812	9.8			
45-59	10843	15.6	9498	15.7	20341	15.6			
60-64	1638	2.4	1785	3.0	3424	2.6			
65-69	900	1.3	786	1.3	1686	1.3			
60-69	2538	3.6	2571	4.3	5110	3.9			
70-74	560	0.8	213	0.4	774	0.6			
75-79	98	0.1	103	0.2	200	0.2			
60-79	3197	4.6	2887	4.8	6084	4.7			
80 & above	83	0.1	151	0.3	235	0.2			
70 & above	742	1.1	467	0.8	1209	0.9			
60 & above	3280	4.7	3038	5.0	6318	4.9			
All	69660	100	60491	100	130188	100			

Statement 4.1.3: Percentage distribution of population by age group for each gender

(See Table 1 of Annexure)

Note: Separate estimates for the transgender category cannot be presented because the sample sizes do not permit it. Transgender persons have not been clubbed with either "male" or "female", but included in "all (genders)".





Distribution of Population (%) by age group

#### 4.2. Morbidity and health care

In this sub-section, results pertaining to cases of morbidity not requiring hospitalisation were analyzed with special reference to proportion of ailing persons, sources of treatment, extent of utilization of public health institutions, expenditure incurred on treatment of ailments etc. The survey estimates are based on self-reported morbidity data, rather than on medical examination.

#### 4.2.1. Level of morbidity

Statement 4.2.1 gives the survey estimates on prevalence of morbidity. For the purpose of the survey, the term rate of morbidity is measured as the proportion of persons reporting ailment per lakh of population for the respective sector/sex during a 15-day period preceding the date of survey.

The morbidity rate in Delhi is estimated as 12431 per lakh population. It shows a difference of 32.05 percentage point in the morbidity rates between male and female population. It was observed that there is a difference of 5.77% between morbidity rates across the rural and urban population.

Item	Estimated no. of Persons ('00') reported ailment during a period of 15 days					
	Male	Female	All			
Rural						
Estimated no. of persons reported illness	208	339	546			
Population	2486	2151	4637			
Rate of morbidity/Per One lakh population	8367	15760	11775			
Urban						
Estimated no. of persons reported illness	7329	8302	15638			
Population	67174	58340	125552			
Rate of morbidity/Per One lakh population	10910	14230	12455			
All						
Estimated no. of persons reported illness	7536	8641	16184			
Population	69660	60491	130188			
Rate of morbidity/Per One lakh population	10818	14285	12431			

## Statement 4.2.1: Rates of morbidity not requiring hospitalisation

(See Table 1 & 6 of Annexure)

## 4.2.2. Morbidity by age groups

The estimates of morbidity for different broad age groups are shown in statement 4.2.2 given below. The Proportion of Ailing Persons (PAP) was found to be highest i.e. 64.85% for persons in the age group of 60 & above years, followed by 23.80% in the age group of 45-59 and 23.01% in the age group of 0-5 years. The lowest proportion of ailing persons was reported as 3.29% in the age group of 15-29 years.

Age group (Years)	Persons ('00') Reporting Ailment during last 15 days	Population ('00')	Percentage of Ailing Person
0-4	2125	9235	23.01
5-14	1587	21246	7.47
15-29	1261	38326	3.29
30-44	2273	34721	6.55
45-59	4841	20341	23.80
60 & above	4097	6318	64.85
All	16184	130188	12.43

# Statement 4.2.2: Morbidity by age group

(See Table 1 & 6 of Annexure)

## 4.2.3. Trends in morbidity

The sector wise comparison of the current survey estimates of morbidity rates, with those of the previous NSS round (71<sup>st</sup> round: January 2014- June 2014) vis-à-vis All India level is

presented in statement 4.2.3. In urban Delhi, 12.5% persons reported illness in comparison to 5.0% persons during 71<sup>st</sup> NSS Round. At the same time, 9.1% morbidity rate was reported at All India level in urban sector during 75<sup>th</sup> NSS round.

	Percentage of persons reported illness										
		NSS 71 <sup>s</sup>	t Round		NSS 75 <sup>th</sup> Round						
Gender	D	elhi	All India		D	elhi	All India				
	Rural	Urban	Rural	Urban	Rural	Urban	Rural	Urban			
Male	3.3	4.2	8.0	10.1	8.4	10.9	6.1	8.2			
Female	7.3	6.1	9.9	13.5	15.8	14.2	7.6	10.0			
All	4.8	5.0	8.9	11.8	11.8	12.5	6.8	9.1			

## 4.2.4. Nature of ailments experienced

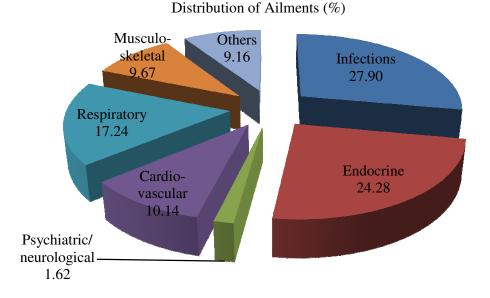
The schedule of enquiry used for the survey adopted a 60-fold classification of ailments. These have been clubbed into seven broad categories: (i) Infections (including fevers, jaundice, diarrhoea/dysentery), (ii) Endocrine or metabolic (including diabetes and thyroid diseases), (iii) Cardio-vascular (including hypertension and heart disease), (iv) Respiratory, (v) Musco-skeletal (including joint pain, back & body aches), (vi) Psychiatric or neurological, and (vii) Other ailments. Statement 4.2.4 shows sector wise and gender wise percentage distribution of ailments reported per one lakh population during last 15 days.

Statement 4.2.4: Percentage distribution of ailments reported per lakh persons during
the last 15 days for major ailment type

Nature of		Rural			Urban		All			
Ailment	Male	Female	All	Male	Female	All	Male	Female	All	
Infections	80.45	30.37	49.48	33.06	21.86	27.15	34.36	22.19	27.90	
Endocrine	4.47	4.41	4.43	28.40	21.96	24.96	27.74	21.28	24.28	
Psychiatric /neurological	2.48	0.00	0.94	1.61	1.68	1.65	1.63	1.62	1.62	
Cardio- vascular	7.72	2.72	4.63	7.18	13.10	10.32	7.19	12.70	10.14	
Respiratory	4.88	29.19	19.91	13.08	20.75	17.14	12.86	21.08	17.24	
Musculo- skeletal	0.00	30.24	18.70	6.48	11.91	9.36	6.30	12.62	9.67	
Others	0.00	3.08	1.90	10.18	8.72	9.40	9.90	8.52	9.16	
All	100	100	100	100	100	100	100	100	100	

(See Table 7 of Annexure)

On comparison of distribution of ailments per lakh persons, it was found that the highest proportion of persons i.e. 27.90% are reported to be ailing from Infections (including fevers, jaundice, HIV/AIDS, diarrhoea etc.), followed by 24.28% ailing from Endocrine ailments (including diabetes, thyroid etc.) and 17.24% ailing from Respiratory disorders. Fig. 2 below shows the percentage break-up of ailments by seven broad categories of ailments reported per one lakh population during last 15 days.



#### Figure 2: Distribution of Ailments category

#### 4.2.5. Treatment of Ailments

The sector wise and gender wise percentage distribution of ailments treated by Allopathy, AYUSH and Other systems of medicine in Delhi is shown in statement 4.2.5. It can be seen that overall 94.6% ailing persons in Delhi are being treated by Allopathy, 5.3% by AYUSH, whereas only 0.1% are being treated by Other systems of medicine.

Statement 4.2.5: Percentages	of Ailments treated h	v systems of medicine

	Percentage of Ailments treated by								
Sector		Allopathy	y	AYUSH			Other		
	Male Female All			Male	Female	All	Male	Female	All
Rural	97.2	97.7	97.5	1.4	2.3	2.0	1.4	0.0	0.5
Urban	93.9	95.1	94.5	6.0	4.9	5.4	0.1	0.0	0.0
All	94.0	95.2	94.6	5.9	4.8	5.3	0.1	0.0	0.1

(See Table 8 of Annexure)

#### 4.2.6. Type of healthcare service provider

For an ailment treated on medical advice, the term "level of care" was used in the survey to indicate the type of healthcare service provider. Five different types of healthcare service providers were distinguished: (i) Government/Public hospital (incl. HSC/PHC/CHC etc.), (ii) Charitable/Trust/NGO-run hospital, (iii) Private hospital, (iv) Private Doctor/Clinic, and (v) Informal healthcare provider.

The break-up of gender wise percentage of ailments treated by type of healthcare service provider is shown in statement 4.2.6, separately for rural and urban Delhi. 30.4% of the ailing persons are reported to be treated in Government hospitals/Public hospitals in comparison to 47.3% by Private Doctor/Clinic and 20.4% in Private hospitals.

			Pe	rcentag	ge of treat	ed ailm	ent			
Healthcare service provider	Rural				Urban			All		
service provider	Male	Female	All	Male	Female	All	Male	Female	All	
Government/ Public hospital	57.3	36.7	44.6	35.6	24.9	30.0	36.2	25.4	30.4	
Charitable/Trust /NGO run	0.0	0.0	0.0	1.1	0.5	0.8	1.1	0.4	0.7	
Private Doctor/ Clinic	41.2	57.2	51.2	45.4	48.8	47.2	45.2	49.1	47.3	
Private hospital	1.5	6.0	4.3	17.1	24.4	21.0	16.7	23.7	20.4	
Informal Health Care Provider	0.0	0.0	0.0	0.8	1.4	1.1	0.7	1.3	1.1	
All	100	100	100	100	100	100	100	100	100	

Statement 4.2.6: Percentage break-up of ailments treated by type of healthcare service providers

(See Table 9 of Annexure)

#### 4.2.7. Expenditure on treatment of ailments not involving hospitalisation

Average medical expenditure per treated ailment by healthcare service provider: Statement 4.2.7 shows gender wise average medical expenditure incurred per spell of ailment not involving admission to hospital for rural and urban sector separately at five levels of care namely Government/Public hospitals, Charitable/NGO/trust-run hospitals, Private hospitals, Private Doctors/Clinics, and Informal healthcare providers. On an average, an ailing person incurred Rs. 827/- as medical expenditure per spell of ailment in Delhi. The amount spent on treatment per spell in Government/Public hospital has been reported as Rs. 227/- as compared to Rs. 1755/- in Private hospital and Rs. 872/- in Private Doctor/Clinic.

		Average me	dical expendit	ture (Rs.) p	oer spell of	ailment trea	ted by
Sector	Gender	Government /Public hospital	Charitable/ Trust/NGO run hospital	Private hospital	Private Doctor/ Clinic	Informal health care provider	All
	Male	367	0	480	1423	0	787
Rural	Female	89	0	1826	732	0	554
	All	225	0	1677	941	0	643
	Male	224	149	2202	920	302	859
Urban	Female	231	305	1481	828	281	812
	All	227	198	1756	869	288	833
	Male	230	149	2199	932	302	857
All	Female	223	305	1485	824	281	802
	All	227	198	1755	872	288	827

Statement 4.2.7: Average medical expenditure (Rs.) per treated ailment by healthcare service provider

(See Table 10 of Annexure)

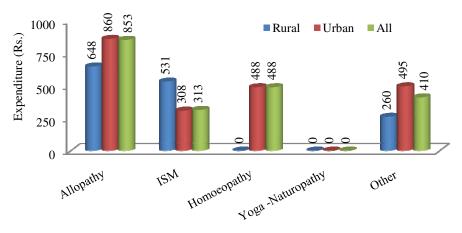
# 4.2.8. Average medical expenditure (for non-hospitalisation cases) by nature of treatment

Statement 4.2.8 shows average medical expenditure incurred per spell of treatment by nature of treatment. The highest average amount incurred per spell of ailment is Rs. 853/- on Allopathic treatment followed by Rs. 488/- and Rs. 313/- on Homeopathic treatment and Indian System of Medicine, respectively.

Statement 4.2.8: Average medical expenditure (Rs.) for non-hospitalisation cases by nature of treatment

	Averag	ent (Rs.) in Sys	System of Medicine				
Sector	Allopathy	Indian System of Medicine	Homoeopathy	Yoga & Naturopathy	Other sources	All	
Rural	648	531	0	0	260	643	
Urban	860	308	488	0	495	833	
All	853	313	488	0	410	827	

# Figure 3: Average medical expenditure (for non-hospitalisation cases) by nature of treatment



Average medical expenditure (Rs) for treatment

Nature of treatment

# **4.2.9.** Components of medical expenditure (non-hospitalisation) for different healthcare service provider

The break-up of medical expenditure (non-hospitalisation) into four components: doctor's fees, medicines, diagnostic tests and other expenses, by healthcare service provider for rural and urban combined and combined genders is shown in statement 4.2.9. The highest component of average medical expenditure per spell of treatment of an ailment has been reported as Medicines (61.15%) followed by Doctor's fee (18.79%) and Diagnostic tests (18.78%). Among all healthcare service providers, Medicines remained the highest component in terms of expenditure incurred on treatment per spell of ailment.

Statement	4.2.9:	Components	of	medical	expenditure	(non-hospitalisation)	by
healthcare	service	provider					

		Percentage share of medical expenditure										
Component of	Healthcare service provider											
medical expenditure	Government/ Public hospitals	Charitable/NGO run hospital	Private hospital	Private Doctor/ Clinic	All							
Medicines	92.72	81.72	53.81	61.85	61.15							
Doctor's fee	0.22	10.66	16.82	23.62	18.79							
Diagnostic tests	6.08	7.68	26.74	14.34	18.78							
Other	0.93	0.00	2.63	0.18	1.27							
All	100	100	100	100	100							

(See Table 11 of Annexure)

# 4.3. Hospitalized Treatment of Ailment

# 4.3.1. Estimated persons/Cases of hospitalisation (excluding childbirth)

The proportion of persons treated as in-patient, defined as the ratio of the estimated number of cases of admission to hospital as in-patient during a 365-day period to the total estimated population, has been shown in 4.3.1. However, in computation of this, cases of admission to hospital for childbirth are excluded.

The total number of persons hospitalized for ailments (excluding childbirth) was about 3.69 lakhs, Out of which, males constituted 53.66% in comparison to 45.99% females. Out of total hospitalized persons in Delhi, only 2.58% cases were reported in rural whereas, 97.42% cases were reported in urban. The rate of hospitalisation cases (excluding childbirth) per lakh population is reported as 2833. This rate was 2841 for male population as compared to 2804 for female population in Delhi.

S. No.	Estimated No. of cases of hospitalisation (During last 365 days)					
	Item	Male	Female	All		
Estimated	Rural	45	50	95		
Number ('00') of	Urban	1934	1646	3593		
hospitalisation cases	All	1979	1696	3688		
	Rural	2486	2151	4637		
Estimated Persons ('00')	Urban	67174	58340	125552		
	All	69660	60491	130188		
	Rural	1810	2325	2049		
Rate of hospitalisation (per lakh population)	Urban	2879	2821	2862		
	All	2841	2804	2833		

Statement 4.3.1: Distribution of estimated cases of hospitalisation by sector and sex (excluding childbirth)

(See Table 1 & 12 of Annexure)

#### 4.3.2. Proportion of persons treated as in-patient by age-group and sector

The detailed gender wise and rural-urban variation in proportion of persons treated as inpatient per thousand population is shown in Statement 4.3.2. It is reported that 28 persons per thousand population in Delhi are hospitalized. The highest proportion of hospitalized persons per thousand is reported as 120 for the persons in the age group of 60 and above years followed by 33 persons in the age group of 45-59 years. The lowest proportion of hospitalized persons per thousand has been reported as 19 persons in the age group of 30-44 years.

		Cases of hospitalisation (in 365 days) per 1000 population							
Sector	Gender						60&		
		0-4	5-14	15-29	30-44	45-59	Above	All	
Rural	Male	99	27	16	0	9	171	18	
	Female	32	0	13	17	16	153	23	
	All	55	19	15	9	12	158	20	
Urban	Male	41	29	29	13	29	96	29	
	Female	9	12	18	26	40	145	28	
	All	26	22	24	19	34	119	29	
All	Male	42	29	29	12	28	97	28	
	Female	10	12	18	26	39	145	28	
	All	27	22	24	19	33	120	28	

Statement 4.3.2: Proportion of persons treated as in-patient (excluding childbirth) by age group and sector

(See Table 1 & 12 of Annexure)

## 4.3.3. Break-up by quintile class of household expenditure

Statement 4.3.3 shows share of different quintile class of household expenditure in gender wise proportion of hospitalisation cases separately for rural and urban Delhi. The highest proportion of hospitalisation cases are reported among the households in third quintile class.

Statement 4.3.3: Percentage break-up of hospitalisation cases in Delhi by quintile class
of household expenditure, separately for each sector and gender

Quintile	Percentage of Hospitalisation cases								
class of	Rural			Urban			All		
UMPCE	Male	Female	All	Male	Female	All	Male	Female	All
1 <sup>st</sup>	2.22	0.00	1.05	20.27	19.56	19.87	19.86	18.99	19.39
2 <sup>nd</sup>	2.22	12.00	7.37	17.06	22.36	19.43	16.73	21.99	19.12
3 <sup>rd</sup>	33.33	62.00	47.37	28.54	26.31	27.58	28.65	27.36	28.12
4 <sup>th</sup>	28.89	6.00	16.84	14.32	13.37	13.83	14.65	13.15	13.88
5 <sup>th</sup>	33.33	22.00	27.37	19.80	18.41	19.29	20.11	18.46	19.50
All	100	100	100	100	100	100	100	100	100

(See Table 13 of Annexure)

### **4.3.4.** In-patient hospitalisation cases (excluding childbirth): Nature of ailment, Type of Hospital, Source of finance, etc.

**Break-up by ailment category:** In recording information on ailment for which people had been hospitalized during the last 365 days, the same nature-of-ailment classification was adopted, as was used for ailments that people reported in response to the question on whether they had suffered from any ailment during the last 15 days. The Statement 4.3.4 is condensed into eleven broad categories, namely, (i) Infections (ii) Cardio-vascular (iii) Gastrointestinal (iv) Respiratory (v) Genito-urinary (vi) Musculo-skeletal (vii) Psychiatric/neurological (viii) Eye (ix) Obstetric and neo-natal (x) Injuries and (xi) Others to show the percentage distribution of ailments for hospitalisation cases by broad ailment category.

Statement 4.3.4 gives gender wise percentage break-up of hospitalisation cases by category of ailment for which the patient was hospitalized, separately for each sector. The highest proportion of hospitalisation cases i.e. 29.8% is reported in the category of Infections (including fevers, jaundice, HIV/AIDS, diarrhoea etc.), followed by 11.7% Cardio Vascular and 11.3% Gastro-Intestinal cases.

Allmont		Rural			Urban			All	
Ailment	Male	Female	All	Male	Female	All	Male	Female	All
Infections	47.4	43.5	45.3	30.3	28.0	29.4	30.7	28.5	29.8
Cardio-vascular	9.9	7.3	8.6	9.8	14.2	11.8	9.8	14.0	11.7
Gastro-intestinal	8.6	9.1	8.8	9.1	13.9	11.3	9.1	13.8	11.3
Genito-urinary	14.1	1.5	7.5	16.4	2.7	10.1	16.4	2.7	10.1
Musculo-skeletal	7.8	0.7	4.0	4.8	11.8	8.0	4.9	11.5	7.9
Injuries	8.8	5.0	6.8	10.3	3.3	7.1	10.3	3.3	7.0
Psychiatric/neurological	0.0	0.0	0.0	7.2	2.5	5.0	7.0	2.4	4.9
Respiratory	0.0	0.0	0.0	5.3	4.7	5.0	5.2	4.5	4.9
Eye	0.0	7.9	4.2	1.6	4.4	2.9	1.6	4.5	2.9
Obstetric and neo-natal	0.0	9.0	4.8	0.0	6.1	2.8	0.0	6.2	2.9
Others	3.4	16.1	10.1	5.2	8.4	6.6	5.1	8.6	6.7
All	100	100	100	100	100	100	100	100	100

Statement 4.3.4: Percentage break-up of ailments for hospitalisation cases

(See Table 14 of Annexure)

#### 4.3.5. Break-up of hospitalisation cases by type of medical institutions

Statement 4.3.5 shows the break-up of hospitalisation cases by type of hospitals, Government/Public hospitals, Charitable/NGO/trust-run hospitals and Private hospitals. It is

reported that the highest percentage of hospitalisation cases i.e. 50.0% are treated in Private hospitals followed by 47.8% in Government/Public hospitals.

Statement 4.3.5: Percentage break-up of hospitalisation cases by type of medical institutions

Type of Hegnitel	% Share of Hospitalisation cases						
Type of Hospital	Rural	Urban	All				
Private Hospital	64.2	49.6	50.0				
Government/Public hospital	35.8	48.2	47.8				
Charitable/trust/NGO run hospital	0.0	2.2	2.1				
All	100	100	100				

(See Table 15 of Annexure)

#### 4.3.6. Break-up of hospitalisation cases by major source of financing of expenditure

Households having persons who had been admitted to hospital during the last 365 days were asked about the major source of financing the hospitalisation expenses. The responses were classified into five categories, namely, (i) Household income/savings (ii) Borrowings (iii) Sale of physical assets (iv) Contribution from friends and relatives and (v) Other sources. Statement 4.3.6 shows the sector wise estimated percentage break-up of hospitalisation cases by major source of finance of hospitalisation expenditure. In most of the hospitalisation cases (excluding childbirth), the highest proportion of expenses 90.5% were financed by the households from their own income/savings followed by 5% cases where expenditure has been financed through borrowings by the households. At the same time, in 2.4% cases the expenditure was financed through sale of physical assets by the households.

### Statement 4.3.6: Percentage break-up of hospitalisation cases by major source of finance of expenses

	Percenta	ge of Hospitalis	sation cases whe	ere expenses	s were financ	ed from
Sector	Household income/ savings	Borrowings	Contribution from friends and relatives	Sale of physical assets	Other sources	All
Rural	97.9	0.0	2.1	0.0	0.0	100
Urban	90.3	5.2	0.9	2.5	0.4	100
All	90.5	5.0	1.0	2.4	0.4	100

(See Table 16 of Annexure)

#### 4.3.7. Population covered by health insurance

For every member of each surveyed household, it was ascertained whether the person was covered by any scheme for health expenditure support. If so, the broad category of scheme was also recorded. The categories were: Government-sponsored (e.g. RSBY, Arogyasri, etc.), Government/PSU as an employer (e.g. CGHS, reimbursement from Government etc.), employer-supported health protection other than Government/PSU (e.g. ESIC), insurance arranged by household with insurance companies, and other schemes.

Statement 4.3.7 shows the percentage break-up of rural and urban population by type of health insurance coverage, including those not covered at all. It is reported that out of total population, 9.5% persons are covered under health insurance arranged by the households, 8.8% persons have been provided health insurance cover by Government/PSU as an employer, whereas 5.5% persons are covered by the Employer supported health protection (other than Government/PSU).

Statement 4.3.7: Percentage	distribution	of persons	by coverage	of scheme of health
insurance				

			Percentag	ge of persons Cover	ed by		
Sector	Percentage of persons not covered	Government sponsored insurance scheme	Govern- ment/ PSU as an employer	Employer supported health protection (Other than Government / PSU)	Arranged by household with insurance companies	Others	All
Rural	50.9	0.0	33.7	8.9	6.3	0.1	100
Urban	75.0	1.3	7.8	5.4	9.6	0.9	100
All	74.1	1.3	8.8	5.5	9.5	0.9	100

(See Table 4 of Annexure)

#### 4.3.8. Expenditure on hospitalisation

Average medical expenditure during stay in hospital and by type of hospital: Statement 4.3.8 and Fig. 4 show the average medical expenditure incurred during stay at hospital per case of hospitalisation (excluding childbirth), separately for Government/Public hospitals, Private hospitals, and all hospitals, including the Charitable/NGO/trust-run types. Medical expenditure, in a case of hospitalisation, was calculated including bed charges, doctor's/surgeon's fees, total amount paid for medicines, diagnostic tests, attendant charges,

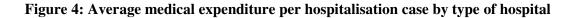
physiotherapy, personal medical appliances, and blood, oxygen, etc. during stay at the hospital (within the reference period of last 365 days) - whether made available by the hospital or procured from outside. Expenses on transportation of the patient to or from the hospital were excluded, and so was expenditure on food.

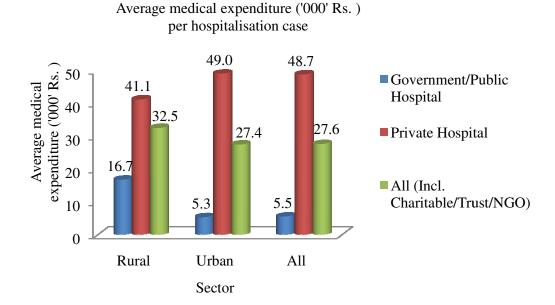
Statement 4.3.8: Average medical expenditure per hospitalization case (excluding childbirth) by type of hospital

T	Average medical expenditure (Rs.) per case								
Type of hospital		Rural			Urban			All	
nospital	Male	Female	All	Male	Female	All	Male	Female	All
Government /Public	47058	1907	16728	6267	3703	5307	6676	3641	5525
Private	43962	37637	41119	66707	34386	48972	65795	34476	48712
All (Incl. Charitable /Trust/NGO)	44726	21527	32470	32073	22099	27423	32360	22082	27553

(See Table 17 of Annexure)

The average medical expenditure incurred per hospitalisation case (excluding childbirth) is Rs. 27553/- however, this expenditure was Rs. 5525/- in Government/Public hospitals as compared to Rs. 48712/- incurred in Private hospitals.





#### 4.3.9. Average total expenditure per hospitalisation case excluding childbirth

Statement 4.3.9 gives the estimates of average medical expenditure and average total expenditure (including other expenses) incurred per hospitalized case of treatment during the reference period .The statement provides estimates for treatment of male and female patients in the rural and urban areas of Delhi. The average medical expenditure in Delhi per hospitalisation case is Rs. 27553/-. It is seen that, on an average, higher amount on medical expenditure was spent for treatment per hospitalized case by people in the rural (Rs. 32470/-) than in the urban (Rs. 27423/-). The statement also indicates the presence of a distinct gender bias in respect of expenditure incurred per hospitalisation (excluding childbirth). When average other expenses like conveyance etc. is added to average medical expenditure, it can be seen that average total expenditure comes to Rs. 30577/-.

Statement 4.3.9: Average medical expenditure and non-medical expenditure (Rs.) on
account of hospitalisation (excluding childbirth) by gender and sector

Sector	stay at hospital (Rs.)				rage of ot es on acco talisation	ount of	Average Expenditure (Rs.)			
	Male	Female	All	Male	Female	All	Male	Female	All	
Rural	44726	21527	32470	5274	3907	4552	49999	25434	36978	
Urban	32073	22099	27423	3185	2776	2988	35259	24875	30408	
All	32360	22082	27553	3233	2809	3029	35592	24891	30577	

### 4.3.10. Average medical expenditure per hospitalisation case by ailment and by type of hospital

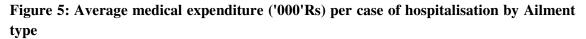
Statement 4.3.10 shows, separately for Public, Private and All hospitals, the average medical expenditure per case of hospitalisation for selected (broad) categories of ailments. The highest average medical expenditure has been reported in Cardio-Vascular ailments requiring hospitalisation followed by Cancer and Endocrine ailments (including diabetes, thyroid etc.).

Statement 4.3.10: Average medical expenditure (Rs.) during hospital stay per hospitalisation case for selected categories of ailments

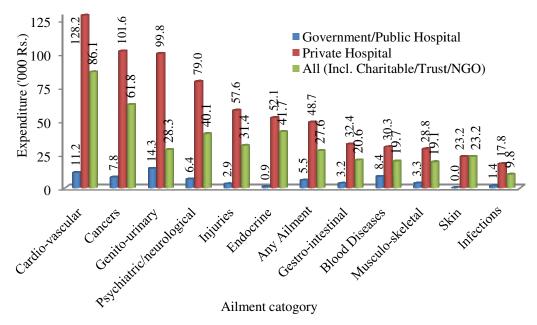
Category of Ailment	Average medical expenditure (Rs.) per case of hospitalisation						
Category of Amment	Government/ Public	Private	All (Incl.Charitable/ NGO/trust-run)				
Cardio-vascular	11167	128242	86129				
Cancers	7765	101601	61764				
Endocrine	878	52061	41673				
Psychiatric/neurological	6417	78978	40089				
Injuries	2865	57568	31372				
Genito-urinary	14303	99836	28264				
Skin	0	23163	23163				
Gestro-intestinal	3220	32409	20557				
Blood Diseases	8356	30302	19661				
Musculo-skeletal	3305	28785	19124				
Infections	1424	17801	9845				
Any Ailment	5525	48712	27553				

(See Table 17 of Annexure)

Fig. 5 shows the estimates of average medical expenditure for eleven categories of ailments.







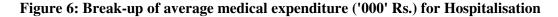
### 4.3.11. Break-up of average medical expenditure per hospitalisation case by components of medical expenditure and by type of hospital

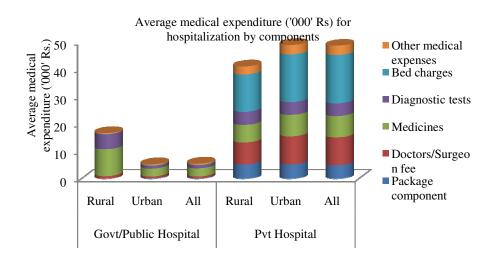
The break-up of average medical expenditure per case across public and private hospitals for different components are shown in Statement 4.3.11 and Fig. 6. The top three major components of average medical expenditure per hospitalisation case in Private hospitals of Delhi are reported as bed charges followed by doctor's fee and medicines. Substantial Package components are also reported in case of Private hospitals. However, in Government/Public hospitals, the major components per hospitalisation case are medicines followed by diagnostic tests.

Average medical expenses (Rs.) during hospital stay **Component** of per case of hospitalisation in medical **Government/Public hospital Private hospital** expenditure Urban Rural Urban All Rural All Package component **Doctors/Surgeon fee** Medicines **Diagnostic tests Bed charges** Other medical expenses All

Statement 4.3.11: Break-up of average medical expenditure (Rs.) for hospitalisation

(See Table 18 of Annexure: It gives the break-up of average medical expenditure per case of hospitalisation by its major components, separately for Public hospitals, Private hospitals and All (including Charitable/NGO/trust-run) hospitals in rural and urban sectors).





### 4.3.12. Trends in hospitalisation indicators

A comparison of key indicators of NSS 75<sup>th</sup> round with that of NSS 71<sup>st</sup> round is presented in Statement 4.3.12. The proportion of persons who availed treatment as in-patient in hospital registered a marginal increase during 2018 as compared to that of 2014 for urban sector. The role of Government institutions in the treatment of hospitalized cases has increased from 18.1% during 2014 to 35.8% in 2018 in rural area, whereas in urban it decreased from 51.4% to 48.2 % during the same period.

		NSS 71 <sup>st</sup> Round				NSS 75 <sup>th</sup> Round				
Туре	Item	Delhi		All India		De	elhi	All India		
		Rural	Urban	Rural	Urban	Rural	Urban	Rural	Urban	
(%) of	Male	3.9	2.8	3.4	4.2	1.8	2.9	2.6	3.4	
Persons	Female	6.0	2.4	3.6	4.6	2.3	2.8	2.7	3.5	
Hospitalized	All	2.8	2.6	3.5	4.4	2.0	2.9	2.6	3.4	
Cases of	Govern-	18.1	51.4	41.9	32.0	35.8	48.2	45.7	35.3	
Hospitali-	ment	10.1	51.4	,1.9	52.0	55.0	10.2	13.7	55.5	
sation (%)	Others	81.9	49.6	58.1	68.0	64.2	51.8	54.3	64.7	

### Statement 4.3.12: Trends in hospitalisation indicators

#### 4.4. Maternity and childbirth

#### 4.4.1. Break-up of childbirths by place

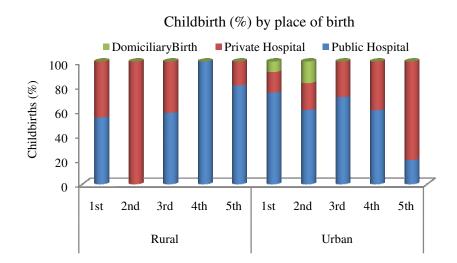
#### Statement 4.4.1: Percentage break up of childbirths by place

Genter		Perce	ntage of	f childt	oirth in	quintile	class	
Sector	Place of C	Place of Childbirth			3 <sup>rd</sup>	4 <sup>th</sup>	5 <sup>th</sup>	All
	Institutional birth	Public hospital	54.3	0.0	58.1	100	80.5	61.2
	Institutional offur	Private hospital	45.7	100.0	41.9	0.0	19.5	38.8
Rural	Domiciliary	Skilled person	0.0	0.0	0.0	0.0	0.0	0.0
Kurai	birth	Unskilled person	0.0	0.0	0.0	0.0	0.0	0.0
	All	100	100	100	100	100	100	
	Institutional birth	Public hospital	74.5	60.4	70.9	60.2	19.6	57.5
	Institutional on ui	Private hospital	17.0	22.0	29.1	39.8	80.4	35.9
Urban	Domiciliary	Skilled person	3.5	10.3	0.0	0.0	0.0	3.5
UIDali	birth	Unskilled person	5.1	7.4	0.0	0.0	0.0	3.2
	All		100	100	100	100	100	100

(See Table 21 of Annexure)

Statement 4.4.1 and Fig. 7 show the percentage break-up of childbirths (including normal, caesarean and other type of delivery) by type of hospital, separately for different quintile class of household expenditure of rural and urban population. The highest proportion of institutional childbirths in Delhi is reported in Government/Public hospitals i.e. 61.2% in rural and 57.5% in Urban.

### Figure 7: Break-up of childbirths by place for different quintile class of household expenditure of population



#### 4.4.2. Pre-natal and Post-natal care

Statement 4.4.2: Percentages of pregnant Women receiving Pre-natal care and Post-natal care

	Percentage of Women receiving care								
Age group	Ru	ıral	Ur	ban	A	All			
	Pre-natal	Post-natal	Pre-natal	Post-natal	Pre-natal	Post-natal			
Below 20	0	0	100	0	100	0			
20-24	100	100	55	63	57	65			
25-29	100	100	100	91	100	91			
30-34	100	100	96	91	96	91			
35-39	100	100	100	90	100	91			
40-44	0	0	0	0	0	0			
45 and Above	0	0	0	0	0	0			
All	100	100	87	83	88	84			

(See Table 22 of Annexure)

Pregnancy care consists of prenatal (before birth) and postpartum (after birth) healthcare for expectant mothers. Prenatal care helps decrease risks during pregnancy and increases the chance of a safe and healthy delivery. Regular prenatal visits can help doctor monitor pregnancy and identify any problems or complications before they become serious. While most attention to pregnancy care focuses on the nine months of pregnancy, postpartum care is important, too. The postpartum period lasts six to eight weeks, beginning right after the baby is born. Statement 4.4.2 shows the percentages of women in different age-groups who received pre-natal and post-natal care during pregnancy and after childbirth. It is reported that 88% of the pregnant women received pre-natal care whereas 84% women received post- natal care.

#### 4.4.3. Average total expenditure on childbirths

The statement 4.4.3 reveals sector wise average expenditure incurred per childbirth for rural and urban separately. The expenditure incurred for institutional births and domiciliary births have also been shown separately. The average medical expenditure incurred per childbirth is Rs. 14916/-. However, this expenditure in case of institutional births is Rs. 16017/- in comparison to Rs. 2271/- for domiciliary births.

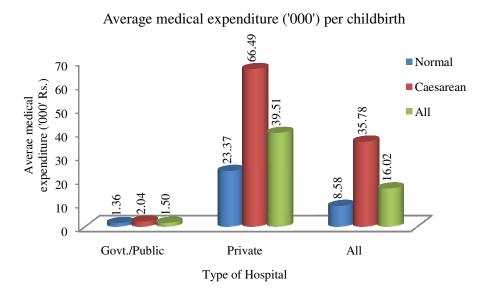
### Statement 4.4.3: Average total expenditure (Rs.) per childbirth (including Institutional and Domiciliary birth)

	Average total expenditure (Rs.) per childbirth				
	Institutional	All			
Sector	Birth	Birth	All		
Rural	15502	-	15502		
Urban	16040	2271	14893		
All	16017	2271	14916		

#### 4.4.4. Average total expenditure on institutional childbirths by type of hospital

The statement 4.4.4 reveals sector wise average expenditure incurred on childbirth in Private hospitals and Government/Public hospitals for normal and caesarean section delivery. It is reported that average expenditure on institutional childbirth (including normal and caesarean) is Rs. 16017/- in Delhi. However, in Government/Public hospitals, the average expenditure on child birth is Rs. 1502/- whereas it was reported as Rs. 39507/- in Private hospitals (including Charitable/NGO/Trust).

### Figure 8: Average total expenditure ('000' Rs.) per normal and caesarean delivery in Government and Private hospitals



Statement 4.4.4: Average total expenditure on childbirth in Private and Public hospitals, separately for normal and caesarean section delivery

Sector	Type of Hospital	on h	Average total expenditure (Rs.) on hospital childbirth Type of Delivery			
		Normal	Caesarean	All		
	Government/Public hospitals	3315	492	2667		
Rural	Private hospitals (including					
Kurai	Charitable/NGO/Trust)	22151	50889	41529		
	All	6564	30305	15502		
	Government/Public hospitals	1267	2120	1446		
Unhan	Private hospitals (including					
Urban	Charitable/NGO/Trust)	23395	67595	39430		
	All	8651	36125	16040		
	Government/Public hospitals	1359	2038	1502		
All	Private hospitals (including					
	Charitable/NGO/Trust)	23372	66488	39507		
	All	8575	35783	16017		

#### 4.4.5. Proportion of childbirths receiving free of cost surgery

Statement 4.4.5 shows the percentage of Caesarean childbirths receiving surgery free of cost by type of hospital. Out of total childbirth, free of cost surgery was reported to be availed in 49.9% cases. In Private hospital, the proportion of such cases of childbirth was only 2.5%.

	Pe	Percentage of surgeries received free of cost					
Sector	Government/ Public Hospitals	Private Hospitals	Charitable/ NGO/Trust- run Hospitals	All			
Rural	100	0.0	0.0	42.9			
Urban	100	2.5	0.0	50.3			
All	100	2.5	0.0	49.9			

Statement 4.4.5: Percentage of childbirths receiving surgery free of cost by type of hospital

(See Table 23 of Annexure: shows the percentage of hospital childbirths receiving surgery for all types of childbirth, separately for different types of hospital, as well as the percentage break-up of surgery cases by whether surgery was received free, on partial payment, or on full payment).

### 4.5. Immunisation of Children

Immunisation is the process whereby a person is made immune or resistant to an infectious disease, typically by the administration of a vaccine. Vaccines stimulate the body's own immune system to protect the person against subsequent infection or disease. Immunisation is a proven tool for controlling and eliminating life-threatening infectious diseases and is estimated to avert between 2 and 3 million deaths each year. It does not require any major life style change. Immunisation programme is one of the key interventions for protection of children from life threatening conditions, which are preventable.

### 4.5.1. Children 0-5 years receiving/received any vaccine and average expenditure on immunisation

With a view to have an overall idea on the immunisation scenario, rate of immunisation and some related indicators have been computed on the basis of the responses received from the informants. The percentages of rural and urban boys and girls in the age - group 0-5 years receiving/received any vaccine and average expenditure on immunisation is shown in Statement 4.5.1.

Statement 4.5.1: Percentages of children aged 0-5 years receiving/received any vaccine
and average expenditure (Rs.) on immunisation

	Percentages of Children aged 0-5 years							
Gender	0	/received any munisation	type of	Average expenditure on immunisation (Rs.)				
	Rural	Urban	All	Rural	Urban	All		
Boys	93	92	92	911	396	405		
Girls	91	87	87	152	394	385		
All	92	90	90	423	395	396		

Overall 90% children in the age group of 0-5 years are reported to be receiving/received immunisation. It has been observed that rate of immunisation in Girls is slightly lower than that of Boys. The average expenditure on immunisation per child is Rs. 396/-.

#### 4.5.2. Main source of Immunisation

Statement 4.5.2 shows the type of health facility from which the child aged 0-5 years has received most of the immunisation vaccines by type of health facility. The categories of health facility were: (i) HSC/Anganwadi centre (ii) PHC/Dispensary/CHC/Mobile medical unit (iii) Government/Public hospital (iv) Charitable or trust/NGO-run hospital (v) Private hospital, and (vi) Private Doctor/Clinic.

It is reported that 82.7% of the children in the age group of 0-5 years received/are receiving immunisation from Government health setups whereas, the proportion of vaccination being administered to the children in this age group by Private Doctors/Private hospital is 14.8%.

	Pe	Percentage of Children for whom the main source of immunisation							
Sector	HSC/ Angan- wadi Centre	PHC/ Dispensary/CHC/ mobile medical unit	Govt./ Public hospital	Charitable/ trust/NGO run hospital	Private hospital	Private Doctor/ Clinic	All		
Rural	52.8	24.5	8.2	0	5.6	8.9	100		
Urban	19.4	40.1	23.1	2.6	6.4	8.4	100		
All	20.2	39.7	22.7	2.5	6.4	8.4	100		

Statement 4.5.2: Percentage break-up of children aged 0-5 years who had received any immunisation by category of health facility

(See Table 25 of Annexure: reveals the distribution of rural and urban children who have received any immunisation by type of health facility reported as the main source of immunisation).

#### 4.6. Condition of the Aged Person

Statement 4.6.1 shows gender wise proportion of aged person out of total population and average number of aged persons per household for rural and urban separately. Out of the total estimated population of 130.19 lakhs in Delhi, the survey estimated the number of aged persons (60 and above) as 6.32 lakhs, which means that they count for 4.85% in the total population. Out of the aged persons, 6.15 lakhs (97.39%) were residing in the urban area and remaining 0.17 lakhs (2.61 %) were in the rural area. Gender wise distribution of aged persons revealed that male accounted for 51.92% and share of female population was

48.08%. In Delhi, on an average there are about 2 aged persons per 10 households.

Statement 4.6.1:	Percentage of Aged Person (60+) and average number of aged persons
per household	

Sector	Percenta	ige of aged person to	Average Number of aged persons	
	Male	Female	All	per household
Rural	1.65	5.76	3.56	0.2
Urban	4.82	4.99	4.90	0.2
All	4.71	5.02	4.85	0.2

(See Table 1 & 27 of Annexure)

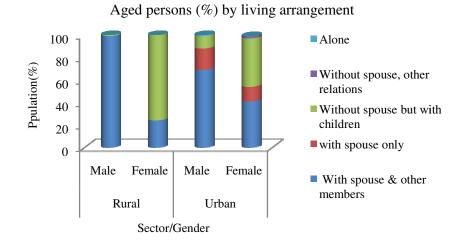
### 4.6.2. Living arrangement

Statement 4.6.2 and Fig. 9 shows gender wise break-up of persons aged 60 or more by whom they are living with: alone, with spouse and children, with spouse only, etc. It is reported that 55% of the aged person are living with spouse and other members of the family, 27% are living without spouse but with children whereas only 16% of aged persons are living with spouse only.

		Percentage of persons aged 60+ living							
Sector	Gender	With spouse & other members	With spouse only	Without spouse but with children	Without spouse, other relations	Alone	All		
	Male	99	0	1	0	0	100		
Rural	Female	24	0	76	0	0	100		
	All	43	0	57	0	0	100		
	Male	69	19	11	0	1	100		
Urban	Female	41	13	43	2	0	100		
	All	56	16	26	1	1	100		
	Male	69	19	11	0	1	100		
All	Female	40	13	45	2	0	100		
	All	55	16	27	1	1	100		

Statement 4.6.2: Percentage break-up of aged persons by living arrangement





4.6.3. Physical mobility of the persons aged 60 and above

Statement 4.6.3 and Fig. 10 show gender wise percentage of aged persons in different age groups from 60 years upwards at different levels of physical mobility.

Mahilla Catalan	% of ]	Persons of t	he category	present in th	e age-gro	up		
Mobility Category	60-64	65-69	70-74	75-79	80+	All		
Male								
Physically mobile	97.4	88.2	95.5	35.9	97.5	92.7		
Confined to bed	0.3	0.2	0.0	4.5	0.0	0.3		
Confined to home	1.6	11.3	4.5	59.6	0.0	6.5		
Wheelchair-bound	0.1	0.0	0.0	0.0	0.0	0.0		
All	100	100	100	100	100	100		
	<u>.</u>	Fema	ıle					
Physically mobile	85.4	80.9	91.5	77.8	68.8	83.6		
Confined to bed	0.1	0.1	3.1	0.0	27.6	1.7		
Confined to home	12.5	16.7	5.4	22.2	2.4	12.9		
Wheelchair-bound	0.0	0.0	0.0	0.0	1.2	0.1		
All	100	100	100	100	100	100		
		All						
Physically mobile	91.1	84.8	94.4	57.4	79.0	88.3		
Confined to bed	0.2	0.2	0.8	2.2	17.8	1.0		
Confined to home	7.3	13.8	4.7	40.4	1.5	9.6		
Wheelchair-bound	0.0	0.0	0.0	0.0	0.8	0.0		
All	100	100	100	100	100	100		

Statement 4.6.3: P	ercentage break-	un of aged nerso	ns by physical mobility
Statement 4.0.5.1	ci contago bi can	up of ageu perso	ns by physical mobility

(See Table 27 of Annexure)

It is reported that 88.3% of the aged person are physically mobile, 9.6% are confined to home and only 1% of the aged persons in Delhi are confined to bed. Statement reveals that male aged persons are physically more mobile as compared to females.

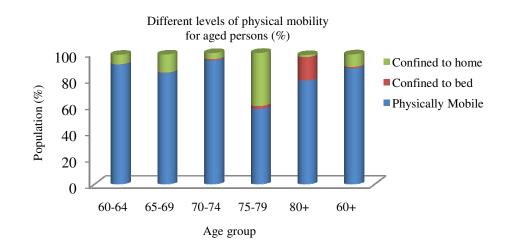


Figure 10: Percentage of aged persons at different levels of physical mobility

#### 4.6.4. Economic status

Economic status reveals the problems associated with the day to day maintenance of livelihood of elderly persons. The distribution of aged persons by state of economic independence is given in Statement 4.6.4 for each gender, separately for rural and urban sector.

Statement 4.6.4: Percentage distribution of aged persons by state of economic independence

		Status of economic independence					
S. No.	Sector/	Not	Partially	Fully	All		
5. 110.	Gender	dependent on	dependent on	dependent on	(incl. n.r.)		
		Others	Others	Others	(111(1, 11,1,)		
	Male	47	32	22	100		
Rural	Female	2	69	28	100		
	All	13	60	27	100		
	Male	53	32	14	100		
Urban	Female	23	30	45	100		
	All	39	31	29	100		
	Male	53	32	14	100		
All	Female	22	31	45	100		
	All	39	32	29	100		

It is reported that 39% of the aged persons are economically not dependent on Others, whereas 32% are partially dependent on Others and 29% of the aged persons in Delhi are fully dependent on Others.

#### 4.6.5. Economic support providers

It has been observed that a large proportion of the elderly are economically dependent on others for their livelihood. It is, therefore, pertinent to know who is providing economic support to these elderly persons. Such information was collected in the survey and the sector wise results are presented in Statement 4.6.5 separately for each sex. It is reported that out of dependent aged persons, 21% aged persons are economically dependent on their spouse whereas majority of aged persons i.e. 76% are economically dependent on their own children.

Statement 4.6.5: Percentage distribution of economic dependent aged persons by category of persons financially supporting

Sector	Gender	Per	Percentage of Economically dependent aged Persons financially supported by									
	Genuer	Spouse	Own children	Grand children	Others	All						
	Male	0	82	0	18	100						
Rural	Female	12	88	0	0	100						
	All	10	86	0	3	100						
	Male	10	86	3	1	100						
Urban	Female	29	68	0	3	100						
	All	21	75	1	2	100						
	Male	10	86	3	1	100						
All	Female	28	69	0	3	100						
	All	21	76	1	2	100						

(See Table 29 of Annexure)

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# Annexure

<b>A</b>		D 1			TT 1		A 11			
Age		Rural			Urban			All		
Group (Years)	Male	Female	All	Male	Female	All	Male	Female	All	
0-4	81	157	238	4783	4214	8997	4865	4371	9235	
5-9	118	57	175	4696	6190	10891	4814	6247	11066	
10-14	283	115	397	6518	3264	9782	6801	3379	10179	
5-14	401	171	572	11214	9454	20673	11615	9625	21246	
15-19	193	107	300	5299	4545	9845	5492	4653	10145	
20-24	317	376	693	6219	5781	12000	6536	6157	12693	
25-29	238	73	312	7584	7593	15177	7822	7666	15488	
15-29	748	557	1305	19102	17919	37021	19850	18476	38326	
30-34	257	349	606	7725	5544	13272	7982	5893	13878	
35-39	302	93	396	6274	5051	11325	6577	5145	11721	
40-44	92	271	363	4557	4174	8760	4649	4445	9122	
30-44	651	714	1365	18556	14769	33357	19208	15482	34721	
45-49	403	157	560	3858	3111	6969	4261	3268	7529	
50-59	159	271	431	6422	5959	12381	6581	6230	12812	
45-59	563	428	991	10280	9070	19350	10843	9498	20341	
60-64	9	14	23	1630	1771	3401	1638	1785	3424	
65-69	9	97	106	891	689	1580	900	786	1686	
60-69	18	111	129	2521	2460	4981	2538	2571	5110	
70-74	20	6	26	540	207	748	560	213	774	
75-79	3	7	10	95	96	190	98	103	200	
60-79	41	124	165	3156	2763	5919	3197	2887	6084	
70 &above	23	13	36	718	454	1172	742	467	1209	
60 & above	41	124	165	3239	2914	6153	3280	3038	6318	
All	2486	2151	4637	67174	58340	125552	69660	60491	130188	

 Table 1: Sector and Gender wise distribution of population ('00') by age group

### Table 2R: Percentage distribution of households by major source of drinking water for (i) Each quintile class of UMPCE and (ii) Each Social group

Quintile					Major sou	rce of drink	ing water				
class of				Improved sou	irce			Not	[mproved	source	All
UMPCE	Bottled	Piped	Piped	Tubewell	Protected	Protected	Community	Tanker	Others	All	(incl.
/Social	Water	water in	water	/borewell	well	spring/	RO plant	/truck/		unprotected	n.r.)
group		dwelling	outside	(inside/	(inside/	pond etc.		drum		source	
		/premises		outside	outside	for		(supplied		(river/canal,	
		/yard		premises	premises	drinking		through		spring,	
						purpose		container)		pond, well	
										etc.)	
	1	Quintile class of UMPCE								-	
1 <sup>st</sup>	0.0	55.6	0.0	0.0	0.0	0.0	0.0	44.4	0.0	0.0	100
$2^{nd}$	0.1	97.0	0.0	0.0	0.0	0.0	0.0	2.9	0.0	0.0	100
3 <sup>rd</sup>	5.9	79.3	0.0	11.5	0.0	0.0	0.0	3.3	0.0	0.0	100
4 <sup>th</sup>	55.2	43.6	0.0	0.9	0.0	0.0	0.0	0.3	0.0	0.0	100
5 <sup>th</sup>	66.2`	22.4	0.0	8.7	0.0	0.0	2.7	0.0	0.0	0.0	100
All	27.2	57.1	0.0	3.6	0.0	0.0	0.5	11.6	0.0	0.0	100
					Social	group					
ST	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
SC	5.9	81.3	0.0	0.0	0.0	0.0	0.0	12.9	0.0	0.0	100
OBC	16.4	66.9	0.0	2.6	0.0	0.0	0.0	14.0	0.0	0.0	100
Others	81.9	5.6	0.0	9.3	0.0	0.0	3.2	0.0	0.0	0.0	100
All	27.2	57.1	0.0	3.6	0.0	0.0	0.5	11.6	0.0	0.0	100

## Table 2U: Percentage distribution of households by major source of drinking water for (i) Each quintile class of UMPCE and(ii) Each social group

Quintile					Major sou	arce of drinking	water				
class of				Improved s	ource			Not	Improved	source	All
UMPCE	Bottle	Piped	Piped	Tubewell	Protected	Protected	Community	Tanker	Others	All	(incl.n.
/social	d	water in	water	/borewell	well	spring/	RO plant	/truck/		unprotect	r.)
group	Water	dwelling	outside	(inside/	(inside/	pond etc. for		drum		ed source	
		/premises		outside	outside	drinking		(suppli		(river/can	
		/yard		premises	premises	purpose		ed		al,	
								throug		spring,	
								h		pond,	
								contain		well etc.)	
								er)			
at	1					of UMPCE	[	1		T	
1 <sup>st</sup>	0.2	57.8	27.3	1.3	0	0	0.9	12.5	0	0	100
2 <sup>nd</sup>	1.1	74.9	12.1	5.3	0	0	0	6.5	0	0	100
3 <sup>rd</sup>	0.1	68.8	13.3	10.9	0	0	6.3	0.6	0	0	100
4 <sup>th</sup>	0.7	79	4.7	4.4	0	0	10.9	0.4	0	0	100
5 <sup>th</sup>	3.5	83	2	1.5	0	0	10	0	0	0	100
All	1.3	73.9	10.6	4.6	0	0	6.3	3.3	0	0	100
					Social	group					
ST	1.2	80.5	0	12.3	0	0	0	6	0	0	100
SC	1.7	68.2	18.5	1.8	0	0	5.8	4	0	0	100
OBC	0.9	70.7	16	1.4	0	0	5.7	5.3	0	0	100
Others	1.2	77.3	5.7	6.9	0	0	6.8	2.2	0	0	100
All	1.3	73.9	10.6	4.6	0	0	6.3	3.3	0	0	100

### Table 2All: Percentage distribution of households by major source of drinking water for (i) Each quintile class of UMPCE and (ii) Each social group

Quintile					Majo	or source of	drinking water				
class of				Improved s	ource			Not In	proved s	source	All
UMPCE /social group	Bottled Water	Piped water in dwelling/ premises/ yard	Piped water outside	Tubewell/ borewell (inside/ outside premises	Protected well (inside/ outside premises	Protected spring/ pond etc. for drinking purpose	Community RO plant	Tanker/truck /drum (supplied through container)	Others	All unprotected source (river/canal, spring, pond, well etc.)	(incl.n.r.)
		•	•		Quintile	e class of Ul	MPCE			,	
1 <sup>st</sup>	0.2	57.7	26.1	1.2	0	0	0.8	13.9	0	0	100
$2^{nd}$	1.1	75.6	11.7	5.1	0	0	0	6.4	0	0	100
3 <sup>rd</sup>	0.2	69	13	10.9	0	0	6.2	0.7	0	0	100
4 <sup>th</sup>	2.3	77.9	4.6	4.2	0	0	10.5	0.4	0	0	100
5 <sup>th</sup>	5.1	81.5	1.9	1.7	0	0	9.8	0	0	0	100
All	2	73.4	10.3	4.6	0	0	6.1	3.5	0	0	100
					S	locial group					
ST	1.2	80.5	0	12.3	0	0	0	6	0	0	100
SC	1.8	68.2	18.4	1.8	0	0	5.8	4.1	0	0	100
OBC	2.4	70.3	14.4	1.5	0	0	5.1	6.2	0	0	100
Others	1.9	76.6	5.6	6.9	0	0	6.7	2.2	0	0	100
All	2.0	73.4	10.3	4.6	0	0	6.1	3.5	0	0	100

		Rural			Urban		All			
Source of drinking water	Sample	Estimate	d	Sample	Estimate	d	Sample	Estimate	d	
	Households	Households	%	Households	Households	%	Households	Households	%	
Bottled Water	13	261	27.2	24	400	1.3	37	661	2.0	
Piped water in dwelling										
/premises/yard	33	548	57.1	1137	23558	73.9	1170	24106	73.4	
Piped water outside	0	0	0.0	125	3369	10.6	125	3369	10.3	
Tubewell/borewell										
(inside/outside premises	10	35	3.6	51	1477	4.6	61	1512	4.6	
Protected well (inside										
/outside premises	0	0	0.0	1	2	0.0	1	2	0.0	
Protected spring/pond etc.										
for drinking purpose	0	0	0.0	0	0	0.0	0	0	0.0	
Community RO plant	1	5	0.5	13	2006	6.3	14	2011	6.1	
Tanker/truck/drum										
(supplied through										
container)	7	111	11.6	22	1052	3.3	29	1163	3.5	
Others	0	0	0.0	0	0	0.0	0	0	0.0	
All unprotected										
source (river/canal,										
spring, pond, well etc.)	0	0	0.0	0	0	0.0	0	0	0.0	
All	64	960	100	1373	31863	100	1437	32823	100	

### Table 3: Distribution of households ('00') by main source of drinking water

### Table 4R: Percentage distribution of persons by coverage of scheme of health expenditure support for (i) each UMPCE class and (ii) each Social group

Quintile class of			Percentage distrage of scheme of	1	•			No. of persons	
UMPCE	Not	covera	age of scheme of	Covered			All	Estimated	Sample
/social group	covered	Government sponsored	Government /PSU as an	EmployerArranged byOtherssupportedhousehold			('00')	1	
		insurance scheme	employer	health protection	with insurance				
				(Other than govt./PSU)	companies				
			Quir	tile class of UM	PCE				
1 <sup>st</sup>	24.3	0.0	74.5	0.0	1.1	0.0	100	1132	77
$2^{nd}$	99.0	0.0	1.0	0.0	0.0	0.0	100	944	32
$3^{\rm rd}$	89.5	0.0	6.1	1.8	2.1	0.5	100	705	92
4 <sup>th</sup>	32.6	0.0	45.7	0.0	21.7	0.0	100	1020	71
5 <sup>th</sup>	22.5	0.0	24	48.1	5.4	0.0	100	835	74
All	50.9	0.0	33.7	8.9	6.3	0.1	100	4637	346
				Social group					
ST	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0
SC	89.8	0.0	4.6	5.6	0	0	100	228	62
OBC	51.2	0.0	41.2	0	7.5	0.1	100	3628	213
Others	38.5	0.0	7.4	51.5	2.6	0	100	781	71
All	50.9	0.0	33.7	8.9	6.3	0.1	100	4637	346

### Table 4U: Percentage distribution of persons by coverage of scheme of health expenditure support for (i) each UMPCE class and (ii) each social group

Quintile			Percentag	e distribution of pers	ons by			No. of p	ersons
class of		cov	erage of sch	eme of health expend	iture support				
UMPCE	Not covered			Covered			All	Estimated	Sample
/social		Govt.	Govt.	Employer	Arranged by	Others		('00')	
group		sponsored	/PSU as	supported health	household with				
		insurance	an	protection (Other	insurance				
		scheme	employer	than govt./PSU)	companies				
	• •			Quintile class of U	MPCE				
1 <sup>st</sup>	95.6	1.8	1.1	1.4	0.1	0.1	100	24784	1355
2 <sup>nd</sup>	89.6	0.0	2.8	5.0	2.4	0.1	100	24818	976
3 <sup>rd</sup>	84.2	0.5	5.3	1.9	4.0	4.1	100	25657	1205
4 <sup>th</sup>	66.4	1.0	15.5	5.2	11.9	0.0	100	25613	1151
5 <sup>th</sup>	38.8	3.2	14.4	13.7	29.8	0.2	100	24680	1614
All	75.0	1.3	7.8	5.4	9.6	0.9	100	125552	6301
	• •			Social group	)				
ST	49.3	0.0	1.5	0	49.3	0.0	100	524	63
SC	86.7	0.6	3.4	6.5	2.5	0.3	100	24868	991
OBC	88.6	0.2	4.8	3.0	3.2	0.1	100	28117	1445
Others	65.8	2.0	10.6	6.0	14.2	1.4	100	72042	3802
All	75.0	1.3	7.8	5.4	9.6	0.9	100	125552	6301

### Table 4All: Percentage distribution of persons by coverage of scheme of health expenditure support for (i) each UMPCE class and (ii) each social group

Quintile			Percenta	age distribution of pe	ersons by			No. of person	
class of		СС	overage of sc	heme of health expe	nditure support				
UMPCE	Not covered			Covered			All	Estimated	Sample
/social		Govt.	Govt.	Others		('00')			
group		sponsored	/PSU as	supported health	household with				
		insurance	an	protection (Other	insurance				
		scheme	employer	than govt./PSU)	companies				
				Quintile class of 1	UMPCE				
$1^{st}$	92.5	1.7	4.3	1.3	0.1	0.1	100	25917	1432
$2^{nd}$	90.0	0	2.7	4.8	2.3	0.1	100	25762	1008
3 <sup>rd</sup>	84.4	0.5	5.3	1.9	3.9	4	100	26362	1297
4 <sup>th</sup>	65.1	1	16.7	5	12.2	0	100	26633	1222
5 <sup>th</sup>	38.3	3.1	14.7	14.8	29	0.2	100	25515	1688
All	74.1	1.3	8.8	5.5	9.5	0.9	100	130188	6647
	·			Social grou	ıp				
ST	49.3	0	1.5	0	49.3	0	100	524	63
SC	86.8	0.6	3.4	6.5	2.4	0.3	100	25096	1053
OBC	84.3	0.2	9	2.7	3.7	0.1	100	31745	1658
Others	65.5	1.9	10.6	6.5	14.1	1.4	100	72823	3873
All	74.1	1.3	8.8	5.5	9.5	0.9	100	130188	6647

Table 5R: Percentage Distribution of hospitalized cases (excluding childbirth) during last365 days by duration of stay in hospital and average duration of stay in hospitalseparately for government and private hospitals and quintile class of UMPCE

Quintile		Dura	tion of stay	in hospita	1		No.	of
class of				-			Hospita	lised
UMPCE							Case	es
	< 7 days	7 days	15 days	more	All	Average	Estimated	Sample
	-	to < 15	to < 30	than 30		duration	('00')	_
		days	days	days		of stay		
			Governme	1				
$1^{st}$	100	0	0	0	100	3	1	1
$2^{nd}$	100	0	0	0	100	3.4	7	4
3 <sup>rd</sup>	100	0	0	0	100	3.5	14	7
4 <sup>th</sup>	100	0	0	0	100	4.8	3	2
5 <sup>th</sup>	29.5	9	61.5	0	100	12.2	9	3
All	82.1	2.3	15.6	0	100	5.8	34	17
			Priv	ate hospital	1			
$1^{st}$	0	0	0	0	0	0	0	0
$2^{nd}$	0	0	0	0	0	0	0	0
3 <sup>rd</sup>	87.2	12.8	0	0	100	4.4	31	10
4 <sup>th</sup>	100	0	0	0	100	3.9	13	6
5 <sup>th</sup>	49.5	50.5	0	0	100	6.5	17	5
All	79.2	20.8	0	0	100	4.9	61	21

Table 5U: Percentage Distribution of hospitalized cases (excluding childbirth) during last365 days by duration of stay in hospital and average duration of stay in hospitalseparately for government and private hospitals and quintile class of UMPCE

Quintile		Dur	ation of s	stay in hos	spital		No. of hospit	talised cases
class of	< 7 days	7 days	15	more	all	Average	Estimated	Sample
UMPCE	-	to <	days	than	(Incl.	duration	('00')	_
		15	to <	30	n.r.)	of stay		
		days	30	days				
			days					
			Gove	ernment/P	ublic hos	pital		
1 <sup>st</sup>	81.1	12.7	4.9	1.3	100	5.2	536	101
$2^{nd}$	71.5	21.6	6.1	0.8	100	6	355	56
3 <sup>rd</sup>	92.5	6.9	0.1	0.5	100	4.4	556	69
4 <sup>th</sup>	65	25.3	9.7	0	100	6	162	36
5 <sup>th</sup>	68.5	25.1	0	6.4	100	7.5	122	31
All	80.4	14.7	3.7	1.2	100	5.3	1730	293
			Ch	aritable/N	GOhospi	tal		
$1^{st}$	100	0	0	0	100	4.2	3	2
$2^{nd}$	100	0	0	0	100	3	14	2
3 <sup>rd</sup>	38	62	0	0	100	5.5	21	6
4 <sup>th</sup>	100	0	0	0	100	2	3	2
5 <sup>th</sup>	72.2	18.7	9.2	0	100	6.5	38	11
All	70.4	25.2	4.4	0	100	5.3	79	23
	1			Private	nospital	1		
1 <sup>st</sup>	80.3	9.7	9.1	0.9	100	5.5	174	31
$2^{nd}$	81.6	12.2	4.3	1.9	100	4.7	329	50
3 <sup>rd</sup>	68.7	28.5	2.9	0	100	5.1	415	75
4 <sup>th</sup>	83.5	13.4	3.1	0	100	4.4	332	88
5 <sup>th</sup>	66.9	28.1	3.5	1.5	100	6	533	185
All	74.4	20.7	4	0.9	100	5.2	1783	429

Table 5All: Percentage Distribution of hospitalized cases (excluding childbirth) during last365 days by duration of stay in hospital and average duration of stay inhospital separately for government and private hospitals and quintile class ofUMPCE

Quintile		Dur	ation of st	tay in hos	oital		No. of hospi	talised cases					
class of	< 7 days	7 days	15	more	all	Average	Estimated	Sample					
UMPCE		to < 15	days to	than 30	(Incl.	duration	('00')						
		days	< 30	days	n.r.)	of stay							
			days										
			Gove	rnment/Pu	ublic hosp	pital							
$1^{st}$													
$2^{nd}$	72	21.2	6	0.8	100	6	361	60					
3 <sup>rd</sup>	92.7	6.8	0.1	0.5	100	4.4	570	76					
4 <sup>th</sup>	65.6	24.9	9.5	0	100	6	165	38					
5 <sup>th</sup>	65.9	24	4	6	100	7.8	130	34					
All	80.4	14.5	3.9	1.2	100	5.4	1764	310					
			Cha	ritable/NO	GO hospit	tal							
$1^{st}$	100	0	0	0	100	4.2	3	2					
$2^{nd}$	100	0	0	0	100	3	14	2					
3 <sup>rd</sup>	38	62	0	0	100	5.5	21	6					
4 <sup>th</sup>	100	0	0	0	100	2	3	2					
5 <sup>th</sup>	72.2	18.7	9.2	0	100	6.5	38	11					
All	70.4	25.2	4.4	0	100	5.3	79	23					
				Private h	ospital								
1 <sup>st</sup>	80.3	9.7	9.1	0.9	100	5.5	174	31					
$2^{nd}$	81.6	12.2	4.3	1.9	100	4.7	329	50					
3 <sup>rd</sup>	69.9	27.4	2.7	0	100	5	446	85					
4 <sup>th</sup>	84.1	12.9	3	0	100	4.4	345	94					
5 <sup>th</sup>	66.4	28.8	3.4	1.4	100	6	550	190					
All	74.6	20.7	3.8	0.9	100	5.2	1845	450					

Age		Rural			Urban			All		Estimated.
group	Male	Female	All	Male	Female	All	Male	Female	All	No. ('00')of
(Years)										ailing person
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)
0 - 4	53	180	137	319	134	233	315	136	230	2125
5-14	0	5	1	61	95	77	59	94	75	1587
15-29	111	134	121	24	36	30	27	39	33	1261
30-44	0	152	79	18	123	65	17	125	65	2273
45-59	183	38	120	223	268	244	221	258	238	4841
60 &	416	895	774	629	662	645	627	672	648	4097
above										
All	83	158	118	109	142	125	108	143	124	16184

 Table 6: Number per 1000 Persons Reporting Ailments (PAP) during last 15 days by gender and age-group

Table 7: Number of ailments reported per	<sup>100000</sup> persons	during the last	15 days for each
ailment type			

Nature of		Rural			Urban			All	
Ailment	Male	Female	All	Male	Female	All	Male	Female	All
Infections	6854	4846	5923	3704	3197	3475	3817	3256	3562
Cancers	0	118	55	4	19	11	4	23	13
Blood Diseases	0	373	173	136	72	106	131	83	108
Endocrine	381	703	530	3182	3211	3194	3082	3122	3100
Psychiatric/ neurological	211	0	113	180	246	211	181	237	207
Eye	0	0	0	135	518	313	130	500	302
Ear	0	0	0	29	0	15	28	0	15
Cardio-vascular	658	434	554	805	1916	1321	799	1863	1294
Respiratory	416	4658	2383	1466	3034	2194	1429	3092	2201
Gestro-intestinal	0	0	0	281	576	418	271	556	403
Skin	0	0	0	73	56	65	71	54	63
Musculo- skeletal	0	4826	2238	726	1742	1198	700	1851	1235
Genito-urinary	0	0	0	257	11	143	248	11	138
Obstetric and neo-natal	0	0	0	0	0	0	0	0	0
Injuries	0	0	0	186	20	109	179	20	105
others	0	0	0	40	3	23	38	3	22
All	8520	15957	11970	11204	14622	12797	11109	14670	12767

### Table 8: (i) Distribution of spells ('00') not treated and (ii) Distribution of treated spells of<br/>ailment by nature of treatment received during last 15 days

Sector	Gender	Spells		treatn	nent receive	ed from		
		not treated	Allopathy	Indian System of Medicine	Homoeo -pathy	Yoga & Naturo- pathy	Other sources	All
	Male	0	206	3	0	0	3	212
Rural	Female	0	335	8	0	0	0	343
	All	0	541	11	0	0	3	555
	Male	5	7064	192	261	0	6	7522
Urban	Female	0	8109	209	151	62	0	8531
UIDall	Transgender	0	9	0	0	0	0	9
	All	5	15182	400	412	62	6	16067
	Male	5	7270	194	261	0	9	7738
All	Female	0	8444	217	151	62	0	8874
All	Transgender	0	9	0	0	0	0	9
	All	5	15724	411	412	62	9	16622

### Table 9: Distribution of spells ('00') of ailment with treatment taken on medical advice over levels of care in during last 15 days

Sector	Gender	Spells of ailm	Spells of ailment treated on medical advice receiving from specific level									
				of car	e							
		Government/	Charitable/	Private	Private	Information						
		Public	trust/NGO	doctor/		health care	All					
		hospital	run	Clinic	hospital	provider						
	Male	114	0	82	3	0	199					
Rural	Female	122	0	190	20	0	332					
	All	237	0	272	23	0	531					
	Male	2612	83	3327	1258	56	7336					
Urban	Female	2083	38	4079	2038	116	8354					
Urban	Transgender	9	0	0	0	0	9					
	All	4705	121	7405	3296	172	15700					
	Male	2727	83	3409	1261	56	7535					
All	Female	2205	38	4268	2058	116	8686					
All	Transgender	9	0	0	0	0	9					
	All	4941	121	7677	3319	172	16231					

Table 10: Average medical expenditure (Rs.) for (non-hospitalised) treatment per treated spell of ailment during last 15 days by level of care for each quintile class of UMPCE

		Average	medical expen	diture for t	reatment (l	Rs.) per spel	l in
Sector	Quintile class of UMPCE	Govt. / Public Hospital	Charitable/ Trust/NGO run Hospital	Private Hospital	Private Doctor/ Clinic	Informal Health care provider	All
	$1^{st}$	246	0	2269	406	0	693
	$2^{nd}$	84	0	260	1022	0	625
Rural	3 <sup>rd</sup>	370	0	480	615	0	372
Kulal	4 <sup>th</sup>	225	0	0	1023	0	1001
	$5^{\text{th}}$	27	0	1950	402	0	747
	All	225	0	1677	941	0	643
	$1^{st}$	71	210	1154	455	431	298
	$2^{nd}$	286	0	1154	1225	207	760
Urban	$3^{rd}$	154	342	1498	700	317	450
Ulball	4 <sup>th</sup>	872	858	1747	971	217	1132
	5 <sup>th</sup>	245	769	1960	872	225	1288
	All	227	198	1756	869	288	833
	$1^{st}$	75	210	1228	455	431	305
	$2^{nd}$	270	0	1146	1202	207	749
All	$3^{rd}$	167	342	1483	700	317	448
All	$4^{\text{th}}$	868	858	1747	973	217	1129
	$5^{\text{th}}$	244	769	1960	864	225	1281
	All	227	198	1755	872	288	827

### Table 11:Item-wise average medical expenditure (Rs.) for non-hospitalised treatment per treated spell of ailment for each level of care

Gender/	Avera	ge medical e	xpenditure(F	Rs.) per trea	ted spell und	ler	Total				
medical	Doctor's/	Medicine:	Medicine:	Diagon	Other	Total	expenditure				
facilities	surgeon's	AYUSH	Non-	-ostic	Medical		('000' Rs.)				
	fee		AYUSH	Tests	Expenses						
	Male										
Government/Public	0	0	215	11	3	230	64965				
Charitable/NGO run hospital	23	79	29	18	0	149	1226				
Private hospital	307	42	1047	773	30	2199	272125				
Private Doctor/Clinic	196	29	547	159	2	932	317597				
Informal health care provider	51	251	0	0	0	302	1700				
All	138	24	490	199	7	857	657613				
	100		Female	177	,	007	007010				
Government/Public	1	8	196	17	1	223	49691				
Charitable/NGO run hospital	17	136	142	10	0	305	1169				
Private hospital	288	81	775	284	56	1485	301048				
Private Doctor/Clinic	214	16	494	98	1	824	351552				
Informal health care provider	76	205	0	0	0	281	3257				
All	171	32	468	117	14	802	706717				
	1,1		ransgender			002	100111				
Government/Public	0	0	0	0	0	0	0				
Charitable/NGO run hospital	0	0	0	0	0	0	0				
Private hospital	0	0	0	0	0	0	0				
Private Doctor/Clinic	0	0	0	0	0	0	0				
Informal health care	0	0	0	0	0	0	0				
provider											
All	0	0	0	0	0	0	0				
		1	All								
Government/Public	1	4	207	14	2	227	114655				
Charitable/NGO run hospital	21	97	65	15	0	198	2395				
Private hospital	295	66	879	469	46	1755	573173				
Private Doctor/Clinic	206	21	518	125	2	872	669149				
Informal health care provider	68	220	0	0	0	288	4958				
All	155	28	478	155	11	827	1364330				

Age group		Rural			Urban			All	
(Years)	Male	Female	All	Male	Female	All	Male	Female	All
0-4	8	5	13	195	38	233	203	44	246
5-9	11	0	11	140	66	212	152	66	224
10-14	0	0	0	188	47	234	188	47	234
5-14	11	0	11	328	113	446	340	113	458
15-19	0	0	0	124	107	231	124	107	232
20-24	12	6	18	332	76	408	344	82	426
25-29	1	1	2	105	141	246	106	142	247
15-29	12	7	19	561	324	885	574	331	905
30-34	0	1	1	99	100	201	99	101	202
35-39	0	6	6	60	151	211	60	157	217
40-44	0	5	5	81	136	222	81	141	227
30-44	0	12	12	240	387	634	240	399	646
45-49	4	1	5	124	98	222	128	99	227
50-54	1	6	7	101	116	217	102	122	224
55-59	0	0	0	75	148	223	75	148	223
45-59	5	7	12	300	362	662	306	368	674
60-64	0	0	0	86	227	314	86	227	314
65-69	7	11	18	88	98	185	95	108	203
70-74	0	6	6	99	57	156	99	63	162
75-79	0	3	3	14	34	48	14	36	50
60-79	7	19	26	287	416	703	294	435	729
60 & above	7	19	26	310	422	732	318	441	759
70 & above	0	8	8	136	97	233	136	105	242
80 & above	0	0	0	23	6	30	23	6	30
All	45	50	95	1934	1646	3593	1979	1696	3688

Table 12: Distribution of hospitalisation cases (excluding childbirth) ('00) during the last365 days

## Table 13R: Percentage distribution of hospitalisation cases (excluding childbirth) duringlast 365 days by nature of treatment received during hospitalisation for eachquintile class of UMPCE

Quintile	ŀ	Iospitalised	cases treated d	uring hospitali	sation by		Estimated					
class of	Allopathy	Indian	Homeopathy	Yoga	Other	all	No.					
UMPCE		system	1	&	sources		('00') of					
		of		naturopathy			hospitalised					
		medicine					cases					
	Male											
1 <sup>st</sup>	100.00	0.00	0.00	0.00	0.00	100.00	1					
$2^{nd}$	100.00	0.00	0.00	0.00	0.00	100.00	1					
3 <sup>rd</sup>	100.00	0.00	0.00	0.00	0.00	100.00	15					
4 <sup>th</sup>	100.00	0.00	0.00	0.00	0.00	100.00	13					
5 <sup>th</sup>	100.00	0.00	0.00	0.00	0.00	100.00	15					
All	100.00	0.00	0.00	0.00	0.00	100.00	45					
			Fen	nale								
1 <sup>st</sup>	0.00	0.00	0.00	0.00	0.00	0.00	0					
$2^{nd}$	100.00	0.00	0.00	0.00	0.00	100.00	6					
3 <sup>rd</sup>	100.00	0.00	0.00	0.00	0.00	100.00	31					
4 <sup>th</sup>	100.00	0.00	0.00	0.00	0.00	100.00	3					
5 <sup>th</sup>	100.00	0.00	0.00	0.00	0.00	100.00	11					
All	100.00	0.00	0.00	0.00	0.00	100.00	50					
			Α	11								
$1^{st}$	100.00	0.00	0.00	0.00	0.00	100.00	1					
$2^{nd}$	100.00	0.00	0.00	0.00	0.00	100.00	7					
3 <sup>rd</sup>	100.00	0.00	0.00	0.00	0.00	100.00	45					
4 <sup>th</sup>	100.00	0.00	0.00	0.00	0.00	100.00	16					
5 <sup>th</sup>	100.00	0.00	0.00	0.00	0.00	100.00	26					
All	100.00	0.00	0.00	0.00	0.00	100.00	95					

## Table 13U: Percentage distribution of hospitalisation cases (excluding childbirth) duringlast 365 days by nature of treatment received during hospitalisation for eachquintile class of UMPCE

Quintile	Н	ospitalised	cases treated du	ring hospitalis	sation by		Estimated		
class of	Allopathy	Indian	Homeopathy	Yoga	Other	all	No.		
UMPCE		system		&	sources		('00') of		
		of		naturopathy			hospitalised		
		medicine					cases		
Male									
1 <sup>st</sup>	100.00	0.00	0.00	0.00	0.00	100.00	392		
$2^{nd}$	100.00	0.00	0.00	0.00	0.00	100.00	330		
$3^{\rm rd}$	100.00	0.00	0.00	0.00	0.00	100.00	552		
$4^{\text{th}}$	100.00	0.00	0.00	0.00	0.00	100.00	277		
5 <sup>th</sup>	100.00	0.00	0.00	0.00	0.00	100.00	383		
All	100.00	0.00	0.00	0.00	0.00	100.00	1934		
			Fem	ale					
1 <sup>st</sup>	100.00	0.00	0.00	0.00	0.00	100.00	322		
$2^{nd}$	99.40	0.00	0.00	0.60	0.00	100.00	368		
3 <sup>rd</sup>	100.00	0.00	0.00	0.00	0.00	100.00	433		
$4^{\text{th}}$	100.00	0.00	0.00	0.00	0.00	100.00	220		
5 <sup>th</sup>	98.10	0.00	1.90	0.00	0.00	100.00	303		
All	99.50	0.00	0.30	0.10	0.00	100.00	1646		
			Transg	ender					
$1^{st}$	0.00	0.00	0.00	0.00	0.00	0.00	0		
$2^{nd}$	0.00	0.00	0.00	0.00	0.00	0.00	0		
3 <sup>rd</sup>	100.00	0.00	0.00	0.00	0.00	100.00	6		
$4^{\text{th}}$	0.00	0.00	0.00	0.00	0.00	0.00	0		
5 <sup>th</sup>	100.00	0.00	0.00	0.00	0.00	100.00	7		
All	100.00	0.00	0.00	0.00	0.00	100.00	13		
			Al	1					
1 <sup>st</sup>	100.00	0.00	0.00	0.00	0.00	100.00	714		
$2^{nd}$	99.70	0.00	0.00	0.30	0.00	100.00	698		
3 <sup>rd</sup>	100.00	0.00	0.00	0.00	0.00	100.00	991		
$4^{\text{th}}$	100.00	0.00	0.00	0.00	0.00	100.00	497		
5 <sup>th</sup>	99.20	0.00	0.80	0.00	0.00	100.00	693		
All	99.80	0.00	0.20	0.10	0.00	100.00	3593		

# Table 13 All: Percentage distribution of hospitalisation cases (excluding childbirth) duringlast 365 days by nature of treatment received during hospitalisation for eachquintile class of UMPCE

Quintile	Н	ospitalised	cases treated du	ring hospitalis	ation by		Estimated
class of	Allopathy	Indian	Homeopathy	Yoga &	Other	all	no.
UMPCE		system		naturopathy	sources		('00') of
		of					hospitalised
		medicine					cases
			Ma	le			
1 <sup>st</sup>	100.00	0.00	0.00	0.00	0.00	100.00	393
$2^{nd}$	100.00	0.00	0.00	0.00	0.00	100.00	331
3 <sup>rd</sup>	100.00	0.00	0.00	0.00	0.00	100.00	567
4 <sup>th</sup>	100.00	0.00	0.00	0.00	0.00	100.00	290
5 <sup>th</sup>	100.00	0.00	0.00	0.00	0.00	100.00	398
All	100.00	0.00	0.00	0.00	0.00	100.00	1979
			Fem	ale			
1 <sup>st</sup>	100.00	0.00	0.00	0.00	0.00	100.00	322
$2^{nd}$	99.40	0.00	0.00	0.60	0.00	100.00	373
3 <sup>rd</sup>	100.00	0.00	0.00	0.00	0.00	100.00	464
$4^{\text{th}}$	100.00	0.00	0.00	0.00	0.00	100.00	223
5 <sup>th</sup>	98.20	0.00	1.80	0.00	0.00	100.00	313
All	99.50	0.00	0.30	0.10	0.00	100.00	1696
			Transg	ender			
1 <sup>st</sup>	0.00	0.00	0.00	0.00	0.00	0.00	0
$2^{nd}$	0.00	0.00	0.00	0.00	0.00	0.00	0
3 <sup>rd</sup>	100.00	0.00	0.00	0.00	0.00	100.00	6
$4^{\text{th}}$	0.00	0.00	0.00	0.00	0.00	0.00	0
5 <sup>th</sup>	100.00	0.00	0.00	0.00	0.00	100.00	7
All	100.00	0.00	0.00	0.00	0.00	100.00	13
			Al	1			
1 <sup>st</sup>	100.00	0.00	0.00	0.00	0.00	100.00	715
2 <sup>nd</sup>	99.70	0.00	0.00	0.30	0.00	100.00	705
3 <sup>rd</sup>	100.00	0.00	0.00	0.00	0.00	100.00	1037
$4^{\text{th}}$	100.00	0.00	0.00	0.00	0.00	100.00	512
5 <sup>th</sup>	99.20	0.00	0.80	0.00	0.00	100.00	719
All	99.80	0.00	0.20	0.10	0.00	100.00	3688

		Rural			Urban			All		Estimated ('00')
Ailment	Male	Female	All	Male	Female	All	Male	Female	All	cases of hospitalisation
Infections	47.4	43.5	45.3	30.3	28	29.4	30.7	28.5	29.8	1098
Cancers	3.4	10.2	7	1	1.6	1.3	1	1.9	1.4	53
Blood Diseases	0	5.9	3.1	0.2	2.1	1	0.2	2.2	1.1	40
Endocrine	0	0	0	0.8	3.1	1.9	0.8	3	1.8	67
Psychiatric/neurological	0	0	0	7.2	2.5	5	7	2.4	4.9	180
Eye	0	7.9	4.2	1.6	4.4	2.9	1.6	4.5	2.9	108
Ear	0	0	0	0.3	0.1	0.2	0.3	0.1	0.2	7
Cardio-vascular	9.9	7.3	8.6	9.8	14.2	11.8	9.8	14	11.7	432
Respiratory	0	0	0	5.3	4.7	5	5.2	4.5	4.9	180
Gestro-intestinal	8.6	9.1	8.8	9.1	13.9	11.3	9.1	13.8	11.3	416
Skin	0	0	0	0.2	0	0.1	0.2	0	0.1	4
Musculo-skeletal	7.8	0.7	4	4.8	11.8	8	4.9	11.5	7.9	291
Genito-urinary	14.1	1.5	7.5	16.4	2.7	10.1	16.4	2.7	10.1	371
Obstetric and neo-natal	0	9	4.8	0	6.1	2.8	0	6.2	2.9	106
Injuries	8.8	5	6.8	10.3	3.3	7.1	10.3	3.3	7	260
Others	0	0	0	2.7	1.5	2.1	2.6	1.4	2.1	76
All	100	100	100	100	100	100	100	100	100	3688

Table 14: Percentage distribution of hospitalised cases (excluding childbirth) over detailed ailment types during last 365 days

			Type of medical institution	on	
C t	Carlan	Government/	Charitable/trust/	Private	All
Sector	Gender	Public hospital	NGO run hospital	hospital	(incl.
					n.r.)
	Male	11	0	34	45
Rural	Female	23	0	28	50
	All	34	0	61	95
	Male	1092	35	807	1934
Urban	Female	631	44	970	1646
UIDall	Transgender	7	0	6	13
	All	1730	79	1783	3593
	Male	1103	35	841	1979
All	Female	654	44	998	1696
All	Transgender	7	0	6	13
	All	1764	79	1845	3688

## Table 15: Distribution of hospitalised cases (excluding childbirth) by type of medical<br/>institution for each broad ailment type

## Table 16: Percentage distribution of hospitalisation cases (excluding childbirth) by majorsource of finance of expenditure during last 365 days

	Estimated hospitalised			Major sour	ce of finance		
Sector	case/Estimated hospitalised expenditure/Average Expenditure per hospitalisation	Household Income/ savings	Borrow -ings	Sale of Physical Assets	Contributio n from Friends and Relatives	Other Sources	All
	Estimated hospitalised case ('00')	93	0	0	2	0	95
Rural	Estimated total expenditure ('000')	348614	0	0	2677	0	351291
	Average expenditure per hospitalisation	37485	0	0	13385	0	36978
	Estimated hospitalised case ('00')	3245	185	89	34	16	3593
Urban	Estimated total expenditure ('000')	10085445	231513	485195	54671	68771	10925595
	Average expenditure per hospitalisation	31080	12514	54516	16080	42982	30408
	Estimated hospitalised case ('00')	3338	185	89	35	16	3688
All	Estimated total expenditure ('000')	10434059	231513	485195	57349	68771	11276886
	Average expenditure per hospitalisation	31258	12514	54516	16385	42982	30577

			A	Average t	otal medic	al expenditur	e for treat	ment (Rs	.) per case			
		Rural				Urbaı	1			All		
Category of Ailment	Govern- ment/ Public	Charitable /Trust /NGO run	Private	All	Govern- ment/ Public	Charitable /Trust /NGO run	Private	All	Govern- ment/ Public	Charitable /Trust /NGO run	Private	All
Infections	1878	0	33915	27668	1416	5878	16738	9119	1424	5878	17801	9845
Cancers	6824	0	85559	46192	7932	87100	103703	64009	7765	87100	101601	61764
Blood Diseases	0	0	47800	47800	8356	0	27422	17452	8356	0	30302	19661
Endocrine	0	0	0	0	878	19000	52061	41673	878	19000	52061	41673
Psychiatric/ Neurological	0	0	0	0	6417	19653	78978	40089	6417	19653	78978	40089
Eye	800	0	0	800	1296	11023	28874	14527	1259	11023	28874	14027
Ear	0	0	0	0	600	0	7584	6293	600	0	7584	6293
Cardio-vascular	2394	0	35454	15898	11441	191643	129408	87475	11167	191643	128242	86129
Respiratory	0	0	0	0	7428	0	23801	16423	7428	0	23801	16423
Gestro-intestinal	1861	0	10409	6322	3254	7500	32808	20849	3220	7500	32409	20557
Skin	0	0	0	0	0	0	23163	23163	0	0	23163	23163
Musculo-skeletal	2950	0	12150	11296	3307	9500	29113	19228	3305	9500	28785	19124
Genito-urinary	78937	0	22450	72819	12935	12205	100827	27396	14303	12205	99836	28264
Obstetric and neo-natal	0	0	70000	70000	152	0	35167	15203	152	0	38444	17545
Injuries	800	0	97000	59487	2912	9324	56373	30655	2865	9324	57568	31372
Others	0	0	0	0	1076	0	25760	4525	1076	0	25760	4525
All	16728	0	41119	32470	5307	25352	48972	27423	5525	25352	48712	27553

## Table 17: Average total medical expenditure per hospitalisation case (excluding childbirth) for treatment during stay at hospital (as in-patient) in last 365 days by type of hospital, broad nature of ailment

			Average med	dical expendit	ure (Rs.) for t	reatment	under		Total
	E C			non-pack	age compone	ent			expenditure
Sector	Type of hospital	Package Component	Doctors /surgen fee	Medicines	Diagnostic tests	bed charges	other medical expenses	All	(Rs.'000') (Including non-medical expenses)
D1	Government/ Public	0	937	9871	5472	63	386	16728	63005
Rural	Private	5223	8018	6486	4789	13659	2943	41119	288287
	All	3371	5507	7686	5031	8838	2036	32471	351291
	Government/ Public	87	746	2870	1005	165	434	5307	1362475
Urban	Charitable /NGO	1443	10319	6082	2188	3533	1787	25352	221801
	Private	5239	10295	7850	4659	17514	3415	48972	9341319
	All	7639	5696	5413	2845	3887	1943	27423	10925595
	Government/ Public	86	749	3004	1090	163	433	5525	1425479
All	Charitable /NGO	1443	10319	6082	2188	3533	1787	25352	221801
	Private	4907	10219	7805	4664	17718	3399	48712	9629606
	All	7529	5691	5471	2901	4015	1946	27553	11276886

## Table 18: Average medical expenditure (Rs.) per hospitalisation (excluding childbirth) during last 365 days and its break-up by category of expenditure

Quintile class of	Perc	entage of ca	ases reimb	ursed	Average	e amount re	eimbursed	l (Rs.)		t reimburse edical expen		
UMPCE	ty	pe of medic	cal institut	ion	ty	pe of medi	cal institu	tion	t	ype of medi	cal institu	tion
	Public	Chari-	Private	All	Public	Chari-	Private	All	Public	Chari-	Private	All
		table				table				table		
						Male						
$1^{st}$	0	0	0	0	0	0	0	0	0	0	0	0
$2^{nd}$	0	0	0	0	0	0	0	0	0	0	0	0
$3^{\rm rd}$	0	0	42.4	41.5	0	0	7067	6919	0	0	17.8	17.8
$4^{\text{th}}$	0	0	0	0	0	0	0	0	0	0	0	0
$5^{\text{th}}$	0	0	0	0	0	0	0	0	0	0	0	0
All	0	0	17.9	13.5	0	0	2978	2243	0	0	6.8	5
						Female						
$1^{st}$	0	0	0	0	0	0	0	0	0	0	0	0
$2^{nd}$	0	0	0	0	0	0	0	0	0	0	0	0
3 <sup>rd</sup>	0	0	15.3	8.3	0	0	9901	5346	0	0	21	20.2
$4^{\text{th}}$	0	0	0	0	0	0	0	0	0	0	0	0
$5^{\text{th}}$	0	0	96.3	74	0	0	19748	15162	0	0	72	71.3
All	0	0	38.4	21.1	0	0	11954	6564	0	0	31.8	30.5
						All						
$1^{st}$	0	0	0	0	0	0	0	0	0	0	0	0
$2^{nd}$	0	0	0	0	0	0	0	0	0	0	0	0
3 <sup>rd</sup>	0	0	27.8	18.9	0	0	8595	5850	0	0	19.6	19.2
$4^{\text{th}}$	0	0	0	0	0	0	0	0	0	0	0	0
$5^{\text{th}}$	0	0	46	30.9	0	0	9439	6333	0	0	19	11.9
All	0	0	38.4	21.1	0	0	11954	6564	0	0	31.8	30.5

## Table 19R: Percentage of cases of reimbursement of hospitalisation expenses and average amount of reimbursement (Rs.) per hospitalisation case (excluding childbirth) for each quintile class of UMPCE during last 365 days

Quintile class of	Per	centage of ca	ases reimbu	ursed	Average	e amount rei	mbursed (	Rs.)		int reimburse nedical exper		
UMPCE	t	ype of medic	al institution	on	t	ype of medi	cal institut	tion		type of medi		
	Public	Chari-	Private	All	Public	Chari-	Private	All	Public	Chari-	Private	All
		table				table				table		
						Male						
$1^{st}$	0	0	1.7	0.4	0	0	1007	248	0	0	2.2	1.8
$2^{nd}$	3.6	0	38.2	10.1	1332	0	19411	4749	49.1	0	44.9	45.8
3 <sup>rd</sup>	0	0	26.7	7.9	0	0	1963	583	0	0	7.4	4
4 <sup>th</sup>	3.6	0	18.3	13.1	130	0	19764	12837	1.3	0	33.7	30.9
5 <sup>th</sup>	13.6	0	40.3	34.4	4065	0	57362	46426	55.3	0	54.9	52.9
All	2	0	27.9	12.8	580	0	28093	12053	9.2	0	42.1	37.6
						Female						
$1^{st}$	0	0	2.2	0.5	0	0	2142	519	0	0	6	4.8
$2^{nd}$	0	0	58.9	42.7	0	0	7971	5786	0	0	43.3	38
$3^{rd}$	2.3	0	27.4	16.5	93	0	5106	2930	3.8	0	15.6	14.9
4 <sup>th</sup>	4.7	0	20.7	15.8	643	0	4421	3255	23	0	9.2	9.5
$5^{\text{th}}$	22.4	27.1	47.6	41.7	5210	2986	21882	17567	58.6	16.5	48.2	47.3
All	2.9	15.4	37.7	23.8	506	1690	9484	5832	13.7	11.3	27.6	26.4
						Transgend	er					
$1^{st}$	0	0	0	0	0	0	0	0	0	0	0	0
$2^{nd}$	0	0	0	0	0	0	0	0	0	0	0	0
3 <sup>rd</sup>	0	0	100	100	0	0	16850	16850	0	0	84.3	84.3
4 <sup>th</sup>	0	0	0	0	0	0	0	0	0	0	0	0
5 <sup>th</sup>	0	0	0	0	0	0	0	0	0	0	0	0
All	0	0	100	44.5	0	0	16850	7502	0	0	84.3	83.2
						All						
1 <sup>st</sup>	0	0	1.9	0.5	0	0	1514	370	0	0	3.7	3
$2^{nd}$	2.7	0	54.9	27.3	1006	0	10140	5295	27.7	0	43.9	40.9
3 <sup>rd</sup>	0.8	0	28.1	12.2	31	0	4024	1702	0.4	0	13.4	10.1
4 <sup>th</sup>	4	0	19.4	14.3	334	0	12707	8595	4.6	0	23.7	22.4
$5^{\text{th}}$	16.4	18	43.4	37.3	4298	1978	42205	33340	56.8	4.5	53.2	51.5
All	2.3	8.6	33.5	17.9	550	945	17932	9187	10.4	3.7	36.6	33.5

## Table 19U: Percentage of cases of reimbursement of hospitalisation expenses and average amount of reimbursement (Rs.) per hospitalisation case (excluding childbirth) for each quintile class of UMPCE during last 365 days

Quintile class of	Per	centage of ca	ases reimbu	rsed	Average an	nount reiml	oursed (Rs.	)		int reimburse nedical expen		
UMPCE	t	ype of medic	cal institution	on	typ	e of medica	al institutio	n		type of medi	cal institution	on
	Public	Chari- table	Private	All	Public	Chari- table	Private	All	Public	Chari- table	Private	All
						Male				<b>u</b> uor <b>o</b>		
1 <sup>st</sup>	0	0	1.7	0.4	0	0	1007	247	0	0	2.2	1.8
$2^{nd}$	3.6	0	38.2	10.1	1326	0	19411	4733	48.7	0	44.9	45.7
3 <sup>rd</sup>	0	0	28	8.8	0	0	2369	745	0	0	8.6	4.9
4 <sup>th</sup>	3.5	0	17.3	12.5	127	0	18677	12264	1.3	0	32.8	30.2
5 <sup>th</sup>	12.5	0	39.1	33.1	3719	0	55703	44662	26.7	0	53.8	51.1
All	2	0	27.5	12.8	574	0	27086	11831	8.6	0	41.2	36.6
						Female						
1 <sup>st</sup>	0	0	2.2	0.5	0	0	2142	519	0	0	6	4.8
$2^{nd}$	0	0	58.9	42.1	0	0	7971	5699	0	0	43.3	37.9
3 <sup>rd</sup>	2.2	0	26.6	15.9	86	0	5411	3090	3.6	0	16	15.4
$4^{\text{th}}$	4.7	0	20.4	15.6	640	0	4347	3213	22.8	0	9.2	9.5
5 <sup>th</sup>	21.3	27.1	49.3	42.9	4960	2986	21806	17484	58.3	16.5	48.7	47.8
All	2.8	15.4	37.7	23.7	488	1690	9552	5853	13.4	11.3	27.7	26.5
						ransgender					r	
1 <sup>st</sup>	0	0	0	0	0	0	0	0	0	0	0	0
2 <sup>nd</sup>	0	0	0	0	0	0	0	0	0	0	0	0
3 <sup>rd</sup>	0	0	100	100	0	0	16850	16850	0	0	84.3	84.3
4 <sup>th</sup>	0	0	0	0	0	0	0	0	0	0	0	0
5 <sup>th</sup>	0	0	0	0	0	0	0	0	0	0	0	0
All	0	0	100	44.5	0	0	16850	7502	0	0	84.3	83.2
- et					0	All				0	. – [	
1 <sup>st</sup>	0	0	1.9	0.5	0	0	1514	369	0	0	3.7	3
$2^{nd}$	2.7	0	54.9	27	988	0	10140	5245	27.3	0	43.9	40.9
3 <sup>rd</sup>	0.8	0	28.1	12.5	30	0	4340	1883	0.4	0	14	10.8
4 <sup>th</sup>	4	0	18.7	13.8	328	0	12228	8329	4.6	0	23.3	22.1
5 <sup>th</sup>	15.4	18	43.5	37.1	4017	1978	41168	32364	36.5	4.5	52.5	50.3
All	2.3	8.6	33.3	17.9	540	945	17570	9067	9.8	3.7	36.1	32.9

## Table 19A: Percentage of cases of reimbursement of hospitalisation expenses and average amount of reimbursement (Rs.) per hospitalisation case (excluding childbirth) for each quintile class of UMPCE during last 365 days

Age-Group	Percentage of	Percentage of p	regnancies		place of c	childbirth			place of ab	ortion		
(in years)	women who were	ended w		institu			iary Birth	institu	1	others	All	Estimated
	pregnant at some	childbirth	abortion	at public	at private		led by	at public	at private	ounois		No.
	time during last 365	(live birth	ucortion	hospital	hospital	skilled	unskilled	hospital	hospital#			('00') of
	days	&still birth)		F	P	person	person	*	F			pregnant
		,				P	L					women
				J	Rural							
<20	0	0	0	0	0	0	0	0	0	0	0	0
20-24	6.3	81	19	83.1	16.9	0	0	0	100	0	100	24
25-29	37.1	96.4	3.6	26.7	73.3	0	0	0	100	0	100	27
30-34	5.9	100	0	92.8	7.2	0	0	0	0	0	0	20
35-39	6.3	100	0	0	100	0	0	0	0	0	0	6
40-44	0	0	0	0	0	0	0	0	0	0	0	0
>=45	0	0	0	0	0	0	0	0	0	0	0	0
All	5.4	92.6	7.4	61.1	38.9	0	0	0	100	0	100	77
Estimated no. of	77	67	5	41	26	0	0	0	5	0	5	Х
pregnant women('00')	11	07	5			0	0	0	5	0	5	Λ
				τ	Jrban							
<20	0.6	100	0	0	0	0	100	0	0	0	0	29
20-24	10.5	57.9	0	74.5	13.4	11.6	0.6	0	0	0	0	608
25-29	15	93.7	6.3	57.4	39.1	2	1.5	46.2	0	53.8	100	1141
30-34	9.3	90.8	5.2	49.1	49.2	0	1.7	0	100	0	100	516
35-39	1.4	75.8	24.2	50.4	49.6	0	0	100	0	0	100	69
40-44	0	0	0	0	0	0	0	0	0	0	0	0
>=45	0	0	0	0	0	0	0	0	0	0	0	0
All	6.6	81	4.6	57.5	35.9	3.5	3.2	42.7	30.1	27.2	100	2362
Estimated no. of pregnant women ('00')	2362	1521	86	874	546	53	48	37	26	23	86	Х
pregnant women (00)					All							
<20	0.6	100	0	0	0	0	100	0	0	0	0	29
20-24	10.3	58.7	0.7	74.9	13.6	10.9	0.6	0	100	0	100	632
25-29	15.2	93.8	6.2	56.4	40.2	2	1.4	45.4	1.7	52.9	100	1168
30-34	9.1	91.2	5	51	47.4	0	1.6	0	100	0	100	536
35-39	1.4	77.7	22.3	45.3	54.7	0	0	100	0	0	100	75
40-44	0	0	0	0	0	0	0	0	0	0	0	0
>=45	0	0	0	0	0	0	0	0	0	0	0	0
All	6.5	81.4	4.7	57.6	36	3.3	3	40.3	34.1	25.6	100	2439
Estimated no. of pregnant women('00')	2439	1588	91	915	572	53	48	37	31	23	91	X
Prognant women (00)	1	l										

## Table 20: Percentage of women aged 15-49 years who were pregnant any time during last 365 days and Percentage distribution of childbirth/abortion by place of delivery/abortion for each child-bearing age-group

Quintile class	Percentage	Percent	age of		Place of <b>(</b>	Childbirth	ı	p	lace of ab	ortion		
of UMPCE	of women	pregnanci	es ended	Institu	itional	Domici	liary Birth	Institu	itional	Others	All	Estimated
	who were	wit	h				-					No.
	pregnant	Childbirth	Abortion	at	at	atter	ided by	at	at			('00') of
	at some	(live birth		Public	Private			Public	Private			pregnant
	time	&still		hospital	hospital	skilled	unskilled	hospital	hospital			women
	during last	birth)		-	•		person	1	1			
	365 days					person						
					Rural							
$1^{st}$	8.9	100	0	54.3	45.7	0	0	0	0	0	0	32
$2^{nd}$	1	100	0	0	100	0	0	0	0	0	0	3
3 <sup>rd</sup>	12.4	72.6	27.4	58.1	41.9	0	0	0	100	0	100	19
4 <sup>th</sup>	3.2	100	0	100	0	0	0	0	0	0	0	11
5 <sup>th</sup>	5.1	100	0	80.5	19.5	0	0	0	0	0	0	12
All	5.4	92.6	7.4	61.2	38.8	0	0	0	100	0	100	77
Estimated no. of												
pregnant women('00')	77	67	5	41	26	0	0	0	5	0	5	
wonnen(00)												
					Urban			L	L			
1 <sup>st</sup>	13.7	54.4	8.2	74.5	17	3.5	5.1	29.4	29.4	41.3	100	980
2 <sup>nd</sup>	6.4	99.3	0.7	60.4	22	10.3	7.4	100	0	0	100	450
3 <sup>rd</sup>	3.8	93.6	1	70.9	29.1	0	0	100	0	0	100	269
4 <sup>th</sup>	4.4	94.4	5.6	60.2	39.8	0	0	100	0	0	100	329
5 <sup>th</sup>	4.7	96.7	3.3	19.6	80.4	0	0	9	91	0	100	334
All	6.6	81	4.6	57.5	35.9	3.5	3.2	42.7	30.1	27.2	100	2362
Estimated no. of												
pregnant women('00')	2362	1521	86	874	546	53	48	37	26	23	86	
women(00)												

## Table 21: Percentage of women aged 15-49 years who were pregnant any time during last 365 days and Percentage distribution of childbirth/abortion by place of delivery/abortion for each quintile class of UMPCE

# Table 22: (i) Percentage of pregnant women (aged 15-49 pregnant any time during last 365 days) receiving pre- natal care and<br/>post natal care, (ii) average no. of days IFA consumed, (iii) average expenditure on pre-natal care and post-natal<br/>care and (iv) average no. of days visited Anganwadi centre for various age-groups

Age	Pe	rcentage of	f Pregnant wo	omen receivii	ıg	Average no.	average expen	diture incurred	Average no. of	Estimated no.
group	Pre-	Post-	Tetanus	Iron and	recd more	Of days	on Pre-natal	on Post-natal	days visiting	('00) of
(Years)	natal	natal	Toxoid	Folic acid	than 99	IFA	care (Rs.)	care (Rs.)	anganwadi centre	pregnant women
	care	care	Vaccine		IFA	consumed			during last 30 days	
						(0.0 days)			(0.0)	
				Rur	al					
<20	0	0	0	0	0	0	0	0	0	0
20-24	100	100	100	100	71	138.4	4333	2847	1	24
25-29	100	100	100	100	75	141.3	2664	2077	1	27
30-34	100	100	100	100	31	95.8	4163	4160	2	20
35-39	100	100	100	100	100	170	3500	2000	1	6
40-44	0	0	0	0	0	0	0	0	0	0
>=45	0	0	0	0	0	0	0	0	0	0
All	100	100	100	100	64	130.5	3637	2921	1	77
				Urb	an					
<20	100	0	100	100	0	85	4550	0	0	29
20-24	55	63	54	59	25	64.7	1287	456	0	608
25-29	100	91	100	100	42	95.8	3218	1534	0	1141
30-34	96	91	96	96	61	114.2	5733	1598	1	516
35-39	100	90	100	100	67	124	5690	4560	0	69
40-44	0	0	0	0	0	0	0	0	0	0
>=45	0	0	0	0	0	0	0	0	0	0
All	87	83	87	88	42	92.4	3353	1423	0	2362
				Al	1					
<20	100	0	100	100	0	85	4550	0	0	29
20-24	57	65	56	60	27	67.5	1400	609	1	632
25-29	100	91	100	100	42	96.9	3205	1550	0	1168
30-34	96	91	96	96	60	113.5	5673	1703	1	536
35-39	100	91	100	100	69	127.7	5517	4359	0	75
40-44	0	0	0	0	0	0	0	0	0	0
>=45	0	0	0	0	0	0	0	0	0	0
All	88	84	88	89	42	93.6	3362	1487	0	2439

## Table23: Percentage of cases of hospitlisation for childbirth receiving specific type of medical services and their distribution by payment category for different types of medical institution

Type of	Percentag						Medic	al servic	es received a	as inpa	tient				
medical	e of cases		Su	rgery		Percentage		Me	dicine		Percentage of	X-ray	/ECG/I	EEG/Scan/O	thers
Institutions	receiving surgery	S	ervice rea	ceived	all	of cases receiving	S	service received all			cases receiving in X-ray/	service received			all
	surgery	free	party free	on payment		medicine	free	party free	on payment		ECG/EEG/Scan/ Other diagnostic tests	free	party free	on payment	
							Rura	1							
Government/ Public	25	100	0	0	100	86.3	29	39.9	31.1	100	100	20	39.8	40.2	100
Charitable/ Trust/NGO	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Private	67.4	0	0	100	100	100	0	0	100	100	100	0	0	100	100
All	39	42.9	0	57.1	100	90.8	18.4	25.4	56.1	100	100	13.4	26.6	60	100
Urban															
Government/ Public	23.4	100	0	0	100	99.9	48.3	44.9	6.8	100	99.4	66.1	26.2	31.6	100
Charitable/ Trust/NGO	0	0	0	0	0	100	0	0	100	100	100	0	0	100	100
Private	39.4	2.5	0	97.5	100	100	0	1.5	98.5	100	100	0	0.5	99.5	100
All	29.4	50.3	0	49.7	100	99.9	29.7	28.2	42	100	99.6	40.6	16.3	57.8	100
							All								
Government/ Public	23.5	100	0	0	100	99.3	47.5	44.7	7.7	100	99.5	64	26.8	32	100
Charitable/ Trust/NGO	0	0	0	0	0	100	0	0	100	100	100	0	0	100	100
Private	40.4	2.5	0	97.6	100	100	0	1.4	98.6	100	100	0	0.5	99.5	100
All	29.8	49.9	0	50.1	100	99.6	29.3	28.1	42.6	100	99.7	39.5	16.7	57.8	100

Age	%	of childr	en with	out any in	mmunisati	on		% of	children	fully imm	unised		
(Months)		Rural			Urban			Rural			Urban		
	Boy	Girl	All	Boy	Girl	All	Boy	Girl	All	Boy	Girl	All	
0<=age<6	0	0	0	0	0	0	0	0	0	0	0	0	
6<=age<=11	0	0	0	0	0	0	38.1	46.4	41.6	17.7	12.6	15.8	
12<=age<=23	0	0	0	0	0	0	0	100	100	59.3	68.7	62.9	
24<=age<=35	0	0	0	0	14.6	9.4	100	85.6	92.2	66.3	48.5	54.9	
36<=age<=47	0	0	0	0.8	0	0.4	100	99.7	99.7	44.2	83	62.6	
48<=age<=59	0	0	0	0	2.3	0.6	100	100	100	70.9	87.5	75.6	
60<=age<=71	0	0	0	0	0	0	53.3	0	26	39.8	64.7	45.4	
All	0	0	0	0.2	5.2	2.4	55	81.4	72	49.7	57.1	53	
Estimated no. of													
children of 0-5 years	0	0	0	10	235	246	53	141	194	2897	2571	5474	
('00') received	0	0	0	10	255	240	55	141	194	2097	2371	5474	
immunisation													

Table 24: Percentage of children without any immunisation, and fully immunised for different age and gender

## Table 25: Distribution of source of most immunisation administered to children ('00') age0-5 years

			Major source									
Sector	Gender	HSC/ Angan- waricentre	PHC/ dispensery/ CHC/mobile medical unit	Government /Public hospital	Charitable/ trust/NGO run hospital	Private hospital	Private Doctor/ Clinic	All				
	Boy	40	27	5	0	5	19	96				
Rural	Girl	102	40	16	0	10	5	173				
	All	142	66	22	0	15	24	269				
	Boy	1037	2507	1221	250	435	382	5832				
	Girl	962	1641	1168	15	230	484	4500				
Urban	Trans- gender	6	0	0	0	0	0	6				
	All	2005	4148	2388	265	665	866	10337				
	Boy	1077	2535	1226	250	440	400	5928				
	Girl	1064	1680	1184	15	240	490	4673				
All	Trans- gender	6	0	0	0	0	0	6				
	All	2147	4214	2410	265	680	890	10606				

Table 26: Distribution of economic independent aged persons ('00') by number of dependents

		Aged persons with number of dependents								
Sector	Gender	0	1	2	3 - 5	6 and more	All			
	Male	0	19	0	0	0	19			
Rural	Female	0	3	0	0	0	3			
	All	0	21	0	0	0	22			
	Male	361	1039	90	211	4	1706			
Urban	Female	502	52	30	92	0	676			
	All	863	1092	120	303	4	2382			
	Male	361	1058	90	211	4	1725			
All	Female	502	55	30	92	0	679			
	All	863	1113	120	303	4	2404			

 Table 27R: Percentage distribution of aged persons of each age-group by state of physical mobility

		Statu	s of physical mobi	lity		
Age			immobile			Estimated.
group	Physically			Able to		('00') no.
(years)	mobile	Confined	Confined to	move outside	Total	of aged
(years)	moone	to bed	home	but only in a		persons
				wheelchair		
		1	Male	· · · · · · · · · · · · · · · · · · ·		
60-64	100	0	0	0	100	9
65-69	100	0	0	0	100	9
70-74	100	0	0	0	100	20
75-79	100	0	0	0	100	3
80+	100	0	0	0	100	0
70+	100	0	0	0	100	23
All	100	0	0	0	100	41
Female						
60-64	100	0	0	0	100	14
65-69	94.6	0	5.4	0	100	97
70-74	50	0	50	0	100	6
75-79	100	0	0	0	100	7
80+	0	0	0	0	0	0
70+	77.3	0	22.7	0	100	13
All	93.4	0	6.6	0	100	124
			All			
60-64	100	0	0	0	100	23
65-69	95	0	5	0	100	106
70-74	88.7	0	11.3	0	100	26
75-79	100	0	0	0	100	10
80+	100	0	0	0	100	0
70+	91.9	0	8.1	0	100	36
All	95	0	5	0	100	165

		Statu	s of physical mobi	lity		
1 32			immobile			Estimated.
Age	Physically			Able to		('00') no.
group (years)	mobile	Confined	Confined	move outside	Total	of aged
(years)	moone	to bed	to home	but only in a		persons
				wheelchair		
			Male			
60-64	97.4	0.3	1.7	0.1	100	1630
65-69	88.1	0.2	11.4	0	100	891
70-74	95.3	0	4.7	0	100	540
75-79	33.9	4.7	61.4	0	100	95
80+	97.5	0	0	0	100	83
70+	87.5	0.6	11.6	0	100	718
All	92.6	0.3	6.5	0	100	3239
Female						
60-64	85.3	0.1	12.6	0	100	1771
65-69	79	0.2	18.2	0	100	689
70-74	92.7	3.2	4.2	0	100	207
75-79	76.2	0	23.8	0	100	96
80+	68.8	27.6	2.4	1.2	100	151
70+	81.3	10.6	7.7	0.4	100	454
All	83.2	1.8	13.2	0.1	100	2914
			All			
60-64	91.1	0.2	7.4	0	100	3401
65-69	84.1	0.2	14.4	0	100	1580
70-74	94.6	0.9	4.5	0	100	748
75-79	55.1	2.3	42.5	0	100	190
80+	79	17.8	1.5	0.8	100	234
70+	85.1	4.5	10.1	0.2	100	1172
All	88.1	1	9.7	0	100	6153

 Table 27U: Percentage distribution of aged persons of each age-group by state of physical mobility

		Status	s of physical mob	ility		
			immobile			Estimated.
Age group (years)	Physically mobile	Confined to bed	Confined to home	Able to move outside but only in a wheelchair	Total	('00') no. of aged persons
			Male			
60-64	97.4	0.3	1.6	0.1	100	1638
65-69	88.2	0.2	11.3	0	100	900
70-74	95.5	0	4.5	0	100	560
75-79	35.9	4.5	59.6	0	100	98
80+	97.5	0	0	0	100	83
70+	87.9	0.6	11.3	0	100	742
All	92.7	0.3	6.5	0	100	3280
			Female			
60-64	85.4	0.1	12.5	0	100	1785
65-69	80.9	0.1	16.7	0	100	786
70-74	91.5	3.1	5.4	0	100	213
75-79	77.8	0	22.2	0	100	103
80+	68.8	27.6	2.4	1.2	100	151
70+	81.1	10.4	8.1	0.4	100	467
All	83.6	1.7	12.9	0.1	100	3038
	1	I	All			
60-64	91.1	0.2	7.3	0	100	3424
65-69	84.8	0.2	13.8	0	100	1686
70-74	94.4	0.8	4.7	0	100	774
75-79	57.4	2.2	40.4	0	100	200
80+	79	17.8	1.5	0.8	100	235
70+	85.3	4.4	10	0.2	100	1209
All	88.3	1	9.6	0	100	6318

 Table 27A: Percentage distribution of aged persons of each age-group by state of physical mobility

## Table 28 (i): Distribution of aged persons ('00') of each Sector/Gender with chronic illnessby own perception about their current state of health

		Ow	Own perception about current state of health							
Sector	Gender	Excellent/ very good	Good/fair	Poor	NR	Total				
	Male	0	14	0	0	14				
Rural	Female	0	20	88	0	108				
	All	0	34	88	0	122				
	Male	46	1476	411	2	1935				
Urban	Female	12	726	927	0	1665				
	All	59	2202	1339	2	3601				
	Male	46	1490	411	2	1949				
All	Female	12	745	1016	0	1773				
	All	59	2235	1427	2	3723				

## Table 28 (ii): Distribution of aged persons ('00') of each Sector/Gender without chronic illness by own perception about their current state of health

		Own	n perception al	bout current st	ate of heal	th
Sector	Gender	Excellent/ very good	Good/ fair	Poor	NR	Total
	Male	3	25	0	0	27
Rural	Female	0	9	7	0	16
	All	3	34	7	0	43
	Male	249	983	58	14	1303
Urban	Female	47	965	184	53	1249
	All	296	1948	242	67	2552
	Male	252	1007	58	14	1331
All	Female	47	974	191	53	1265
	All	298	1982	249	67	2596

## Table 29: Distribution of economic dependent aged persons ('00') by category of persons financially supporting the aged person

Sector/	Economically dependent aged persons financially supported by									
Gender	Spouse	Own children	Grand children	Others	Total					
	Rural									
Male	0	18	0	4	22					
Female	15	106	0	0	121					
All	15	124	0	4	144					
		1	Urban							
Male	150	1308	44	16	1518					
Female	636	1482	4	63	2185					
All	785	2790	48	80	3703					
			All							
Male	150	1326	44	20	1540					
Female	651	1588	4	63	2306					
All	800	2914	48	84	3846					

# Facsimile of schedule 25.0

RURAL	*
URBAN	

#### GOVERNMENT OF INDIA NATIONAL SAMPLE SURVEY OFFICE SOCIO-ECONOMIC SURVEY SEVENTY FIFTH ROUND: JULY 2017 - JUNE 2018 SCHEDULE 25.0: HOUSEHOLD SOCIAL CONSUMPTION: HEALTH

CENTRAL	*
STATE	

[0] descriptive identification of sample	e household
1. state/UT.:	5. hamlet name:
2. district:	6. investigator unit no. /block no. :
3. sub-district/tehsil/town:*	7. name of head of household:
4. village name:	8. name of informant:

item no.	item		code		item no.	item	code
1.	srl. no. of sample FSU				6.	sample household number	
2.	round number	7		5	7.	serial number of informant (as in column 1 of block 4)	
3.	schedule number	2	5	0	8.	response code	
4.	sample hg/sb number				9.	survey code	
5.	second-stage stratum number				10.	reason for substitution of original household (code)	

#### **CODES FOR BLOCK 1**

*item 8: response code:* informant: *co-operative and capable -1, co-operative but not capable -2, busy -3, reluctant -4, others -9.* 

item 9: survey code: original -1, substitute -2, casualty -3.

*item 10: reason for substitution of original household: informant busy -1, members away from home -2, informant non-cooperative -3, others -9.* 

\* tick mark (  $\sqrt{}$ ) may be put in the appropriate place

[2] p	articulars of field operation	ons									
sl. no.	item				Stati	-	or (FI) / Officer	Field Officer (FO)/ Senior Statistical Officer (SSO)			
(1)	(2	2)			(	3)			(4)		
1.(a)	(i) name (block letters)										
	(ii) code										
	(iii) signature										
1.(b)	(i) name (block letters)										
	(ii) code							1			
	(iii) signature										
2.	date(s) of:		DE	)	Μ	М	YY	DD	MM	Y	Y
	(i) survey/ inspection										
	(ii) receipt										
	(iii) scrutiny										
	(iv) despatch										
3.	number of additional shee	t(s) attached									
4.	total time taken to canvass	-									
	team of investigators (FI/J										
_	(in minutes) [no decimal p	-						-			
5.	number of investigators (I canvassed the schedule	(I/JSO) in the team who									
6.	whether any remark has been entered by	(i) in block 12/13									
	FI/JSO/supervisory officer (yes-1, no-2)	(ii) elsewhere in the schedule									

[12] remarks by investigator (FI/JSO)

[13] comments by supervisory officer(s)

[3] household c	haracteristics								
1. household siz	ze			8. type of	latrine usually used (code)				
share for child non-household f last 365 days? (y	. ,	iny		if code in item 8 is 01-09	the building-2, public/community latrine-3, others-9				
	description:				10. how many members use the latrine?				
industry (NIC-2008)	(NIC-2008)				11. major source of drinking water (code)				
	code (5-digit)			12. arrang	12. arrangement of garbage disposal (code)				
4. principal occupation (NCO-2004)	. principal description:			-	ry source of energy for cooking during the last rs (code)				
	(NCO-2004) code (3-digit)			(see li one ho	ere a sudden outbreak of communicable disease st* below) in the community afflicting at least usehold member during last 365 days? , no-2)				
5. household typ	pe (code)		·		nt of medical insurance premium paid for nold members during last 365 days (Rs.)				
6. religion (code	religion (code)			16. household's usual monthly consumer expenditure					
7. social group	(code)			(Rs.)					

#### **CODES FOR BLOCK 3**

*item 5: household type: for rural areas*:*self-employed in agriculture -1, self-employed in non-agriculture - 2; regular wage/salary earning in agriculture- 3, regular wage/salary earning in non-agriculture- 4, casual labour in agriculture - 5, casual labour in non-agriculture -6; others-9.* 

for urban areas: self-employed -1, regular wage/salary earning - 2, casual labour -3, others -9

- item 6: religion: Hinduism -1, Islam -2, Christianity -3, Sikhism-4, Jainism -5, Buddhism -6, Zoroastrianism -7, others -9
- item 7: social group: Scheduled Tribes (ST)-1, Scheduled Castes (SC) -2, Other Backward Classes (OBC) -3, Others-9
- item 8: type of latrine usually used: flush/ pour flush latrine to: piped sewer system-01, septic tank-02, pit latrine -03, elsewhere (open area /street/yard/plot/drainage ditch, not known etc.)-04;
   Pit latrine: ventilated improved pit/ biogas latrine -05, pit latrine with slab-06, pit latrine without slab/open pit-07, twin pit /composting latrine-08, others-09, no latrine facility / use open space or field-10
- *item 11: major source of drinking water*: bottled water 01, piped water in dwelling/premises/yard 02, piped water outside -03, tube-well/borewell (inside or outside premises)-04, protected well (inside or outside premises)-05, tanker/truck/drum(supplied through container)-06, protected spring/pond etc.for drinking purpose -07, Community RO Plant-08, others – 09, all unprotected source (river/canal, spring, pond, well etc.) - 10
- *item 12:* arrangement of garbage disposal: by Panchayet/Municipality/Corporation-1, by resident/group of residents-2, others-9, no arrangement-3
- *item 13: primary source of energy for cooking: firewood and chips-01, LPG-02, other natural gas -03, dung cake-04, kerosene-05, coke/coal-06, gobar gas-07, other biogas -08, charcoal-10, electricity(incl. generated by solar or wind power generators) -11, others-19, no cooking arrangement-12*

\*list of diseases (for item 14): Malaria; Viral Hepatitis/Jaundice; Acute Diarrhoeal Diseases/Dysentery; Dengue fever; Chikungunya; Measles; Acute Encephalitis Syndrome; and others (Typhoid, Hookworm Infection, Filariasis, Tuberculosis, etc.)

[4] d	emographic particulars of	househo	ld memb	ers													
									dur	ing last 3	65 days				hether d/suffering	1.1	
sl.	name of member	rela- tion	gen- der	0.00	mari- tal	genl. edu	usual prin- cipal	whe- ther	<b>if 1 in</b> <b>col. 9,</b> no.	whether	( <b>if 1 in</b> <b>col. 11</b> ) whether paid	whether suffered	whether suffering from	from ailmen chroni	any other t? (besides c ailment)	whether covered by any	report- ting of columns
no.	name of member	ton to head (code)	(code)	age (yrs)	tai status (code)	cation	activity status (code)	hospita -lised (yes-1, no-2)	of times hospi- talised	preg- nant* (yes-1, no-2)	major share for child- birth expenses <sup>#</sup> (code)	disease	any chronic ailment (yes -1, no -2)	any time during last 15 days (yes-1, no-2)	on the day before the date of survey (yes -1, no -2)	scheme for health exp. support (code)	14-16 (self -1, proxy- 2)
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)	(15)	(16)	(17)	(18)
	sual members																
B: fe	male members from other	househo	lds for w	/ /hom tl	he maio	or share	of expen	ses on cl	hild birt	h during	last 365 d	lays, was b	orne by th	ne housel	l hold membe	er(s)	
81			2							1	1						
82			2							1	1						
83			2							1	1						
84	famala member(s) of and 15		2							1	1			7.	nansas on pr		

\* for female member(s) of age 15 to 49 years

<sup>#</sup> childbirth expenses excluding expenses on pre/post natal care

#### **CODES FOR BLOCK 4**

· · · ·		2, married child - 3, spouse of married child - r-in-law/sister-in-law/other relatives - 8, servant/em		narried child - 5, grandchild - 6, father/mother/fath es/other non-relatives - 9	er-in-
col 4 gender: male-1, female-2, transgender-3	3				
col. 6: marital status: never married - 1, curren	ntly m	arried - 2, widowed - 3, divorced/separated- 4			
	l scho	ng -02, oling: through NFEC -03, literate through TLC/ ng: below primary -06, primary -07, upper primar diploma /certificate course (upto secondary)-12, diploma/certificate course(graduation & above) -	ry/mida diplom	lle -08, secondary -10, higher secondary -11, a/certificate course(higher secondary)-13,	
col. 8: usual principal activity status:					
worked in h.h. enterprise (self-employed): own account worker	-11	worked as casual wage labour: in public works	-41	attended domestic duties and was also engaged in free collection of goods (vegetables, roots,	-93
worked in h.h. enterprise (self-employed): <i>employer</i>	-12	worked as casual wage labour: in other types of work	-51	firewood, cattle feed, etc.), sewing, tailoring, weaving, etc. for household use	
worked as helper in h.h. enterprise (unpaid family worker)	-21	did not work but was seeking and/or available for work	r <b>-81</b>	rentiers, pensioners , remittance recipients, etc.	-94
worked as regular salaried/ wage employee	-31	attended educational institution	-91	not able to work due to disability	-95
		attended domestic duties only	-92	others (including begging, prostitution, etc.)	-97
col 12: whether household paid major share for	childb	pirth expenses: yes-1, no-2, pregnancy continuing-	-3		

#### col. 13: whether suffered from any communicable disease :

suffered from:Malaria-1, Viral Hepatitis/Jaundice-2, Acute Diarrhoeal Diseases/Dysentery-3, Dengue fever – 4 Chikungunya-5, Measles-6, Acute Encephalitis syndrome-7, others -9 (Typhoid, Hookworm Infection, Filariasis, Tuberculosis etc.)

not suffered -8

col. 17: whether covered by any scheme for health expenditure support: government sponsored (e.g. RSBY, Arogyasri, etc.)-1, government/PSU as an employer (e.g. CGHS, reimbursement from govt. etc.)-2, employer supported (other than govt./PSU) health protection (e.g. ESIS) -3, arranged by household with insurance companies-4, others-9, not covered-5

[5] par	rticulars of former household members wh	o died dur	ing the las	t 365 days					
srl. no.	name of deceased member	gender (code)	age at death (years)	whether medical attention received before death (yes-1, no-2)	at least once during last 365 days	<b>if 1 in col. 6,</b> no. of times hospita- lised	reason for non- hospitalisation just before death (code)	age 15-49 y	bl. 3 and ears in col.4 if 1 in col. 9, time of death (code)
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)
91									
92									
93									
94									
95									

\*for female members of 4B this block should not be filled in

#### CODES FOR BLOCK 5:

col. 3: gender: male -1, female-2, transgender-3

- *col. 8: reason for non-hospitalisation:* hospital care was not considered satisfactory-1, admission to hospital was not done as doctor/medical attendant was not available-2, ailment was not considered serious enough-3, financial constraints-4, due to transportation problem-5, patient did not want to be hospitalised-6, patient died before taking to hospital-7, others-9
- *col.10: time of death*: deaths related to pregnancy: during pregnancy -1, during delivery -2, during abortion -3, within 6 weeks of delivery/ abortion -4, deaths due to other causes -9

[6]	particulars o	f med	lical treatment received as in-patient of a med	ical institu	tion during	g the last 3	65 days	
1.			pitalisation case	1	2	3	4	5
2.	srl. no. of m	embei	r (as in col. 1, block 4A/5 & 4B) hospitalised					
3.	age (years) (	as in (	col.5, block 4A & 4B/ col.4, block 5)					
4.	nature of ail	ment	(code list on pages 14-15)*					
5.	nature of tre	atmen	nt (code)					
6.			stitution (code)					
7.	if code is 2 of	or 3 iı	n item 6, reason for not availing govt./public					
	hospital							
8.			-1, paying general -2, paying special -3)					
9.	when admitt	ed (co	ode)					
10.	when discha							
11.	duration of s	tay in	n hospital (days)					
deta	ails of medica	ıl serv	vices received (not received -1; received: free -2	2, partly fre	e -3, on pa	yment -4)		
12.	surgery							
13.	medicine							
14.	X-ray/ECG/	EEG/	Scan					
15.	other diagno	stic te	ests					
16.	whether trea	ted or	n medical advice before hospitalisation (yes -1,					
	no-2)							
		17.	nature of treatment (code)					
if 1	in item 16	18.	level of care (code)					
		19.	duration of treatment (days)					
20.	whether trea	tment	t on medical advice continued after discharge					
	from hospita	ıl (yes	s -1, no-2)					
		21.	nature of treatment (code)					
if	1 in item 20	22.	, , , , , , , , , , , , , , , , , , ,					
		23.	duration of treatment (days)					

\*for female members of 4B ailment codes 87, 88 or 89 are only applicable

#### CODES FOR BLOCK 6

items 5, 17, 21:	nature of treatment:			
	Allopathy	-1	Homoeopathy	-3
	Indian system of medicine		Yoga & Naturopathy	-4
	(desi dawai: ayurveda, unani or siddha)	-2	other	-9
item 6:	type of medical institution:			
	Govt./public hospital	-1	Charitable/Trust/NGO run hospital	-2
	(incl. HSC/PHC/CHC etc.)		private hospital	-3
item 7:	reason for not availing govt./public hospita	l:		
	required specific services not available	-1	quality satisfactory but involves long waiting	-4
	available but quality not satisfactory/doctor	r -2	financial constraint	-5
	not available		preference for a trusted doctor/hospital	-6
	quality satisfactory but facility too far	-3	others	-9
item 9:	when admitted: during last 15 days - 1, 16 d	lays to	9 365 days ago - 2, more than 365 days ago - 3	
item 10:	when discharged: not yet -1, during last 15	days -	2, 16 days to 365 days ago -3	
items 18 & 22:	level of care:			
	Govt./public hospital	-1	private hospital	-3
	(incl. HSC/PHC/CHC etc.)		private doctor/clinic	-4
	Charitable/Trust/NGO run hospital	-2	informal health care provider	-5

1.	srl. no. of the hospitalisation case (as in item 1, block 6)	1	2	3	4	5
2.	srl. no. of member hospitalised (as in item 2, block 6)		-		-	
3.	age (years) (as in item 3, block 6)					
3. 4.	whether any medical service provided free (fully/partly) (yes: govt./public -1, pvt.(incl. Charitable/NGO/Trust run hospital) – 2, both-3; no - 4)					
expe	enditure for treatment during stay at hospital (in whole n	number of Rs	.)			
5.	package component (Rs.)					
non	package component (Rs.)	##########	;###########	!###########	+##########	####
б.	doctor's/ surgeon's fee (hospital staff/ other specialists)					
7.	medicines					
8.	diagnostic tests					
9.	bed charges					
10.	other medical expenses (attendant charges, physio- therapy, personal medical appliances, blood, oxygen, etc.)					
11.	medical expenditure (Rs.): total (items 5-10)					
12.	transport for patient (Rs.)					
13.	other non-medical expenses incurred by the household (registration fee, food, transport for others, expenditure on escort, lodging charges if any, etc.) (Rs.)					
14.	expenditure (Rs.): total (items 11-13)					
15.	total amount reimbursed by medical insurance company or employer (Rs.)					
16.	major source of finance for expenses (code)					
17.	2 <sup>nd</sup> most important source of finance for expenses (code)					
18.	place of hospitalisation (code)					
19.	if code is 5 in item 18, then state code (page 15)		1			
20.	loss of household income, if any, due to hospitalisation (Rs.)					

#### CODES FOR BLOCK 7 item 16 & 17 : source of finance for expenses

item 16 &17 :	source of finance for expenses: household income/ savings borrowings	-1 -2	sale of physical assets contributions from friends and relatives other sources	-3 -4 -9
item 18:	<b>place of hospitalisation:</b> same district (rural area) same district (urban area)	-1 -2	within state different district (rural area) within state different district (urban area) other state	-3 -4 -5

		s of spells of ailment of household members during the l tion cases)	last 15 day	s (hospita	lisation an	d non-	
1.		o. of spell of ailment	1	2	3	4	5
2.	srl. n 4A/5	o. of member reporting ailment (as in col.1 of block)					
3.	age (	years) (as in col.5, block 4A/ col.4, block 5)					
no. of	4.	ill					
days within	5.	on restricted activity					
the ref. period	6.	confined to bed					
7.	natur	e of ailment (code list on pages 14-15)					
8.	whet	her chronic (yes-1, no-2)					
9.	status	s of ailment (code)					
10.	total	duration of ailment (days)					
11.	natur	e of treatment (code)					
12.	whet	her hospitalised (yes-1, no-2)					
13.		or 9 in item 11, whether treatment taken on medical e (yes -1, no -2)					
if 1 in	14.	level of care (code)					
item 13	15.	<b>if 2-5 in item 14</b> , reason for not availing govt. sources (code)					
if 2 in	16.	reason for not seeking medical advice (code)					
item 13	17.	whom consulted (code)					

\*for female members of 4B this block should not be filled in

#### CODES FOR BLOCK 8

item 9:	status of ailment:				
	started more than 15 days ago and is continuing	-1	started within 15 days and is continuing	-3	
	started more than 15 days ago and has ended	-2	started within 15 days and has ended	-4	
item 11:	nature of treatment:				
	Allopathy	-1	Homoeopathy -3 no treatment	-5	
	Indian system of medicine		Yoga &		
	(desi dawai: ayurveda, unani or siddha)	-2	Naturopathy -4		
			Other -9		
item 14:	level of care:				
	Govt./public hospital	-1	private hospital -3		
	(incl. HSC/PHC/CHC etc.)		private doctor/clinic -4		
	Charitable/Trust/NGO run hospital	-2	informal health care provider -5		
item 15:	reason for not availing govt. sources:				
	required specific services not available	-1	quality satisfactory but involves long waiting	-4	
	available but quality not satisfactory	-2	financial constraint	-5	
	quality satisfactory but facility too far	-3	preference for a trusted doctor/hospital	-6	
			others	-9	
item 16:	reason for not seeking medical advice:				
	no medical facility available in the neighbourhood	1 -1	ailment not considered serious enough	-4	
	facility too expensive	-2	familial/religious belief	-5	
	cannot afford to wait long due	to	others	-9	)
	domestic/economic engagement	-3			
itom 17.	whom consulted. self / other household member/	friand_	1 madicing shop - 2 others - 9		

item 17: whom consulted: self / other household member/ friend - 1, medicine shop - 2, others - 9

1.	srl. no. of spell of ailment (as in item 1, block 8)	1	2	3	4	5
2.	srl. no. of member reporting ailment (as in col.2 of block 8)					
3.	age (years) (as in item 3, block 8)					
4.	whether any medical service provided free (fully/partly) (yes: govt./public -1, pvt.(incl. Charitable/NGO/Trust run hospital) – 2, both-3; no - 4)					
letai	Is of medical services received (not received - 1; received: fre	e - 2, partly	y free - 3, on j	payment - 4)		
5.	surgery					
6.	medicine received (AYUSH)					
7.	medicine received (other than AYUSH)					
8.	X-ray/ECG/EEG/Scan					
9.	other diagnostic tests					
nedi	cal expenditure for treatment (in whole number of Rs.)					
10.	doctor's/ surgeon's fee (hospital staff/ other specialists)					
11.	medicines: AYUSH					
12.	medicines: other than AYUSH					
13.	diagnostic tests					
14.	other medical expenses (attendant charges, physiotherapy, personal medical appliances, blood, oxygen, etc.)					
15.	medical expenditure (Rs.): total (items 10-14)					
16.	transport for patient (Rs.)					T
17.	other expenses incurred by the household (registration fee, food, transport for others, expenditure on escort, etc.) (Rs.)					
18.	expenditure (Rs.): total (items 15-17)					
19.	total amount reimbursed by medical insurance company or employer (Rs.)					
20.	major source of finance for expenses (code)					
21.	place of treatment (code)					
22.	if code is 5 in item 21, then state code (page 15)					
23.	loss of household income, if any, due to treatment (Rs.)					1

\*for female members of 4B this block should not be filled in

#### **CODES FOR BLOCK 9**

item 20:	<i>major source of finance for expenses:</i> household income/ savings borrowings	-1 -2	sale of physical assets contributions from friends and relatives other sources	-3 -4 -9
item 21:	<i>place of treatment:</i> same district (rural area) same district (urban area)	-1 -2	within state different district (rural area) within state different district (urban area) other state	-3 -4 -5

[10a	] particulars of economic independence and state of health of persons aged 60	years an	d above		
1.	srl. no. of member (as in col. 1, block 4A)				
2.	age (years) (as in col. 5, block 4A)				
3.	number of sons living				
4.	number of daughters living				
5.	state of economic independence (code)				
6.	if 1 in item 5, no. of dependents				
7.	if 2 or 3 in item 5, person financially supporting aged person (code)				
8.	place of stay (owned house (self/spouse)-1, other's house-2)				
9.	living arrangement (code)				
10.	physical mobility (code)				
11.	<b>if 1 or 2 in item 10</b> , person helping ( <i>household member -1</i> , other than household member -2, none -3)				
12.	own perception about current state of health (code)				
13.	own perception about change in state of health (code)				

#### CODES FOR BLOCK 10a

- *item 5: state of economic independence*: not dependent on others 1, partially dependent on others 2, fully dependent on others 3
- item 7: person financially supporting aged person: spouse -1, own children -2, grandchildren -3, others -9

#### Item 9: living arrangement:

living with spouse and other members - 1 living with spouse only - 2 living without spouse but with: children -3 other relations - 4 non-relations - 5 living alone:not as an inmate of old age home -6 living alone:as an inmate of old age home -7

- *item 10: physical mobility*: physically immobile: confined to bed 1, confined to home 2, able to move outside but only in a wheelchair 3; physically mobile 4
- item 12: own perception about current state of health: excellent/very good 1, good/fair 2, poor 3
- *item 13: own perception about change in state of health: compared to previous year: much better 1, somewhat better 2, nearly the same 3, somewhat worse 4, worse 5*

	expenditure (age 0-5 ye	on immunisation, if any, during the last 365 ars)	days and status of i	immunisation of ch	nildren as (	on date of
1.	srl. no. as in	ı block 4				
2.	age in month	15				
for i	tem 3 to 14 ev	ver received immunisation (yes-1, no-2)				
3	BCG					
4.	Oral Polio	birth dose				
5.	Vaccine	OPV1				
6.	(OPV)	OPV 2				
7.	doses	OPV 3				
8.		booster dose				
9.	DPT	DPT-1/ Pentavalent-1				
10.	/Penta-	DPT-2/ Pentavalent -2				
11.	valent	DPT-3/ Pentavalent -3				
12.	doses	booster dose				
13.	measles					
14.	other immu	nisation*				
15.	information	source of immunisation (code)				
16.	source of mo	ost immunisation (code)				
17.	expenditure	on immunisation, if any, during last 365 days				
18.	visit to angai	nwari center during last 30 days (in days)				

\*Hepatitis, Japanese Encephalitis(JE), Inactivated Polio Vaccine (IPV), Vitamin.-A etc.

#### **CODES FOR BLOCK 10b**

### *item 15: information source of immunisation:* Mother and Child Protection Card (MCPC)/ Immunisation card-1, others-2

#### *item16: source of most immunisation :*

from HSC/Anganwari centre	-1	from private hospital	-5
from PHC/dispensary/CHC/mobile medical unit	-2	from private doctor/clinic	-6
from govt./ public hospital	-3	no vaccination was received	-7
from charitable/trust/NGO run hospital	-4		

sl.			pre-natal care					delivery				post-natal (42 days after delivery) care (if 2-4 in col. 11)					
	age	serial no.	whether received	whether consumed		major		f 1-7 in	col. 7		if	2-7 in col	l. 11	major	if 1-7	7 in col. 15	to angan- wari
no. as in block 4/5)	(years) (as in block 4/5)	of pregnancy (1/2)	tetanus	Iron and	<b>if 1 in col. 5</b> , for how many days IFA were consumed?	source of receiving pre-natal care (code)	nature of pre- natal care	no. of pre- natal care visits*	expenditure incurred during last 365 days on pre- natal care (Rs.)	outcome of pregnancy (code)	place of delivery/ abortion (code)		6, in col. 12, expen- diture on delivery at home (Rs.)	source of receiving post- natal care (code)	nature of post- natal care	expenditure incurred during last 365 days on post-natal care (Rs.)	centre (AWC) during last 30 days (in days)
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)	(15)	(16)	(17)	(18)
. usi	al mem	bers (with	code 1 in col	1.11 of bloc	k 4A/code 1	in col. 9 b	olock 5)										
· ma	mbore f	rom other h	ousabolds w	ho ara inclu	dad as house	phold mam	bar for a	hildbirth	only (from	Block /B u	vith coriol	no 81 or	words)				
: me	mbers f	rom other h	ouseholds w	ho are inclu	ded as house	ehold mem	ber for cl	hildbirth	only ( <b>from</b>	Block 4B w	vith serial	no. 81 or	nwards)				
: me	mbers f	From other h	ouseholds w	ho are inclu	ded as house	ehold mem	ber for cl	hildbirth	only ( <b>from</b>	Block 4B w	vith serial	no. 81 or	iwards)				
: me	mbers f	rom other h	ouseholds w	ho are inclu	ded as house	ehold mem	ber for cl	hildbirth	n only ( <b>from</b>	Block 4B w	vith serial	no. 81 or	iwards)				
		From other h		ho are inclu	ded as house	ehold mem	ber for cl	hildbirth	a only ( <b>from</b>	Block 4B w	vith serial	no. 81 or	wards)				
	all visit		the sources	ho are inclu	ded as house	ehold mem	ber for cl	hildbirth	only ( <b>from</b>	Block 4B w	vith serial	no. 81 or	nwards)				
	all visit	ts to any of t ES FOR BL	the sources					hildbirth	only ( <b>from</b>	Block 4B w	vith serial	no. 81 or	iwards)				
	all visit CODH	ts to any of t ES FOR BL 7, 15: m	the sources OCK 11 pajor source of from HSC/AN	of receiving J IM/ASHA/A	pre-natal/ po WW	st-natal ca		-1	from priv	vate hospital	l	no. 81 or	-5				
	all visit CODH	ts to any of t ES FOR BLA 7, 15: m	the sources OCK 11 pajor source of from HSC/AN from PHC/di.	of receiving MASHA/A Spensary/CH	<b>pre-natal/ po</b> WW IC/mobile me	st-natal ca		-1 -2	from priv from priv	vate hospitat	l clinic		-5 -6				
	all visit CODH	ts to any of t ES FOR BLA 7, 15: m	the sources OCK 11 pajor source of from HSC/AN from PHC/dia from govt./ p	of receiving MASHA/A spensary/CH ublic hospita	<b>pre-natal/ po</b> WW IC/mobile me al	s <b>t-natal ca</b> dical unit		-1 -2 -3	from pri from priv from info	vate hospita vate doctor/o prmal health	l clinic c care prov.		-5 -6 -7				
	all visit CODH cols. 7	ts to any of t ES FOR BLA 7, 15: m	the sources OCK 11 Gior source of from HSC/AN from PHC/dia from govt./ p from charitab	of receiving MASHA/A spensary/CH ublic hospita ble/trust/NG6	<b>pre-natal/ po</b> WW IC/mobile me al O run hospita	s <b>t-natal ca</b> dical unit	re:	-1 -2 -3 -4	from priv from priv from info no care v	vate hospitat	l clinic c care prov.		-5 -6				
	all visit CODH cols. 7 cols. 8	ts to any of t ES FOR BLO 7, 15: m 8, 16: 1	the sources OCK 11 pajor source of from HSC/AN from PHC/di. from govt./ p from charital pature of pre	of receiving M/ASHA/A spensary/CH ublic hospita ble/trust/NGG -natal / post	pre-natal/ po WW IC/mobile me al O run hospita <b>-natal care</b> :	s <b>t-natal ca</b> dical unit il AYUSH-1,	re:	-1 -2 -3 -4 USH-2, k	from pri from priv from info no care w poth-3	vate hospita vate doctor/o ormal health was received	l clinic care prov. l	ider	-5 -6 -7 -8	er alive & a	bortion-4	: mother died	£
	all visit CODH cols. 7	ts to any of t ES FOR BLO 7, 15: m 8, 16: 1	the sources OCK 11 ajor source of from HSC/AN from PHC/di. from govt./ p from charitab nature of pre utcome of pro	of receiving IM/ASHA/A spensary/CH ublic hospita ole/trust/NGG -natal / post	pre-natal/ po WW IC/mobile me al O run hospita <b>-natal care</b> : egnancy conta	s <b>t-natal ca</b> dical unit dl AYUSH-1, inuing-1(fo	re: , non-AYU r 11A onl	-1 -2 -3 -4 USH-2, b y); moth	from pri from pri from pri from info no care poth-3 er alive & liv	vate hospita vate doctor/c ormal health was receivea e birth -2; m	l clinic care prov. l aother alive	ider e & stillbin	-5 -6 -7 -8 th -3; mothe			; mother died of elated causes)-5	
	all visit CODH cols. 7 cols. 8	ts to any of t ES FOR BL 7, 15: m 8, 16: n 1: of	the sources OCK 11 ajor source of from HSC/AN from PHC/di. from govt./ p from charitab nature of pre utcome of pro	of receiving IM/ASHA/A spensary/CH ublic hospite ble/trust/NGG -natal / post sgnancy: pro- rth -5; mothe	pre-natal/ po WW IC/mobile me al O run hospita -natal care: egnancy conta er died & stil.	s <b>t-natal ca</b> dical unit dl AYUSH-1, inuing-1(fo	re: , non-AYU r 11A onl	-1 -2 -3 -4 USH-2, b y); moth	from pri from pri from pri from info no care poth-3 er alive & liv	vate hospita vate doctor/c ormal health was receivea e birth -2; m	l clinic care prov. l aother alive	ider e & stillbin	-5 -6 -7 -8 th -3; mothe			; mother died d elated causes)-5	
	all visit CODE cols. 7 cols. 8 col. 11	<i>ts to any of t</i> <i>ES FOR BLA</i> <i>7</i> , 15: m <i>8</i> , 16: n <i>1</i> : of <i>2</i> : p	the sources OCK 11 aajor source of from HSC/AN from PHC/dis from govt./ p from charital nature of pre utcome of pre live bi	of receiving IM/ASHA/A spensary/CH ublic hospite ble/trust/NGG -natal / post sgnancy: pro- rth -5; mothe	pre-natal/ po WW IC/mobile me al O run hospita -natal care: egnancy conta er died & stil.	s <b>t-natal ca</b> dical unit dl AYUSH-1, inuing-1(fo	re: , non-AYU r 11A onl nother die	-1 -2 -3 -4 JSH-2, t y); moth d & abo	from priv from priv from info no care v poth-3 ver alive & live rtion-7; other	vate hospital vate doctor/o ormal health was received e birth -2; m s (e.g. mothe	l clinic care prov l nother alive er died befo	ider e & stillbir ore deliver	-5 -6 -7 -8 th -3; mothe				
	all visit CODE cols. 7 cols. 8 col. 11	<i>ts to any of t</i> <i>ES FOR BLA</i> <i>7</i> , 15: m <i>8</i> , 16: n <i>1</i> : of <i>2</i> : pt	the sources OCK 11 from HSC/AN from PHC/di. from govt./ p from charitab nature of pre utcome of pre live bi. lace of delive	of receiving M/ASHA/A spensary/CH ublic hospita ole/trust/NGG -natal / post egnancy: pra ry/ abortion msary/CHC/	pre-natal/ po WW IC/mobile me al O run hospita G <b>-natal care</b> : egnancy conti er died & still :	es <b>t-natal ca</b> dical unit ul AYUSH-1, inuing-1(fo lbirth -6; m	re: , non-AYU r 11A onl	-1 -2 -3 -4 /SH-2, t y); moth d & abo in	from pri from pri from pri from info no care poth-3 er alive & liv	vate hospitat vate doctor/d ormal health was received e birth -2; m s (e.g. mothe ust/NGO rut	l clinic care prov l nother alive er died befo	ider e & stillbir ore deliver	-5 -6 -7 -8 rth -3; mothe ry/abortion				

#### CODES FOR "NATURE OF AILMENT"

Block 6:	item 4;	Block 8: item 7	7

Reported Diagnosis and/or Main Symptom	Code	Reported Diagnosis and/or Main Symptom	Code
INFECTION		EYE	
Fever with loss of consciousness or altered consciousness	01	Discomfort/pain in the eye with redness or swellings/ boils	27
Malaria	02	Cataract	28
Fever due to DIPHTHERIA, WHOOPING COUGH	03	GLAUCOMA	29
All other fevers (Includes typhoid, Fever with rash/ eruptive lesions and fevers of unknown origin, all	04	Decreased vision (chronic) NOT including where decreased vision is corrected with glasses	30
specific fevers that do not have a confirmed diagnosis)	05	Others (including disorders of eye movements – strabismus, nystagmus,	31
TUBERCULOSIS	05	ptosis and adnexa)	
Filariasis	06	EAR	22
Tetanus HIV/AIDS	07 08	Earache with discharge/bleeding from ear/ infections	32
Other sexually transmitted diseases	09	Decreased hearing or loss of hearing	33
Jaundice	10	CARDIO-VASCULAR	
Diarrheas/ dysentery/ increased frequency of stools	11	HYPERTENSION	34
with or without blood and mucus in stools		Heart disease: Chest pain, breathlessness	35
Worms infestation	12	RESPIRATORY	
CANCERS		Acute upper respiratory infections (cold,	36
CANCERS (known or suspected by a physician)	13	runny nose, sore throat with cough,	
and occurrence of any growing painless lump in the body		allergic colds included) Cough with sputum with or without fever and NOT diagnosed as TB	37
BLOOD DISEASES		Bronchial asthma/ recurrent episode of	38
Anaemia (any cause)	14	wheezing and breathlessness with or	
Bleeding disorders	15	without cough over long periods or known asthma)	
ENDOCRINE, METABOLIC,		GASTRO-INTESTINAL	
NUTRITIONAL		Diseases of mouth/teeth/gums	39
DIABETES	16	Pain in abdomen: Gastric and peptic	40
Under-nutrition	17	ulcers/ acid reflux/ acute abdomen	
Goitre and other diseases of the thyroid	18	Lump or fluid in abdomen or scrotum	41
Others (including obesity)	19	Gastrointestinal bleeding	42
PSYCHIATRIC & NEUROLOGICAL		SKIN	
Mental retardation	20	Skin infection (boil, abscess, itching) and	43
Mental disorders	21	other skin disease	
Headache	22	MUSCULO-SKELETAL	
Seizures or known epilepsy	23	Joint or bone disease/ pain or swelling in	44
Weakness in limb muscles and difficulty in movements	24	any of the joints, or swelling or pus from the bones	
Stroke/ hemiplegia/ sudden onset weakness or loss of speech in half of body	25	Back or body aches	45
Others including memory loss, confusion	26		
GENITO-URINARY		INJURIES	
Any difficulty or abnormality in urination	46	Accidental injury, road traffic accidents and	52
Pain the pelvic region/reproductive tract	47	falls	
infection/ Pain in male genital area		Accidental drowning and submersion	53

Reported Diagnosis and/or Main Symptom	Code	Reported Diagnosis and/or Main Symptom	Code
Change/irregularity in menstrual cycle or	48	Burns and corrosions	54
excessive bleeding/pain during menstru-		Poisoning	55
ation and any other gynaecological and		Intentional self-harm	56
andrological disorders incl. male/female infertility		Assault	57
OBSTETRIC		Contact with venomous/harm-causing	58
Pregnancy with complications before or	49	animals and plants	
during labour (abortion, ectopic pregnancy, hypertension, complications during labour)		Symptom not fitting into any of above categories	59
Complications in mother after birth of child	50	Could not even state the main symptom Childbirth(for both live birth and stillbirth)	60
Illness in the newborn/ sick newborn	51	normal delivery	87
		Caesarean	88
		other types of delivery	89

#### CODES FOR "STATE"

#### Block 7: item 19; Block 9: item 22

State Name	Code	State Name	Code	State Name	Code
Andhra Pradesh	28	Karnataka	29	Tamil Nadu	33
Arunachal Pradesh	12	Kerala	32	Tripura	16
Assam	18	Madhya Pradesh	23	Telangana	36
Bihar	10	Maharashtra	27	Uttar Pradesh	09
Chhattisgarh	22	Manipur	14	Uttarakhand	05
Delhi	07	Meghalaya	17	West Bengal	19
Goa	30	Mizoram	15	A & N Islands	35
Gujarat	24	Nagaland	13	Chandigarh	04
Haryana	06	Odisha	21	Dadra & Nagar Haveli	26
Himachal Pradesh	02	Punjab	03	Daman & Diu	25
Jammu & Kashmir	01	Rajasthan	08	Lakshadweep	31
Jharkhand	20	Sikkim	11	Puducherry	34

