



GOVERNMENT OF NATIONAL CAPITAL TERRITORY OF DELHI

SOCIAL CONSUMPTION ON HEALTH IN DELHI

**Based
on
NSS 71st ROUND SURVEY
(Jan-June 2014)**

STATE SAMPLE

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

April, 2016



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PREFACE

The present report is based on the results of the State Sample of 71st National Sample Survey on 'Health, Morbidity'. This survey was carried out by this Directorate during January - June 2014. The survey was aimed at procuring basic quantitative information on health sector.

The report covers information on Morbidity & Hospitalization, extent of receipt of prenatal & postnatal care by women, expenditure incurred on treatment received from Public & Private sectors, use of AYUSH, sector-wise distribution of aged persons, economic dependencies, living arrangement and perception of aged persons about their well-being.

The report has been prepared by DPA unit of this Directorate under the guidance of Sh. C.K.Dutta, Dy. Director and Sh. K.R.Chhibber, Assistant Director. Sh. P.K.Chaurasia, Statistical Officer, Smt. Varsha Kumar and Sh. K.Prasanth Kumar, Statistical Assistants made untiring efforts for timely completion of this report. The field work of the survey was supervised by Sh. Ravi Kant Sharma, Assistant Director and Sh. R.K.Sharma, Statistical Officer. Data processing was done under the supervision of Sh. P.K.Srivastava, System Analyst, Mrs. Nidhi Rajpal and Mrs. Madhu Yadav, Assistant Programmers.

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. This Directorate is thankful to N Delhi Region for valuable guidance provided by them.

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 & researchers. Suggestions for improvement of future version of the report are welcome.

Place: Delhi
Date: April, 2016

Dr. B.K. Sharma
Director-cum- Special Secretary

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EXECUTIVE SUMMARY

The following are the main highlights of the survey conducted under NSS 71st round during Jan to June 2014.

(A) Demographic Characteristics

- The total number of households was estimated as **31.45 lakhs**. Out of them 0.88 lakhs (2.81%) were in rural areas and 30.56 lakhs (97.19 %) were in urban areas.
- Estimated no. of persons per house-hold was **5.32** persons in rural and **3.93** persons in urban.
- In Urban **29.52%** of the population are in the MPCE class of Rs.8001-12000, **20.90%** of population is in the MPCE class of Rs.4001-8000 where as only **2.24 %** of population in the MPCE class of up to Rs.4000.
- The most prevalent drinking water source, in the rural as well as urban areas, was found to be ‘tap’ followed by ‘tankers’. The proportions of households reported to be using tap water as drinking water for the major part of the year was 63.15% in rural and 87.29% in urban. Overall, 86.61% households were using tap water as drinking water.

(B) Morbidity and Health Care

- Per thousand ailing persons were 48 in rural in comparison to 50 in urban area.
- Proportion of ailing persons (PAP) was found to be highest among age groups (60+age years) followed by persons falling in the age group 45-59 years.
- In Delhi, 6.25 lakh persons reported ailments (non-hospitalized) during last 15 days preceding the day of survey, out of which 52.92% were females and 47.08% were males.
- The total number of cases of hospitalization (excluding child birth) was estimated as about 3.36 lakhs. Out of them rural areas accounted for only 6.61% and 93.39% occurred in urban areas
- Out of total 3.36 lakh hospitalization cases (excluding child birth) reported over different age groups, 27.20% of the cases were in the age group of 45-59 years followed by 25.89% in the age group 30-44 years.
- Out of total hospitalization cases (excluding Child Birth), 37.84 cases were reported for ailment group Infection (including fever of all types), followed by 13.82% cases for injuries (including road traffic accidents/falls), followed by 11.94% musculo-skeletal cases (joint disorders).
- The rate of hospitalization per lakh population was 4,730 in rural and 2,615 in urban. The rate of hospitalization (excluding child birth) in Delhi was much lower than national average (4400 for urban), thereby indicating a relatively better health profile in urban.
- The share of the Govt. health institution in the treatment of hospitalized cases in rural was 18.06% in Delhi as against 41.9% at the All India level. In urban govt., institutions

accounted for 51.39% share as against only 32% at the national level.

- The private hospitals provided free ward facility in only 0.95% of the total cases of hospitalization in Delhi.
- The average expenditure incurred for treatment (medical and other expenditure) per hospitalized case by people in Delhi has been estimated as Rs. 25,553 as against Rs.21,375 in the 60th Round, 2004.
- In Delhi out of total ailing persons, about 9.86% persons opted for AYUSH treatment. In rural 19.82% persons opted for AYUSH in comparison to 9.48% persons in urban.

(c) Profile of Aged (60+) Persons

- The survey estimated the number of aged persons (60+) as **636889**, which means that they account for **5.10%** in the total population of Delhi. Out of them, 608525 (95.55%) were residing in the urban areas and remaining 28364 (4.45%) were in the rural areas.
- Gender wise distribution of aged persons revealed that male accounted for 53.05% and females accounted for 46.95% of the total aged persons. In Delhi on an average there were about 2 aged persons per 10 households.
- Out of the total aged persons about 71.75% were in the age bracket of 60-69 years. In other words majority of them were relatively young within the category of aged persons.
- The old-age dependency ratio in Delhi was higher in the rural than in the urban area which was in contrast with the trends at the national level. In the urban areas, every 1000 persons in the age group of 15-59 years provide support, physically or otherwise to 69 aged persons, to maintain their daily life.
- The living arrangement describes the physical well-being of the aged. About 97.95% of the aged were living with their spouses & children.
- As high as 48.29 per cent of the aged had to depend on others for their day to-day maintenance. The situation was worse for elderly females as about 51.85 per cent were economically fully dependent. Males were much better off as 20.08 per cent among them were fully dependent on others for their livelihood.
- About 5.23% of the aged persons were either confined to their home or bed.

(D) Child Birth and Prenatal /Postnatal Care:

- Out of total estimated birth cases, 5.02% cases were reported in rural and 94.98% cases in urban.
- Maximum number of child birth cases i.e. 33.95%, were reported for mothers in the age group of 20-24 years, closely followed by mothers in the age group of 25-29 years.
- The average duration of stay of mothers at hospital per child birth was about 3 days.
- In Delhi out of total estimated child birth cases, 62.48% cases were reported in public hospitals.

- In urban 93.64% pregnant women received prenatal care whereas 100% pregnant women in rural received prenatal care and the average expenditure incurred per women on prenatal care was Rs.2712 in Delhi.
- In rural 72.75% women received postnatal care per child birth as compared to 76.98% in urban. The average expenditure incurred per women was Rs.1811 per child birth.
- Out of 9470 hospitalization cases for child birth in rural area, 6873 cases were reported for females in the age group of 20-24 years, Out of 1,79,277 hospitalization cases for child birth in the urban areas, 59,910 cases were reported in the age group of 25-29 years followed by 57,213 cases in the age group of 20-24 years.
- Average total medical expenditure incurred per child birth in Delhi comes to Rs. 11,098 in rural areas as compared to all India average of Rs. 5,544. The average total medical expenditure incurred per child birth arrived at Rs. 8205 in urban areas, as compared to all India average of Rs. 11685.
- In Delhi, average total medical expenditure per child birth incurred in public hospitals (Urban + Rural) was Rs. 1437 per case as against an expenditure of Rs. 19,863 in private hospitals (Urban + Rural).

SECTION ONE

INTRODUCTION

Background

The first survey on morbidity under NSS rounds was undertaken during the 7th round conducted between Oct. 1953 and March 1954 and subsequently under 11th to the 13th 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 17th round (Sept. 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 28th round (Oct. 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 35th round (July 1980 - June 1981) and the topics covered included health services like mass immunization and family welfare programmes. The second survey on Social Consumption was carried out in the 42nd 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 52nd round (July 1995 - June 1996). The fourth survey on 'Morbidity and Health care' was undertaken during NSS 60th 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 71st NSS round (January 2014-June 2014).

Scope Coverage & Objective

The survey on Social Consumption (Health) in 71st 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 different diseases 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 as well as different (lower) levels of public health care institutions, 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 inpatient and otherwise. Emphasis was laid on collecting information on 'out of pocket' expenditure for various episodes of illness.

For the first time in an NSS health survey, the data collected had enabled assessment of the role of alternative systems of medicine in respect of prevalence of use, cost of treatment and type of ailments 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 pre-natal and post-natal care by women who gave childbirth. 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.

Reference period

The enquiry on morbidity was conducted with a reference period of 15 days. All spells of ailment suffered by each member, both present 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 hospitalized treatment, information was collected for every event of hospitalization 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 child birth cases and expenditure incurred per child birth, reference period was 365 days preceding the date of survey.

SECTION TWO

CONCEPTS AND DEFINITIONS

Household: A group of person normally living together and taking food from a common kitchen constitutes a household. The word "normally" means that temporary visitors are excluded but temporary stay-aways are included. "Living together" is usually given more importance than "sharing food from a common kitchen" in drawing the boundaries of a household in case the two criteria are in conflict; however, in the special case of a person taking food with his family but sleeping elsewhere (say, in a shop or a different house) due to space shortage, the household formed by such a person's family members is taken to include that person also. Under-trial prisoners in jails and indoor patients of hospitals, nursing homes, etc., are considered as members of the households to which they last belonged. In this round, however, following exceptions in the definition of household was integrated:

- (a) Students residing in students' hostels were considered as members of the household to which they belonged before moving to the hostel irrespective of the period of absence from the household they belonged. Hence, they were not regarded as forming single-member households unlike previous rounds.
- (b) Any woman who has undergone childbirth during last 365 days was considered a member of the household which incurred the cost of childbirth irrespective of her place of residence during the last 365 days.
- (c) A child aged less than one year was considered a member of the household to which it's mother belongs.

Household size: The size of a household is the total number of persons in the household.

Nature of Treatment

Allopathy: In this survey the term 'allopathy' is used to refer to the broad category of medical practice that is sometimes called Western medicine, biomedicine, evidence-based medicine, or modern medicine. According to MedTerms 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'. The term 'allopathy' was coined in 1842 by C.F.S. Hahnemann to designate the usual practice of medicine (allopathy) as opposed to homeopathy.

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 Vaidji, Vaidya, Siddha Vaidya, Hakim, etc. (Sometimes people

also say *Jadi-Booti wale* Vaidji, Hakimji, 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, Gulab Jal 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), *Triphala* powder for problems like indigestion, loss of appetite, constipation, *Laung* (clove) oil for toothache, *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 Naturoathy, 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 was therefore qualify as **AYUSH treatment**, and medicines used by any of these systems were called **AYUSH medicines**.

Level of Care: Explanations of Associated Terms

Medical institution: This refers to any medical institution having provision for admission of sick persons as in-patients for treatment. Thus it covers 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- speciality hospital, etc.).

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 immunization 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, immunization, 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.

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 immunization 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.

(Note: An ANM is a nurse, usually with 18 months training, who is expected to provide a range of services as required in a health sub-centre. In some States the post is called village health nurse, or junior public health nurse.)

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) is staffed by a Medical Officer (MBBS or AYUSH) and Para medical 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 20,000 populations in hilly/tribal/difficult areas. The terms ‘additional PHC’, ‘mini-PHC’ and ‘new PHC’ are considered synonymous to ‘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 is always there in this facility type. Their 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.

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- centers), 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 called a private hospital. A private clinic is having the facilities for consultation with private doctor(s) but no in-patient facility.

Ailment and Related Terms:

Ailment – illness or injury: Ailment, i.e. illness or injury, meant any deviation from the state of physical and mental well-being. In this round whether a person suffered an ailment during a particular period, it was judged by some deviation from physical or mental well-being **was felt** by the person during the period subject to the following inherent limitations:

- An ailment may not cause any necessity of hospitalization, confinement to bed or restricted activity.
- An ailment may be untreated or treated.

For the purpose of this survey, ailments are INCLUSIVE of:

- All types of injuries, such as cuts, wounds, haemorrhage, fractures and burns caused by an accident, including bites to any part of the body
- Cases of abortion – natural or accidental.

However, following

- Cases of sterilisation, insertion of IUD, getting MTP etc.
- A state of normal pregnancy without complications
- Cases of pre-existing visual, hearing, speech, locomotor and mental disabilities. were NOT INCLUDED in ailment

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

Hospitalization: Admission as in-patient to a medical institution (as defined above) for treatment of some ailment or injury, or for childbirth, was called hospitalization. The birth

of a baby in a hospital was not a case of hospitalization of the baby. If, however, a baby who had never left the hospital after birth contracts an illness for which it had to stay in hospital, was regarded as a case of hospitalization. *Surgeries undergone in temporary camps set up for treatment of ailments (say, eye ailments) were treated as cases of hospitalization for the purpose of the survey*. For such cases it was possible for admission and discharge to take place on the same day.

Medical expenditure for treatment: The total expenditure during the last 365 days for medical treatment during the stay in the hospital or not as inpatient was accounted against the following items:

Package component (Rs.): “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 nowadays in all private hospitals. Normally, packages do not include additional diagnostic tests, attendant charges, physiotherapy, personal medical appliances, blood, oxygen, etc. When some treatment is received as a package (with pre-determined total cost) from the hospital, the information for constituent for this treatment, were not separately available. The total cost of the package treatment received will, however, as informed by the informant was recorded against “package component”. However, even when treatment has a package component, some extra medical expenses might have been incurred over and above the package component and those information were also recorded.

Doctor’s/surgeon’s fee: This was inclusive of the total amount paid on account of doctor’s/surgeon’s fees chargeable for the period of treatment within the reference period during the stay in hospital.

Medicines: The total amount paid for medicines (including drips) used for treatment whether of AYUSH or other – were recorded.

Diagnostic tests: The total amount paid for diagnostic tests carried out on the patient as in-patient or otherwise within the reference period – whether using the hospital’s diagnostic facilities or not – were recorded here.

Bed charges: Amount paid for bed charges during stay in hospital within the reference period was recorded here.

Other medical expenses (attendant charges, physiotherapy, personal medical appliances, blood, oxygen, etc.): All other expenditure involved in medical treatment were recorded as ‘Other’.

Attendant charges: This refers to charges for services of hired attendant(s) (caregivers) who stay with the patient in the hospital or not otherwise to attend to their needs. If any household member or relative attends to the patient, no imputation of charges for his/her services was made.

Physiotherapy: If the patient had any physiotherapy during the stay at hospital, the amount chargeable was included in this 'Other'

Personal medical appliances: This refers to personal medical appliances of durable nature like spectacles, contact lenses, intro-ocular lenses, hearing aids, trusses, crutches, catheter, nebulizer, artificial limbs, pacemaker, etc. for the purpose of treatment.

Blood, oxygen cylinder, etc.: Charges for blood, oxygen cylinders and other consumables such as gloves, bandages, plaster, etc., used. Apart from these, expenses on any other item used in medical treatment or diagnosis during stay in the hospital, or otherwise such as thermometer, infra-red lamp, blood pressure measuring equipment, blood sugar measuring kit, bed-pan, urinal, etc., were included in 'Other' if borne by the household.

Non-Medical expenditure

Transport for patient: Here the amount paid for transport charges (by ambulance or other vehicle) for the patient – whether accompanied by other household members or not – for the journey to hospital, Clinic or any other and for the return journey, were recorded in addition to the expenditure incurred to undergo a diagnostic test which the doctor advised.

Other non-medical expenses incurred by the household (food, transport for others, expenditure on escort, lodging charges if any, etc.): All other non-medical expenses were recorded here. Some important ones are:

- **Food:** will include expenses incurred on food supplied by the hospital for in-patient treatment and/or purchased from outside for the patient. The cost of meals supplied from home for the patient will not be included.
- **Transport (other than ambulance):** This includes transport expenses incurred by household members for travelling to the hospital to visit the patient and attend to the patient's needs, and for return journeys, including travel for procuring medicines, blood, oxygen, etc. for the hospitalized person or just to accompany the ailing person. **Lodging charges of escort(s):** Charges for lodging incurred by those household members who were required to stay in a hotel or a lodge for attending to the patient's needs during hospital stay were included.

- ***Other expenses incurred by the household:*** Other incidental charges paid and expenses incurred due to hospitalization, such as telephone charges made from PCO, and expenditure on soap, towel, toothpaste, etc. for the patient and escort(s), were included

Total amount reimbursed by medical insurance company or employer: The following points are important in this regard:

1. Expenses incurred, as recorded here are basically the expenditure made by the household (“out-of-pocket” expenditure) even if it was reimbursed later.
2. However, expenses met through “cashless facility” of medical insurance (paid directly to hospital by the insurance company) and expenses directly met by the employer to the hospital was excluded.

Thus, of the out-of-pocket expenditure as recorded, the amount reimbursed or expected to be reimbursed by the employer (public/private) or any insurance companies (public/private) or any other agencies was defined as ‘amount reimbursed by medical insurance company or employer’. Entry was made only in those situations where the household initially bears the medical expenditure, which the employer or the insurance company subsequently reimbursed partly or fully.

Source of finance for expenses: The total expenditure exclusive of the amount reimbursed was borne by the household. The money needed for this might have been spent from current household income or accumulated household savings. It might have been partly or wholly spent from the proceeds of sale of cattle or draught animals, jewellery or other physical assets or financed by borrowing. Part of it might have been contributed by friends and relatives as outright assistance.

CHAPTER THREE

SAMPLE DESIGN AND ESTIMATION PROCEDURE

Subject Coverage: The present survey on the subject “Social Consumption-Health” was a part of 71st NSS round conducted during January 2014 – June 2014. The last survey on health was conducted in 60th round of NSS (January 2004 - June 2004).

Geographical coverage: This survey was covered the whole part of Delhi.

Period of survey and work programme: The period of survey was of six months duration starting on 1st January 2014 and ending on 30th June 2014. The survey period of this round was divided into two sub-rounds of three months duration each as follows:

Sub-round 1: January - march 2014

Sub-round 2: April - June 2014

In each of these two sub-rounds equal number of sample villages/ blocks (FSUs) was 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: During this round, the following schedules of enquiry were canvassed:

Schedule 0.0 : List of Households

Schedule 25.0 : Social consumption: Health

Sample Design

Outline of sample design: A stratified multi-stage design was adopted for the 71st 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) were households in both the sectors. In case of large FSUs, one intermediate stage of sampling was the selection of two hamlet-groups (hg's)/ sub-blocks (sb's) from each rural/ urban FSU.

Sampling Frame for First Stage Units: For *the rural sector*, the list of 2011 census villages constituted the sampling frame. For the urban sector, the latest updated list of UFS blocks (phase 2007-12) was considered as the sampling frame.

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 1 lakh or more as per population Census a separate basic stratum was formed and the remaining urban areas of Delhi had been considered as another basic stratum.

Sub-stratification:

Rural sector: If 'r' was the sample size allocated for a rural stratum, the number of sub-strata formed was 'r/2'. The villages as per frame were first arranged in ascending order of population. Then sub-strata 1 to 'r/2' were demarcated in such a way that each sub-stratum comprised a group of villages of the arranged frame and had more or less equal population.

Urban sector: If 'u' was the sample size allocated for an urban stratum, the number of sub-strata formed was 'u/2'. For all strata, if $u/2 > 1$, 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 phase 2007-12. Then sub-strata 1 to 'u/2' were demarcated in such a way that each sub-stratum had more or less equal number of households.

Total sample size (FSUs): 148 urban and 8 rural FSUs were allocated for the state sample in Delhi.

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 2 with a minimum sample size of 2.

Allocation to sub-strata: Allocation for each sub-stratum was 2 in both rural and urban sectors.

Selection of FSUs: For the rural sector, from each stratum/sub-stratum, required number of sample villages was selected by 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 Blocks.

Both rural and urban samples were drawn in the form of two independent sub-samples and equal number of samples was allocated among the two sub rounds.

Selection of hamlet-groups/ sub-blocks

Criterion for hamlet-group/ sub-block formation: After identification of the boundaries of the FSU, it was determined whether listing will be done in the whole sample FSU or not. In case the approximate present 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 the rural sector and ‘sub-blocks’ in the urban sector by more or less equalizing the population as stated below:

approximate present population of the sample FSU	no. of hg’s/sb’s formed
less than 1200 (no hamlet-groups/sub-blocks)	1
1200 to 1799	3
1800 to 2399	4
2400 to 2999	5
3000 to 3599 and so on	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.

Formation of second stage strata and allocation of households: Three SSS were formed for Schedule 25.0 as per following criteria:

SSS No	Composition of SSS within a sample FSU	number of households surveyed	
		FSU without hg/sb	FSU with hg/sb (for each hg/sb)
1	households having at least one child of age less than 1 year	2	1
2	from the remaining, households with at least one member (including deceased former member) hospitalized during last 365 days	4	2
3	other households	2	1

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

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 -th FSU [village/block]

d = subscript for a hamlet-group/ sub-block ($d = 1, 2$)

j = subscript for j -th second stage stratum in an FSU/ hg/sb [$j = 1, 2$ or 3]

k = subscript for k -th sample household under a particular second stage stratum within an FSU/ hg/sb

D = total number of hg's/ sb's formed in the sample FSU

$D^* = (D - 1)$ for FSUs with $D \geq 1$

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

z = size of sample village/UFS block 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

Under the above symbols,

$y_{stmidjk}$ = observed value of the characteristic y for the k -th household in the j -th second stage stratum of the d -th hg/ sb ($d = 1, 2$) of the i -th FSU belonging to the m -th sub-sample for the t -th sub-stratum of s -th stratum.

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

Formulae for Estimation of Aggregates for a particular sub-sample and stratum x Sub - stratum:

Schedule 0.0:

Rural/Urban:

- (i) For estimating the number of households in a stratum x sub-stratum possessing a characteristic:

$$\hat{Y} = \frac{Z}{n} \sum_{i=1}^n \frac{1}{z_i} [y_{i1} + D_i^* \times y_{i2}]$$

where y_{i1} , y_{i2} are the total number of households possessing the characteristic y in hg's 1 & 2 of the i -th FSU respectively

- (ii) For estimating the number of villages in a stratum □□□ sub-stratum possessing a characteristic:

$$\hat{Y} = \frac{Z}{n} \sum_{i=1}^n \frac{1}{z_i} y_i$$

where y_i is taken as 1 for sample villages processing the characteristic and 0 otherwise.

Schedule 25.0:

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

$$\hat{Y} = \sum_j \hat{Y}_j$$

Overall Estimate for Aggregates for a sub-stratum:

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

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

Overall Estimate for Aggregates for a stratum:

Overall estimate for aggregates for a stratum (\hat{Y}_s) will be obtained as:

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

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

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 health care system in Delhi. The important parameters that have emerged from this survey include proportion of ailing persons, cases of hospitalization, overage expenditure on medical treatment and status 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 focus is principally on the Delhi estimates; as a secondary task, efforts were also made to examine the disparities in the utilization of the health services across the states/UTs and across their rural and urban sectors. The findings are based on 64 rural and 1173 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 hospitalization and cost of treatment jointly with related characteristics to reveal the multi-dimensional aspects of the health care system. The results on maternity care received by pregnant mothers 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 dependants, living arrangements, persons supporting the aged, physical immobility, etc.

4.0 Demographic Profile

Distribution of population, households, household size and Sex ratio by sector is presented in statement 4.0.1. Population of Delhi was estimated as 124.80 lakhs and households were estimated as 31.45 lakhs. Out of the total households, about 97.19 per cent belonged to urban and the rest of 2.81 per cent was in rural. A household consisted, on an average, of 5.32 persons in rural areas and 3.93 persons in the urban areas. The sex ratio in rural was had 646 females per 1000 males while in urban this ratio stood at 763 females per 1000 males.

Statement 4.0.1: Distribution of Population and Households

S.No	Sector	Estimated Households	Estimated Persons			Average Household	Sex
			Male	Female	Total		
A	Number						
	Rural	88378	285707	184622	470329	5.3	646
	Urban	3056597	6813446	5196863	12010309	3.9	763
	Delhi	3144975	7099153	5381485	12480638	3.9	758
B	Percentage						
	Rural	2.81	60.75	39.25	100	-	-
	Urban	97.19	56.73	43.27	100	-	-
	Delhi	100	56.88	43.12	100	-	-

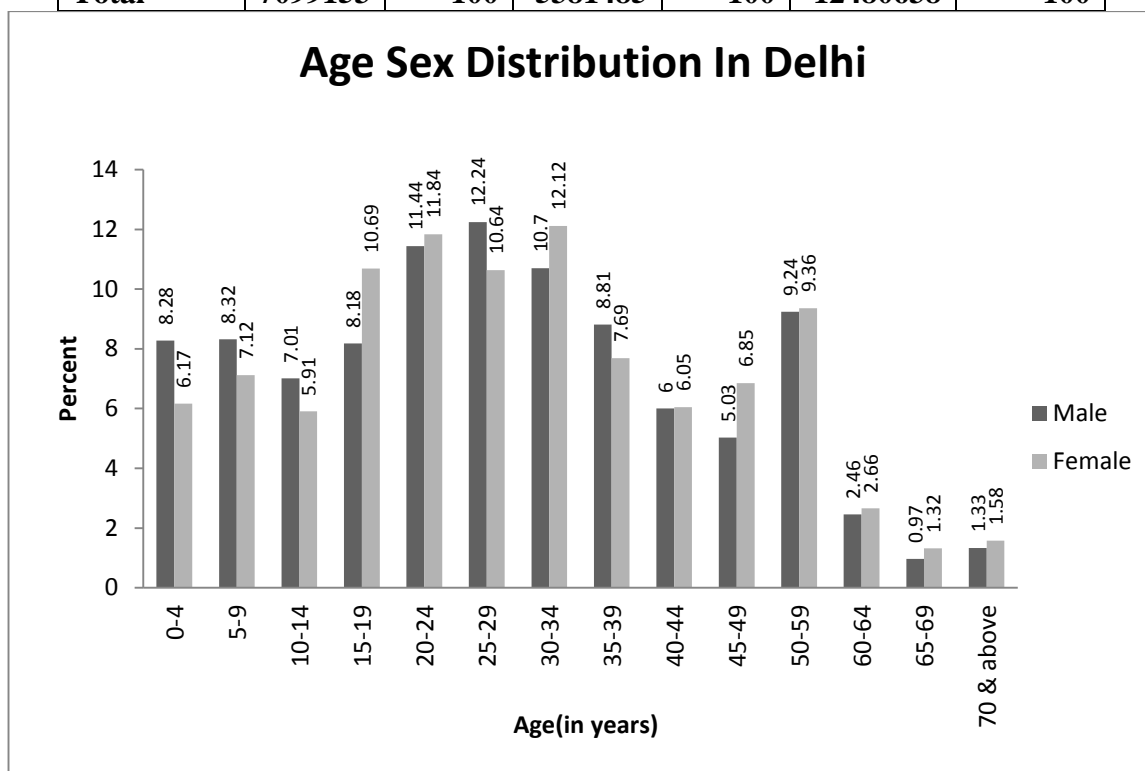
Age Group wise Distribution

Any study relating to a human population remains incomplete unless its 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.

Statement 4.0.2 Age group wise Distribution of Population in Delhi

Age group	Estimated population					
	Male	%	Female	%	Persons	%
0-4	587922	8.28	332134	6.17	920056	7.37
5-9	590702	8.32	383188	7.12	973890	7.80
10-14	497330	7.01	318009	5.91	815338	6.53
0-14	1675953	23.61	1033331	19.2	2709284	21.71
15-19	580473	8.18	575401	10.69	1155874	9.26
20-24	812013	11.44	637431	11.84	1449444	11.61
25-29	868807	12.24	572779	10.64	1441587	11.55
15-29	2261293	31.85	1785612	33.18	4046905	32.43
30-34	759792	10.70	652260	12.12	1412053	11.31
35-39	625400	8.81	413866	7.69	1039266	8.33
40-44	425928	6.00	325313	6.05	751241	6.02
30-44	1811120	25.51	1391440	25.86	3202560	25.66
45-49	356926	5.03	368462	6.85	725388	5.81
50-59	655967	9.24	503645	9.36	1159612	9.29
45-59	1012893	14.27	872107	16.21	1885000	15.1
60-64	174602	2.46	142965	2.66	317567	2.54
65-69	69158	0.97	70920	1.32	140078	1.12
70 & above	94134	1.33	85111	1.58	179245	1.44
60 & above	337893	4.76	298995	5.56	636889	5.10

Total	7099153	100	5381485	100	12480638	100
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In Statement 4.0.2, the distribution of population over broad age groups is presented separately for males and females. It can be seen from the above table that out of the total population in Delhi, males accounted for 56.88% whereas females accounted for 43.12% of the population. Maximum population i.e. 32.43% is in the broad age group of 15-29 years followed by 25.66% persons in the age group of 30-44 years, which means that a substantial number of persons belong to younger population. However, the broad age group containing minimum number of persons in Delhi is 60 and above (5.1%).

Monthly per capita expenditure (MPCE)

Household income, or for that matter ‘level of living’, is highly related with the ‘general health’ of the household members as well as to the extent of ‘medical care’ received by them. Thus, as the background information, the distribution of households and population by expenditure level is useful for a correlative study on morbidity and health care. The distributions of households and population by MPCE class for rural and urban are presented in Statement 4.0.3. In rural areas 35.03% persons of total rural population fall in the MPCE range of Rs.8000-12000/- followed by 27.49% in the MPCE range of Rs.12001 to 16000/-. As far as highest number of persons i.e. 29.52% in urban areas, maximum persons fall in the same category of MPCE class as in rural areas i.e. Rs.8000 to Rs.12000/- followed by 20.90% persons in the age group of Rs.4001-8000.

However, minimum population in rural and urban areas fall in the lowest MPCE

range i.e. below Rs.4000/-.

Statement 4.0.3: Distribution of Population and Households by MPCE Class

S.No.	MPCE Class (Rs.)	Estimated Household	% to total	Estimated persons	% to Total
A	Rural				
	Upto 4000	8154	9.23	8154	1.73
	4001-8000	6443	7.29	30360	6.46
	8001-12000	33120	37.48	164762	35.03
	12001-16000	24044	27.21	129305	27.49
	16001-20000	3491	3.95	22415	4.77
	20001-24000	9891	11.19	89082	18.94
	above 24000	3236	3.66	26251	5.58
	TOTAL	88378	100	470329	100
B	Urban				
	Upto 4000	235855	7.72	269050	2.24
	4001-8000	839085	27.45	2510270	20.90
	8001-12000	798663	26.13	3544873	29.52
	12001-16000	469024	15.34	2277837	18.97
	16001-20000	295147	9.66	1412592	11.76
	20001-24000	54141	1.77	282288	2.35
	above 24000	364681	11.93	1713398	14.27
	Total	3056597	100	12010309	100

Major source of drinking water

The quality of water used for drinking is a very important determinant of Health Condition. The source from where drinking water is collected by the household roughly indicates its quality and, thus the awareness of the households of the need for drinking water of proper quality.

Information collected on the major source of drinking water used by the household during the major part of a year has been presented in Statement 4.0.4 separately for the rural and urban areas.

Statement 4.0.4: Distribution of Households by main source of drinking water

S.No.	Sector	Source of drinking water						Total
		Bottled Water	Tap	Tube well/Hand Pump	Tankers	Pucca Well	Others	
A	Number							
	Rural	0	55812	1382	31184	0	0	88378
	Urban	1786	2668259	190059	196493	0	0	3056597
	combined	1786	2724071	191441	227677	0	0	3144975
B	Percentage							
	Rural	0	63.15	1.56	35.29	0.00	0.00	100.00
	Urban	0.06	87.29	6.22	6.43	0.00	0.00	100.00
	Combined	0.06	86.61	6.09	7.24	0.00	0.00	100.00

The most prevalent source, in the rural as well as urban areas, was found to be ‘tap’ followed by ‘tankers’. The proportions of households reported to be using tap water as drinking water for the major part of the year was 63.15% in rural and 87.29% in urban. In Delhi 7.24% households were dependent on tankers whereas 6.09% were dependent on tube well/hand pump to fulfill their drinking water needs.

4.1 Morbidity and Health Care

In this sub-section results pertaining to cases of morbidity not requiring hospitalization 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

Level of Morbidity:

Statement 4.1.1 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.

Statement 4.1.1: Rates of morbidity not requiring hospitalization

S.No	Item	Estimated No. of persons reported ailment during a period of 15 days		
		Male	Female	All
A	Rural			
	Estimated no. of persons reported illness	9406	13397	22803
	Population	285707	184622	470329
	Rate of morbidity/Per 1lakh population	3292	7256	4848
B	Urban			
	Estimated no. of persons reported illness	284975	317511	602486
	Population	6813446	5196863	12010309
	Rate of morbidity/Per 1lakh population	4182	6110	5016
C	Combined			
	Estimated no. of persons reported illness	294381	330908	625289
	Population	7099153	5381485	12480638
	Rate of morbidity/Per 1lakh population	4146	6149	5010

The morbidity rate in Delhi was estimated as 5016 per one lakh population. It shows a difference of more than 3.35 percentage point in the rates between rural and urban areas. Wide difference between the male and female population in morbidity rates was also observed across rural and urban.

Morbidity by age groups:

The estimates of morbidity for different broad age groups are also shown in statement 4.1.2 As expected, the Proportion of ailing persons (PAP) was found to be higher for persons of age group 45-59 years and old age group (60 years & above), while children in age group (0-14 years), persons in age group (15-29 years) and the middle aged (30-44 years) recorded lower. The proportion of ailing persons (PAP) was found to be the highest in the age group 60+ i.e. 32.72 closely followed by 45-59 years i.e. 32.66% whereas the lowest PAP i.e. 8.41% was found in the age group of 0-14 years.

Statement 4.1.2: Morbidity not requiring Hospitalization by age groups

Items	Estimated number of persons reported ailment during a period of 15 days			Population	Percentage to Total
	Male	Female	All		
0-14	38573	14037	52610	2709284	8.41
15-29	51411	40403	91815	4046905	14.68
30-44	38062	34055	72117	3202560	11.53
45-59	70919	133276	204195	1885000	32.66
60+	95415	109137	204552	636888	32.72
Sub-total	294380	330908	625289	12480637	100.00

Trends in Morbidity

The comparison of the current survey estimates of morbidity rates, with those of the previous NSS round (60th round: Jan 2004- June 2004) is presented in statement 4.1.3.

Statement 4.1.3: comparison of morbidity rates of NSS 71st and 60th rounds

Item	Percentage of persons reported illness							
	NSS 60th Round				NSS 71st Round			
	Delhi		All India		Delhi		All India	
	Rural	Urban	Rural	Urban	Rural	Urban	Rural	Urban
Male	0.8	1.8	8.3	9.1	3.3	4.2	8.0	10.1
Female	2.5	1.6	9.3	10.8	7.3	6.1	9.9	13.5
Total	1.6	1.7	8.8	9.9	4.8	5.0	8.9	11.8

The proportion of ailing persons in rural & urban has increased considerably in comparison to NSS 60th round results. Similar trend has been noticed at all India level. It can also be seen that proportion of ailing males/females has increased considerably in rural

and urban both when compared to previous round results.

Features of Ailments

The broad indicators of ailments such as average number of spells, duration, expenditure incurred on treatment of ailments were presented in statement 4.1.4. Out of the total cases treated only 57.5% were by Government medical institutions. The average expenditure involved in the treatment was Rs.998/-. Average duration of ailment was about 10 days, out of which average period of restriction was about 1 day and the ailing person remained confined to bed for 0.6 days on an average.

Statement 4.1.4: Features of ailment

S.No	Sector	Estimated Number of ailing persons	Average number of days during last 15 days			% cases in which treatment taken from govt., agency	Average Expenditure on treatment (Rs.)
			Ill	Restricted	confined to bed		
A	Rural						
	Male	9406	9.0	1.5	1.1	48.10	796
	Female	13397	10.4	0.6	0.6	11.60	383
	Total	22802	9.8	1.0	0.8	26.70	553
B	Urban						
	Male	284975	9.6	1.3	0.7	68.20	1287
	Female	317512	9.6	0.6	0.4	50.20	771
	Total	602487	9.6	1.0	0.5	58.70	1015
C	Delhi						
	Male	294381	9.6	1.3	0.8	67.60	1271
	Female	330909	9.7	0.6	0.4	48.60	755
	Total	625289	9.6	0.9	0.6	57.50	998

Nature of Treatment:

A number of persons have a faith in AYUSH treatment. AYUSH encompasses the Indian system of medicines, Yoga, Naturopathy and Homeopathy.

Statement 4.1.5: Distribution of persons (non-hospitalized) by nature of treatment.

Sector	AYUSH			Non AYUSH		
	M	F	All	M	F	All
Rural	2159	2361	4520	7246	11036	18282
Urban	10443	46691	57134	274532	270820	545353
Delhi	12602	49052	61654	281778	281856	563635

Statement 4.1.5 exhibits that in Delhi about 9.86% ailing persons opted for AYUSH treatment. Out of these 19.82% persons in rural opted for AYUSH treatment in comparison to 9.48% persons in urban.

4.2 Hospitalized Treatment of Ailments

Medical treatment of an ailing person as an inpatient in any medical institution having provision for treating the sick as inpatients is considered as hospitalized treatment. During the course of survey informants were asked to provide information on whether any member of the house hold availed medical treatment as in patient in any health institution during the period of last 365 days. This survey provides information on estimated no. of persons hospitalized, cases of hospitalization, type of institution & ailment, expenditure involved etc.. At the outset, survey results provide important health indicators like incidence of hospitalization, degree of dependence on public health institutions, role of private health agencies etc., to serve as valuable tools in the task of proper health management and help in achieving long term goal of health for all.

Estimated persons/Cases of Hospitalization

The total number of persons hospitalized for ailments (excluding Child Birth) was about 3.36 lakhs, out of which males constituted 59.20% in comparison to 40.80% females. Out of hospitalized persons 6.62% cases were in Rural, whereas, 93.38% cases were reported in Urban.

Statement 4.2.1: Distribution of Estimated Cases of Hospitalization by Sector and Sex (Excluding Child Birth)

S. No.	Item	Male	Female	Total
A	Estimated no. of cases hospitalization (During last 365 days)			
	Rural	11198	11047	22245
	Urban	187917	126148	314045
	Combined	199115	137175	336290
B	Estimated persons			
	Rural	285707	184622	470329
	Urban	6813446	5196863	12010309
	Combined	7099153	5381485	12480638
C	Rate of hospitalization (per 1 lakh population)			
	Delhi			
	Rural	3919	5984	4730
	Urban	2758	2427	2615
	Combined	2805	2549	2694
	All India			
	Rural	3372	3598	3480
	Urban	4145	4643	4381
	Combined	3605	3910	3751

It was estimated that 2694 persons per lakh population were hospitalized during the reference period. Out of which the rate of hospitalization per lakh population was 4730

cases in rural and 2615 cases in urban.

Hospitalized Treatment and Type of Hospital:

Statement 4.2.2 gives the share of government and private institutions in treating the hospitalized cases of ailments in the rural and urban areas. As far as hospitalized treatments of ailments are concerned, both public and private institutions are matching with each other in providing of inpatient health care both in the rural and urban areas in Delhi.

Statement 4.2.2: Distribution of Estimated Cases of Hospitalization by type of Hospital

S.No.	Type of Hospital	Rural	Urban	Combined	% to Total
A	Public Hospital				
	Free Ward	4017	153160	157177	95.03
	Paying General Ward	0	5835	5835	3.53
	Paying Special Ward	0	2386	2386	1.44
	All	4017	161381	165398	100.00
B	Private Hospital				
	Free Ward	0	3185	3185	1.86
	Paying General Ward	826	88860	89686	52.48
	Paying Special Ward	17403	60619	78022	45.66
	All	18229	152664	170893	100.00
C	Share of Public Hospital				
	All India	41.90	32.00		
	Delhi	18.06	51.39		

The share of the govt. health institution in the treatment of hospitalized cases in rural was only 18.06% in Delhi as against 41.9% at the All India level. On other hand in urban, government institutions accounted for 51.41% share as against only 32% at the National level. Coming to the type Wards in which in-patient services were provided it is interesting to observe that private hospitals provided free ward facility in only 1.86% cases as against similar arrangement in 95.03% of cases in public institutions.

Hospitalized Cases and Level of Living:

Statements 4.2.3 and 4.2.4 reveal the relationship between the number of cases of hospitalization during the 365 days preceding the date of survey and average monthly per capita consumption expenditure (MPCE), separately for rural and urban areas of the Delhi Considering MPCE as a proxy for level of living. In rural highest number of hospitalization cases were reported in MPCE class, Rs24000/- and above, whereas in urban areas highest number of hospitalization cases areas reported in the MPCE class of Rs.12000- Rs.16000/-.

Statement 4.2.3: Distribution of Estimated Cases of Hospitalization by MPCE Classes (Rural)

MPCE Class (Rs)	Estimated Cases of Hospitalization			% Cases of Hospitalization	
	Public Hospital	Private Hospital	Total	MPCE Class wise	Public Hospital
Up to 4000	0	0	0	0.00	0.00
4001-8000	1313	8	1321	5.94	99.39
8001-12000	1271	1858	3129	14.07	68.40
12001-16000	1433	4745	6178	27.77	30.20
16001-20000	0	436	436	1.96	0.00
20001-24000	0	4711	4711	21.18	0.00
above 24000	0	6471	6471	29.08	0.00
Total	4017	18229	22246	100.00	18.06
Percentage	18.06	81.94	100.00		

Statement 4.2.4: Distribution of Estimated Cases of Hospitalization by MPCE Classes (Urban)

MPCE Class (Rs)	Estimated Cases of Hospitalization			% Cases of Hospitalization	
	Public Hospital	Private Hospital	Total	MPCE Class wise	Public Hospital
Upto 4000	2258	1220	3478	1.11	64.92
4001-8000	37473	10016	47489	15.12	78.90
8001-12000	43113	24973	68086	21.68	63.32
12001-16000	52312	28389	80701	25.70	64.82
16001-20000	15206	35271	50477	16.07	30.12
20001-24000	3068	10471	13539	4.31	22.66
above 24000	7952	42323	50275	16.01	15.82
Total	161381	152664	314045	100.00	51.39
Percentage	51.39	49.61	100.00		

It is evident that only 18% of rural hospitalization cases were reported at public hospitals in contrast with 51.38% hospitalization cases in urban. In urban areas lowest cases of hospitalization were reported in the lowest MPCE class i.e. below Rs. 4000/- which indicates that non-affordability may be one of the prominent reasons. From the table it is evident that from MPCE range Rs.16001-20000 onwards the preferences for 'private' hospitals over 'public' hospitals increased with the increase in MPCE range.

Hospitalization by age groups

Incidence of hospitalization was found to be 7.96 %, the highest in aged persons and 4.85% persons in the age group of 45-59 years. This trend was found common for both rural and urban areas. The lowest numbers of hospitalization were reported in the age group of 15-29 years.

Statement 4.2.5: Distribution of Estimated Cases of Hospitalization by broad age groups

Age Group	Male			Female			All		
	Population	Estimated Person reported hospitalization	%	Population	Estimated Person reported hospitalization	%	Population	Estimated Person reported hospitalization	%
Rural									
0-14	90852	5579	6.14	16874	760	4.50	107726	6339	5.88
15-29	78982	360	0.46	67005	123	0.18	145987	483	0.33
30-44	60714	759	1.25	55334	1265	2.29	116048	2024	1.74
45-59	39412	1243	3.15	32792	6825	20.81	72204	8068	11.17
60+	15747	3257	20.68	12617	2074	16.44	28364	5331	18.79
Total	285707	11198	3.92	184622	11047	5.98	470329	22246	4.73
Urban									
0-14	1585102	24573	1.55	1016456	17797	1.75	2601558	42370	1.63
15-29	2182311	29813	1.37	1718607	28093	1.63	3900918	57906	1.48
30-44	1750406	45627	2.61	1336106	39398	2.95	3086513	85026	2.75
45-59	973481	56102	5.76	839315	27303	3.25	1812795	83405	4.60
60+	322147	31802	9.87	286378	13536	4.73	608525	45338	7.45
Total	6813447	187917	2.76	5196862	126128	2.43	12010309	314045	2.61
Combined									
0-14	1675954	30152	1.80	1033330	18557	1.80	2709284	48709	1.80
15-29	2261293	30173	1.33	1785612	28216	1.58	4046905	58389	1.44
30-44	1811120	46386	2.56	1391440	40663	2.92	3202561	87050	2.72
45-59	1012893	57345	5.66	872107	34128	3.91	1884999	91473	4.85
60+	337894	35059	10.38	298995	15610	5.22	636889	50669	7.96
Total	7099154	199115	2.80	5381484	137175	2.55	12480638	336291	2.69

Duration of Stay in Hospital:

Statement 4.2.6 shows the distribution of hospitalized cases by duration of stay in the hospital, separately for the government and private hospitals.

Statement 4.2.6: Average days of stay per hospitalization by type of hospital and sector

Type of hospital	Average days of stay per hospitalization		
	Rural	Urban	Combined
Public Hospital	5	6	6
Private Hospital	5	5	5

The average duration of stay for inpatient care in a hospital during a period of 365 days was relatively shorter in the private hospitals than in the govt. hospitals in both the rural and urban sectors. The average duration of stay in govt. hospital was 6 days and that in a private hospital was only 5 days.

Hospitalization by Type of Ailment:

Number of persons hospitalized with certain specific ailments, or ailment types, is presented in Statement 4.2.7.

Statement 4.2.7: Cases of Hospitalization by Type of Ailment:

Nature of Ailment Groups	Hospitalised case							
	Rural		Urban		Combined			%
	Male	Female	Male	Female	Male	Female	Total	
Infection	4212	546	79099	43393	83311	43940	127250	37.84
Cancers	0	0	1455	1715	1455	1715	3170	0.94
Blood diseases	637	0	1788	2325	2424	2325	4749	1.41
Endocrine, metabolic, nutritional	0	0	7091	4095	7091	4095	11187	3.33
Psychiatric & neurological	0	4510	5465	5829	5465	10339	15804	4.70
Eye	21	0	1335	2148	1356	2148	3504	1.04
Ear	0	21	1354	4821	1354	4843	6197	1.84
Cardio-vascular	1091	0	11513	8049	12604	8049	20653	6.14
Respiratory	0	957	10421	4337	10421	5293	15714	4.67
Gastro-intestinal	293	121	8174	7450	8466	7571	16038	4.77
Skin	0	0	1190	1219	1190	1219	2409	0.72
Musculo-skeletal	2159	2200	21126	14679	23285	16879	40164	11.94
Genito-urinary	2257	615	3454	8325	5711	8940	14651	4.36
Obstetric	406	455	5908	7145	6314	7600	13914	4.14
Injuries	121	1623	31190	13530	31312	15153	46465	13.82
All	11198	11047	187917	126128	199116	137175	336291	100.00

It may be of interest to note the ailment group 'infection' (including fever of all types) accounts for 37.84% of the total cases of hospitalizations, 'injuries' (including accidents) 13.82%, and musculo-skeletal (joint diseases) accounted for 11.94% of total hospitalization cases in Delhi.

Average Expenditure for Medical Treatment per Hospitalization

For the hospitalized treatments, information on expenses incurred was collected separately for each event of hospitalization during the period. The expenditure for hospitalized treatment on items such as doctor's fees, bed charges and cost of medicines and other materials and services supplied by the hospital, as well as charges for diagnostic tests done at the hospital, were included in *medical expenditure*. The 'other expenses' relating to hospitalized treatment is the same as that for non-medical treatments. The estimates of 'total expenditure' for hospitalized treatment were arrived at as the sum of medical expenditure and other expenditure.

Statement 4.2.8: Average medical expenditure and non-medical expenditure (Rs) on account of hospitalization (EC) for gender and sector.

Sector	Average medical expenditure during stay at hospital (Rs.)			average of other expenses on account of hospitalization (Rs.)			Avg total expenditure(Rs.)		
	Male	Female	All	Male	Female	All	Male	Female	All
Rural	6673	56381	31358	1687	3685	2679	8359	60066	34037
Urban	19573	24728	21644	3598	2876	3308	23172	27604	24952
Delhi	18848	27277	22286	3491	2941	3266	22338	30218	25553

Statement 4.2.8 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 and the country as a whole. The average medical expenditure in Delhi per hospitalization case is Rs. 22286/-. 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.31358) than in the urban (Rs.21644). Statement also indicates the presence of a distinct gender bias in respect of expenditure incurred per hospitalization. When average other expenses like conveyance etc. is added to average medical expenditure it can be seen that average total expenditure comes to Rs.25553/-. The average amount spent for hospitalized treatment at the national level is less than the cost involved in Delhi.

Trends in Hospitalization

Comparison of key indicators of N.S.S 71st round with that of N.S.S. 60th round is presented in statement 4.2.9. The proportion of persons availed treatment as inpatient in hospital registered a marginal increase during 2014 when compared to that of 2004. The role of government institutions in the treatment of hospitalized cases has decreased from 46.4% during 2004 to 18.06% in 2014 in rural area, whereas in urban it decreased from

58.8% to 51.39% during the same period. Moreover, compared to the estimate of *medical expenditure* obtained from the 2004 (NSS 60th round) survey. The average medical expenditure incurred at government hospitals in rural has decreased substantially whereas in urban it has remained more or less same. Reverse trend has been observed for Pvt. Hospitals in rural, where it has increased substantially. However, expenditure incurred in private hospitals has remained more or less same in Urban.

Statement 4.2.9 Trends in hospitalization indicators

S. No	Item	NSS 60th Round				NSS 71st Round			
		DELHI		ALL INDIA		DELHI		ALL INDIA	
		Rural	Urban	Rural	Urban	Rural	Urban	Rural	Urban
A	% of Persons Hospitalized								
	Male	1.3	1.7	2.4	3.1	3.92	2.76	3.37	4.15
	Female	1.9	1.7	2.2	3.1	5.98	2.43	3.60	4.64
	Total	1.6	1.7	2.3	3.1	2.81	2.55	3.48	4.38
B	Cases of Hospitalization (%)								
	Government	46.4	58.8	41.7	38.2	18.06	51.39	41.90	32.00
	Others	53.6	41.2	58.3	61.8	81.94	49.61	58.10	68.00
C	Average Medical Exp (Rs)/Case								
	Government	14477	6829	3238	3877	2615	6895		
	Others	22375	35295	7408	11553	37692	37234		
	Total	17747	21986	5695	8851	31358	21644		

4.3 Child Birth and Prenatal/Postnatal Care:

Statements 4.3.1 to 4.3.5 reveal distribution of sector-wise cases of hospitalization for child birth by age of mother for MPCE class, number of pregnant women who received prenatal/postnatal care and expenditure incurred thereon. It also reveal average expenditure incurred per child birth in public/private hospitals and average duration of stay per child birth.

Statement 4.3.1: Distribution of cases of hospitalization for childbirth by age of the mother for each class of MPCE (Rural).

MPCE	Number of hospitalized cases by age of the mother								Avg. Duration of Stay (days)
	<20	20-24	25-29	30-34	35-39	40-44	>45	Total	
Upto 4000	0	0	0	0	0	0	0	0	0.0
4001-8000	0	1498	364	0	0	0	0	1862	2.8
8001-12000	21	437	543	0	0	0	0	1001	2.3
12001-16000	0	227	835	43	0	0	0	1105	3.2
16001-20000	0	0	0	791	0	0	0	791	3.3
20001-24000	0	4711	0	0	0	0	0	4711	2.0
above 24000	0	0	0	0	0	0	0	0	0.0
All class	21	6873	1743	833	0	0	0	9470	2.4

In rural 72.58% females hospitalized for child birth were in the age group of 20-24 years followed by 18.41% females in the age group of 25-29 years. Out of total child birth cases in rural 49.75% households were in the MPCE class of Rs.20,001 to 24,000. The average duration of stay of mother for each child birth was 2.4 days.

Statement 4.3.2: Distribution of cases of hospitalization for childbirth by age of the female for each class of MPCE (Urban)

MPCE	Number of hospitalized cases by age of the female								Avg. Duration of Stay (days)
	<20	20-24	25-29	30-34	35-39	40-44	>45	Total	
Upto 4000	0	0	0	0	0	0	0	0	0.0
4001-8000	646	9082	15524	7216	2682	0	1171	36321	3.2
8001-12000	222	23192	19138	7661	3417	199	0	53830	3.2
12001-16000	366	15601	7254	12010	2385	0	0	37615	2.8
16001-20000	760	6604	5305	11116	1603	1199	0	26587	3.3
20001-24000	0	309	2137	1799	0	0	0	4245	4.2
above 24000	0	2426	10552	7432	269	0	0	20679	3.4
All class	1994	57213	59910	47234	10357	1398	1171	179277	3.2

In urban, the highest number of females i.e. 33.42% hospitalized for child birth were in the age group of 25 - 29 years, followed by 31.91% females in the age group of 20-24 years. The households which reported child birth during reference period were highest in the MPCE class of Rs.8001-12000. The average duration of stay of mother per child birth was 3.2 days.

Statement 4.3.3: Distribution of cases of hospitalization for childbirth by age of the female for each class of MPCE (Rural + Urban)

MPCE	Number of hospitalized cases by age of the female								Avg. Duration of Stay (days)
	<20	20-24	25-29	30-34	35-39	40-44	>45	Total	
Upto 4000	0	0	0	0	0	0	0	0	0.0
4001-8000	646	10579	15888	7216	2682	0	1171	38182	3.2
8001-12000	243	23630	19681	7661	3417	199	0	54831	3.2
12001-16000	366	15828	8089	12053	2385	0	0	38720	2.8
16001-20000	760	6604	5305	11907	1603	1199	0	27378	3.3
20001-24000	0	5019	2137	1799	0	0	0	8956	3.1
above 24000	0	2426	10552	7432	269	0	0	20679	3.4
All class	2015	64086	61653	48067	10357	1398	1171	188747	3.2

The statement depicts that in maximum number of child birth cases i.e. 33.95%, the females hospitalized were in the age group of 20-24 years, followed by 32.66% in the age group of 25-29 years. A maximum number of child birth cases (29.05%) were in the households falling in the MPCE class Rs.8001-12000 and duration of stay of mother for each child birth was about 3.2 days.

Statement 4.3.4: Number of pregnant women received pre-natal and post-natal care and average expenditure incurred.

Sector	No. of pregnant women Not received pre-natal care	No. of pregnant women reporting pre-natal care	Average expenditure incurred on pre natal care (Rs.)	No. of pregnant women Not received post-natal care	No. of pregnant women reporting post-natal care	Average expenditure incurred on post natal care (Rs.)
Rural	0	9487	3961	2586	6902	2285
Urban	13374	196869	2652	43059	143981	1788
Delhi	13374	206356	2712	45645	150883	1811

It is evident that out of 2.06 lakh pregnant women who received prenatal care, 9487 were in rural and 196869 in urban. In rural 100% pregnant women received prenatal care in comparison to 93.64% in urban. The average expenditure incurred on prenatal care per female was Rs.2712/- in Delhi. It can be seen that more expenditure was incurred in this respect in rural as compared to urban. In rural 72.75% females received postnatal care per child birth in comparison to 68.48% in urban and average expenditure incurred on postnatal care per mother was Rs.1811/-.

Statement 4.3.5: Average Expenditure by sector and type of hospital incidental to child birth.

Sector	Hospitalized Cases			Avg. Expenditure (in Rs.)		
	public	private	all	public	private	all
Rural	3212	6258	9470	646	16461	11098
Urban	114719	64558	179277	1459	20192	8205
Delhi	117931	70816	188747	1437	19863	8350

Out of total child birth cases in rural, 33.92% cases of mother's hospitalization were reported in public hospitals in comparison to 63.99% cases in urban, which may be due to more availability/proximity of public hospitals in urban. It can also be seen that average expenditure per child birth in Delhi comes to Rs.8350/-. There is substantial difference between expenditure incurred in public and private hospitals for each child birth.

4.4 Profile of Aged Persons in Delhi

Aged persons are considered as valuable human assets of the society though they may have become economically inactive population. The issues relating to aged persons like their security, health care, grant of special privileges such as old age pension for their sustenance, concessional fares for travel, matters relating to old age homes, other relief in income tax, preferential rates of interests on their deposits for protection against consequences of economic liberalization etc are on the agenda of the present day governments both at the centre and states. In fact **October 1 is being observed as International day of older persons** since 2004. Therefore, collection and maintenance of comprehensive data on this subject is the need of the hour to serve as effective inputs for devising policies & programs for their well being.

The objective of collecting information on 60+ persons through this survey was to assess the structure and composition of the aged persons, their economic status, living arrangement, number of surviving children, persons supporting the aged, their health perception etc. Similar estimates obtained from the earlier surveys and Census are also placed side by side to give an idea about the changes over the period of time.

Estimated number of Aged persons

Out of the total projected population of 124.80 lakhs in Delhi, the survey estimated the number of aged persons (60+) as **636889**, which means that they count for **5.10%** in the total. Out of them, 608525 (95.55%) were residing in the urban areas and remaining 28364 (4.45%) were in the rural areas. Gender wise distribution of aged persons revealed that male accounted for 53.05% and 46.95% was the share of females. In Delhi on an average there were about 2 aged persons per 10 households.

Statement 4.4.1 Estimated population households and the Aged Persons

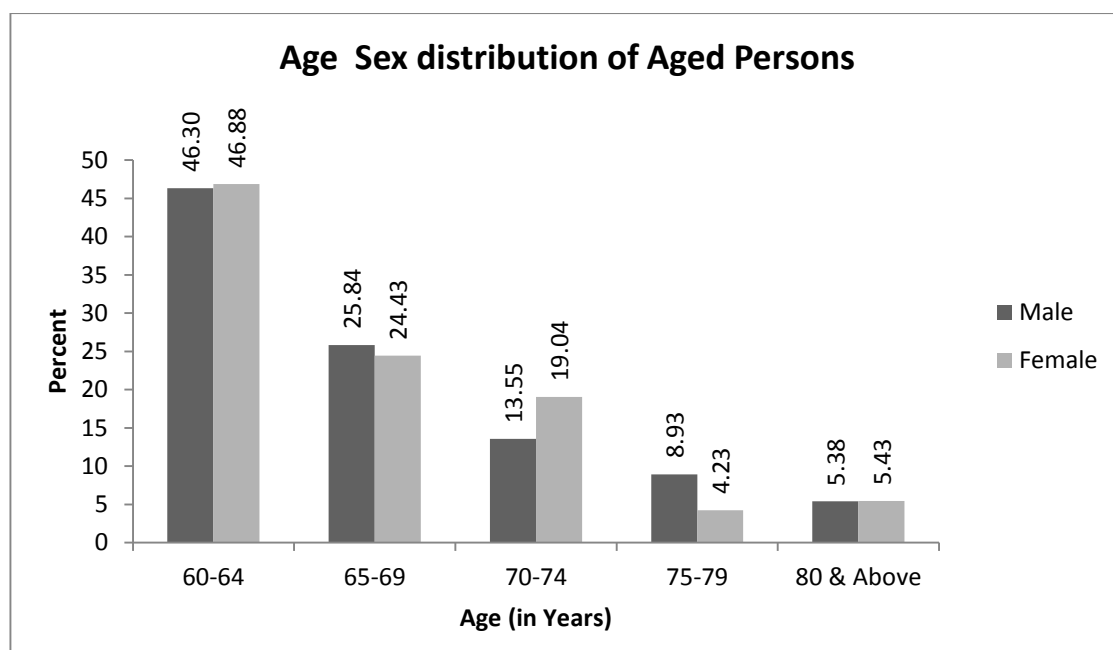
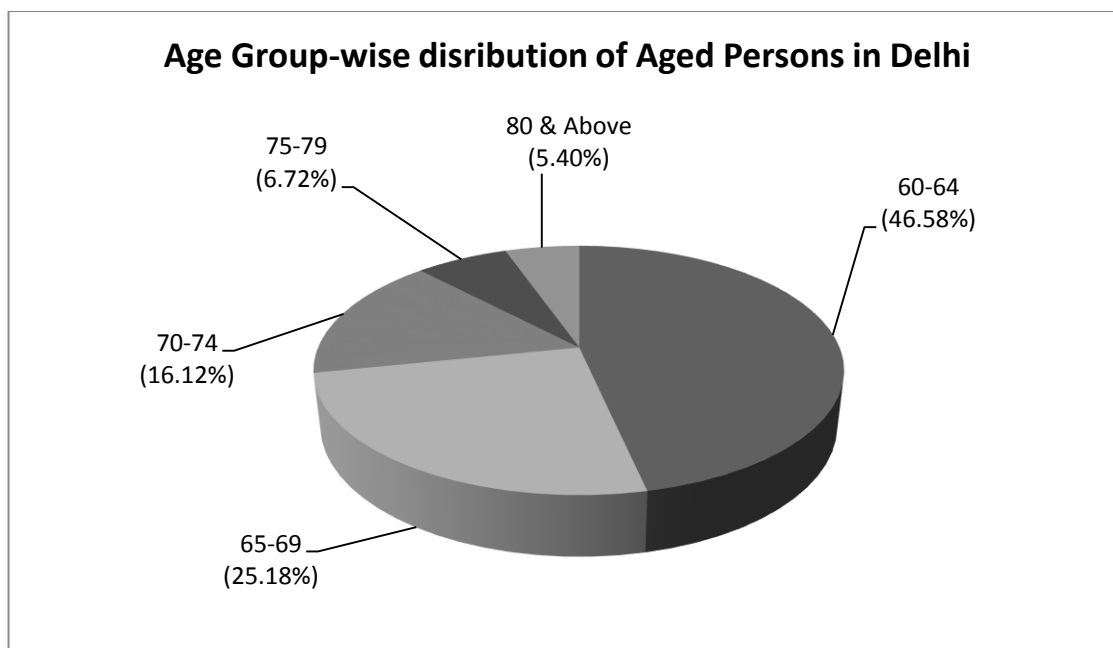
Sector	Estimated Households	Estimated Persons	Estimated Number of Aged Persons			Percentage of aged persons to total	Average Number of Aged Persons per household
			Male	Female	Total		
Rural	88378	470329	15747	12617	28364	6.03	0.3
Urban	3056597	12010309	322147	286378	608525	5.07	0.2
Delhi	3144975	12480638	337894	298995	636889	5.10	0.2

Distribution of Aged Persons

Distribution of aged persons in terms of broad age groups is presented in statement 4.4.2 It is essential to observe that out of the total aged persons about 71.75% were in the age bracket of 60-69 years. In other words majority of them were relatively young within the category of aged persons .The pie diagram gives a vivid presentation of this scenario.

Statement 4.4.2 Age group wise distribution of estimated Aged Persons

S. No.	Age Group	Aged Persons			
		Male	Female	Total	Percentage to Total
A	RURAL				
	60-64	3291	8121	11412	40.24
	65-69	9077	4216	13293	46.87
	70-74	3260	122	3382	11.92
	75-79	97	158	255	0.9
	80 & Above	21	0	21	0.07
	Total	15746	12617	28363	100
B	URBAN				
	60-64	153170	132051	285221	46.87
	65-69	78221	68828	147049	24.16
	70-74	42515	56793	99308	16.32
	75-79	30069	12484	42553	6.99
	80 & Above	18172	16222	34394	5.65
	Total	322147	286378	608525	100
C	COMBINED				
	60-64	156461	140172	296633	46.58
	65-69	87298	73044	160342	25.18
	70-74	45775	56915	102690	16.12
	75-79	30166	12642	42808	6.72
	80 & Above	18193	16222	34415	5.40
	Total	337893	298995	636888	100



The age-sex distribution of 60+ is also displayed in pyramid form which clearly conveys that proportion of population decreases with the increase in age.

Sex Ratio

According to Population Census, the sex ratio among the aged in Delhi which was 841 females per 1000 males during 1981, dropped to 836 during 1991 and thereafter increased to 964 in 2011. However, as per the results of NSS 71st round, sex ratio among aged persons increased from 874 in 2004 (60th NSS Round) to 885 in 2014.

Trends in the proportion of Aged Persons

Persons in the category of 60+ accounted for 6.03% in rural, 5.07% in urban and 5.10% of the total population of Delhi however this proportion was slightly lower in the 60th round. The old age dependency rate of Delhi has declined from 8.38% to 6.97% during the same period.

Statement 4.4.3: Aged Persons under NSS rounds and population Census

Item	RURAL			URBAN			DELHI		
	% of Aged Persons to total population	Sex ratio among aged persons	Dependency Ratio	% of Aged Persons to total population	Sex ratio among aged persons	Dependency Ratio	% of Aged Persons to total population	Sex ratio among aged persons	Dependency Ratio
NSS ROUNDS									
60th (Jan 2004-Jun 2004)	7.90	842	13.41	5.30	878	8.05	5.50	874	8.38
71st (Jan 2014-Jun 2014)	6.03	801	8.50	5.07	889	6.91	5.10	885	6.97
CENSUS									
1991	3.96	805	7.13	2.38	842	3.92	2.54	836	4.22
2001	4.53	950	7.69	5.24	965	8.40	5.20	964	8.35
2011	6.47	1016	10.29	6.84	989	10.38	6.83	989	10.37

The proportion of aged persons, which was 2.54% in 1991 grew to 5.20% in 2001 and 6.83% in 2011. As per Population Census data the dependency rate in Delhi which was 4.22 in 1991 rose to 8.35 in Census 2001 and further increased to 10.37 as per Census 2011 record.

Aged Persons by MPCE Classes

Distribution of data of aged persons in terms of MPCE classes is presented in statements 4.4.4 to 4.4.6 for rural and urban areas separately. The statement depicts that out of total aged persons in Rural, maximum persons i.e.16305 were in the MPCE (Monthly Per Capita Expenditure) class of Rs. 8000-12000/ followed by 8877 persons in the MPCE class of Rs.12001-16000/. However, average number of aged persons per household in rural was the highest i.e. 0.63 in the MPCE class Rs.24000 and above. Similar pattern was observed in Urban, where maximum number of aged persons (188653) belonged to the same MPCE class i.e. Rs. 8001-12000/- and average number of aged persons per household was maximum in the highest MPCE class i.e. Rs. 24000 & above.

Statement 4.4.4: Estimated number of households and aged persons by sex (Rural)

MPCE Class	Estimated households	Estimated persons	Estimated number of aged persons			Percentage of aged persons to total	Average number of aged persons per household
			Male	Female	Persons		
Upto 4000	8154	8154	0	0	0	0	0
4001-8000	6443	30360	0	0	0	0	0
8001-12000	33120	164762	8163	8142	16305	9.90	0.49
12001-16000	24044	129305	5517	3360	8877	6.87	0.37
16001-20000	3491	22415	991	158	1149	5.12	0.33
20001-24000	9891	89082	0	0	0	0	0
above 24000	3236	26251	1076	957	2033	7.74	0.63
All class	88378	470329	15747	12617	28364	6.03	0.32

Statement 4.4.5: Estimated number of households and aged persons by sex (Urban)

MPCE Class	Estimated households	Estimated persons	Estimated number of aged persons			Percentage of aged persons to total	Average number of aged persons per household
			Male	Female	Persons		
Upto 4000	235855	269050	1147	579	1725	0.64	0.01
4001-8000	839085	2510270	37325	16557	53882	2.15	0.06
8001-12000	798663	3544873	91112	97542	188653	5.32	0.24
12001-16000	469024	2277837	83800	48274	132073	5.80	0.28
16001-20000	295147	1412592	32845	54289	87134	6.17	0.30
20001-24000	54141	282288	7462	3504	10966	3.88	0.20
above 24000	364681	1713398	68457	65634	134092	7.83	0.37
All class	3056597	12010309	322147	286378	608525	5.07	0.20

Statement 4.4.6: Estimated number of households and aged persons by sex (Combined)

MPCE Class	Estimated households	Estimated persons	Estimated number of aged persons			Percentage of aged persons to total	Average number of aged persons per household
			Male	Female	Persons		
Upto4000	0	277204	1147	578	1725	1.48	0.0
4001-24000	82151	1462445	68386	66014	134400	9.20	1.6
above 24000	3062824	1739649	69533	66592	136125	7.82	0.0
All class	3144975	12480638	337894	298995	636889	5.10	0.2

Dependency Ratio

It measures the responsibilities of the aged to the working-age population. In our country, generally, persons aged 15 to 59 years are supposed to form the population of working ages and at age 60, people generally retire or withdraw themselves from work. Thus, the population aged 60 or more divided by the number aged 15 to 59 years gives the old-age gross dependency ratio. A higher ratio implies relatively increased burden on the society and its economically active segment of the population. However a large number of people even after 60 years of age continue to pursue their avocations and remain economically active. The conventional method explained above was taken into account in calculating this rate treating it as a demographic fact.

Statement 4.4.7: Old age Dependency Ratios

Sector	Population in Age		Dependency Ratio	Dependency Ratio (Census 2011)
	15-59	60+		
Rural	334239	28364	8.49	10.28
Urban	8800226	608525	6.91	10.37
Combined	9134465	636889	6.97	10.37

In the rural areas, every 100 persons in the age group of 15-59 years provide support, physically or otherwise to about 8 aged persons, to maintain their daily life when compared to the average of around 10 persons (as per Census 2011 record) in this sector. This number was 7 in the urban areas as against average of 10 persons (as per Census 2011 record).

The overall dependency ratio in Delhi as per current NSS Round came to around 7 whereas as per census 2011 results it was 10 aged persons for every 100 persons between the age 15-59 years.

Living Arrangement

The issue of *living arrangement* is of utmost priority as far as aged persons are concerned both from individual as well as society point of view. The living arrangement describes how the physical well-being of the aged is taken care of in the family in our society. Therefore, the survey focused on this aspect and options that strikes to our mind are stay with children, spouse and the newly emerging trend of institutional arrangement like old age home , the later being more relevant for cities. The results are certain to reflect the present day set up in this respect.

Statement 4.4.8 Distribution of estimated Aged Persons by type of living arrangement

S. No.	Sector	Living Arrangement of Aged Persons							Total
		Living Alone		Living With Spouse		Living without Spouse but with		Non Relations	
		As inmate of old age home	Not as inmate of old age home	With Spouse Only	With Spouse and Children	Children	Other Relations		
A	RURAL								
	Male	0	0	957	13799	991	0	0	15747
	Female	0	0	957	11499	161	0	0	12617
	Total	0	0	1914	25298	1152	0	0	28364
	Percentage	0	0	6.75	89.19	4.06	0	0	100
B	URBAN								
	Male	410	0	56620	242057	20047	999	2015	322147
	Female	409	282	29547	177903	69294	8655	288	286378
	Total	819	282	86167	419960	89341	9654	2303	608525
	Percentage	0.13	0.05	14.16	69.01	14.68	1.59	0.38	100
C	COMBINED								
	Male	410	0	57577	255856	21038	999	2015	337894
	Percentage	0.12	0	17.04	75.72	6.23	0.3	0.6	100
	Female	409	282	30504	189402	69455	8655	288	298995
	Percentage	0.14	0.09	10.2	63.35	23.23	2.89	0.1	100
	Total	819	282	88081	445258	90493	9654	2303	636889
Percentage	0.13	0.04	13.83	69.91	14.21	1.52	0.36	100	

The results show that about 69.91% of the aged were living with their spouse & children, 14.21% without spouse but with their children and 13.83% were living with their spouse only, while about 1.88% were living with other relations and non relatives. Nevertheless, 0.17% were still living alone and out of this 0.13% were in old age homes. In terms of proportions, more males than females lived with their spouses. On the other hand, compared to the males, proportionately more females lived with their surviving children. The reason perhaps could be due to the fact that women have higher incidence of widowhood. The incidence of widowhood is higher among women because they live longer, and because in our society by convention, men generally marry younger women than themselves.

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 4.4.9 for each gender, separately for rural and urban sectors.

Statement 4.4.9 Distribution of Aged Persons by economic status

S. No.	Sector	Economic Status			
		Not dependent on Others	Partially Dependent	Fully Dependent	Total
A	RURAL				
	Male	11412	4335	0	15747
	Female	957	4335	7326	12618
	Total	12369	8670	7326	28364
	Percentage	43.61	30.57	25.83	100
B	URBAN				
	Male	233635	20658	67854	322148
	Female	83353	55311	147715	286378
	Total	316988	75969	215569	608526
	Percentage	52.09	12.48	35.42	100
C	COMBINED				
	Male	245047	24993	67854	337894
	Percentage	72.52	7.40	20.08	100
	Female	84310	59646	155041	298995
	Percentage	28.20	19.95	51.85	100
	Total	329357	84639	222895	636889
	Percentage	51.71	13.29	35.00	100

As high as 35% of the aged had to fully depend on others for their day- to-day maintenance, whereas, 51.71% persons were not dependent & 13.29% were partially dependent. The situation was worse for elderly females. Among them, about 51.85% were economically fully dependent, besides 19.95% were partially dependent. In this respect, males were much better off as 72.52% among them were not dependent on others for their livelihood.

Economic Support Providers:

As has been observed, a large proportion of the elderly are economically dependent on others for their livelihood. It is, therefore, pertinent to know who the persons are providing economic support to these elderly. Such information was collected in the survey and the results are presented in Statement 4.4.10 separately for each sex and sector. About 30.50% aged persons were economically dependent on their spouse whereas majority of aged persons i.e. 66.57% economically dependent, had to look for the support of their children/grandchildren reflecting the extended family system in which, many of the aged, particularly those who have lost their spouses, depend on their children/grandchildren for maintenance.

Statement 4.4.10: Distribution of Economically dependent Aged Persons by persons supporting them

S. No.	Sector	Persons Supporting Aged				
		Spouse	Own Children	Grand Children	Others	Total
A	RURAL					
	Male	0	4335	0	0	4335
	Female	7164	4496	0	0	11660
	Total	7164	8831	0	0	15995
	Percentage	44.79	55.21	0.00	0.00	100.00
B	URBAN					
	Male	191	79167	9154	0	88512
	Female	86454	91321	16260	8990	203025
	Total	86645	170488	25414	8990	291537
	Percentage	29.72	58.48	8.72	3.08	100.00
C	COMBINED					
	Male	191	83502	9154	0	92847
	Female	93618	95817	16260	8990	214685
	Total	93809	179319	25414	8990	307532
	Percentage	30.50	58.31	8.26	2.93	100.00

Remaining 2.93% had to depend on 'others', including non-relations. It was further observed that dependency of females on spouse/ own children was relatively higher than males among aged economically dependent persons.

Dependants of Economically independent Aged

In the statement 4.4.11 information on dependants of economically independent aged 329357 persons has been displayed.

Statement 4.4.11: Distribution of fully economically independent aged persons by number of dependents

Sector	Number of Aged persons with dependents					
	0	1	2	3	4 or more	Total
Persons						
Rural	3023	7164	0	21	2159	12369
Urban	93838	124328	26643	55848	16331	316988
Combined	96861	131492	26643	55869	18490	329357
Percentage						
Rural	24.44	57.93	0.00	0.17	17.46	100
Urban	29.60	39.22	8.41	17.62	5.15	100
Combined	29.41	39.92	8.09	16.96	5.61	100

It was observed earlier in this section that about 51.71% of the aged were economically independent (refer statement 4.4.9). Out of which, about 70.59 % were reported to be living with one or more person dependant on them. In other words, 29.41% had no dependant. The pattern of the distribution, however, appears to be little different for both rural and urban areas.

Aged Persons and their Surviving Sons and Daughters:

In Statement 4.4.12, the proportion of aged persons by number of their surviving children is given separately for each sex and sector.

Statement 4.4.12: Distribution of Aged persons with number of living children

Sector	Number of Surviving Children					
	0	1	2	3	4 or more	Total
Persons						
Rural	0	0	2071	18542	7751	28364
Urban	10797	51233	129937	139164	277394	608525
Combined	10797	51233	132008	157706	285145	636889
Percentage						
Rural	0.00	0.00	7.30	65.37	27.33	100
Urban	1.77	8.42	21.35	22.87	45.58	100
Combined	1.70	8.04	20.73	24.76	44.77	100

About 98.30 per cent of the aged had at least one surviving child. In other words, about 2 per cent of the aged had no surviving children on the date of survey. The rural-urban differences appeared to be substantial with respect to the proportion of the elderly who had surviving children.

Physical Mobility of Aged Persons

Aged person's ability to move is an important indicator of their physical condition of health and also indicates the degree of their dependence on others for movement and performing their daily routine. The proportion of the aged persons who cannot move around and are confined to their home or who cannot move at all and are confined to bed is given in statement 4.4.13 for each gender and sector.

Statement 4.4.13: Distribution of aged persons by state of physical mobility

S.No	Sector	State of Physical Mobility of Aged			
		Confined to bed	Confined to home	Mobile	Total
A	RURAL				
	Male	0	21	15726	15747
	Female	0	25	12592	12617
	Total	0	46	28318	28364
B	URBAN				
	Male	1036	4807	316304	322147
	Female	4194	23253	258931	286378
	Total	5230	28060	575235	608525
C	COMBINED				
	Male	1036	4828	332030	337894
	Percentage	0.31	1.09	98.6	100
	Female	4194	23278	271523	298995
	Percentage	1.4	7.78	90.82	100
	Total	5230	28106	603553	636889
	Percentage	0.82	4.41	94.77	100

The statement shows that out of total 636889 aged persons, 603553 i.e. 94.77 percent aged persons are mobile whereas about 5.23 per cent of the aged persons were either confined to their home or bed. The position was more or less same for rural and urban male & female. A significant proportion of aged persons were reported as fit and mobile which is a positive indicator of the overall health of aged persons.

Perception about health

The Perception about one's health is an important factor in getting an idea about the actual health condition of that person. A person may be considered as being in good health if he feels so. This is the criterion generally used in NSS surveys to classify an individual as sick or otherwise. Moreover, it reflects the mental health of that person. With this idea, information about the perception of aged person about their current health was collected in the survey and is presented in 4.4.14 separately for those with sickness and without it.

Statement 4.4.14: Distribution of Aged Persons (with illness) by their perception of current state of health.

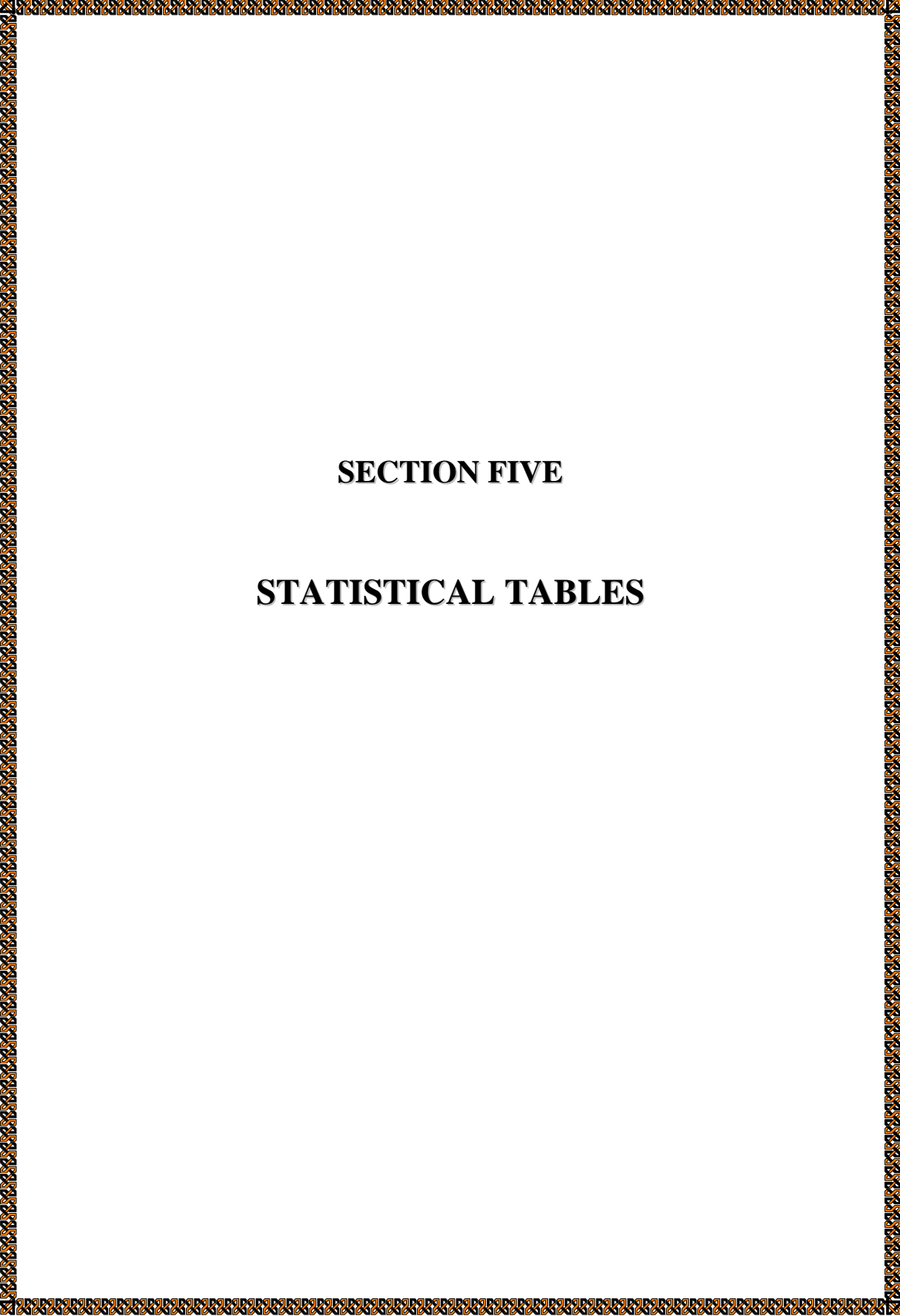
Item	Excellent /very good	Good/Fair	Poor	Total	% to total aged persons
RURAL					
Male	0	3260	0	3260	20.71
Female	0	7167	158	7326	58.05
Total	0	10427	158	10586	37.32
URBAN					
Male	310	67102	18721	86134	26.74
Female	1038	78151	20759	99949	34.9
Total	1348	145253	39480	186083	30.58
COMBINED					
Male	310	70362	18721	89394	26.46
Female	1038	85318	20917	107275	35.88
Total	1348	155680	39638	196669	30.88
Percentage	0.68	79.16	20.16	100	

It can be seen from statement 4.4.14 that out of the total aged persons 30.88% were reported as sick as per their perception. Further, 79.16% of aged persons with illness were reported to have Good condition, 20.16% as somewhat poor condition with respect to their health condition. Only 0.68% had the perception of excellent/ very good condition about their health. The proportion among the aged without sickness was 69.16 per cent.

Statement 4.4.15: Distribution of Aged persons (without illness) by their perception of current state of health

Item	Excellent /very good	Good/Fair	Poor	Total	% to total aged persons
RURAL					
Male	2159	9371	957	12487	79.29
Female	0	4335	957	5292	41.95
Total	2159	13706	1914	17779	62.68
URBAN					
Male	20584	195921	19508	236013	73.26
Female	2338	167722	16370	186430	65.1
Total	22922	363643	35878	422443	69.42
COMBINED					
Male	22743	205292	20465	248500	73.54
Female	2338	172057	17327	191722	64.12
Total	25081	377349	37792	440222	69.12
Percentage	5.69	85.72	8.59	100	

In Delhi out of 636889 total aged persons, 69.12 % reported no illness. Out of these, 85.72% persons had perception of Good/Fair health condition whereas 8.59% persons reported poor health. However, only 5.69% persons reported excellent/ very good health. From the statement it can be concluded that most of the aged persons (i.e. about 91.41%) without illness have the perception of Good / Excellent health in Delhi.

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SECTION FIVE

STATISTICAL TABLES

Table 1: Distribution of population by age-group for each gender

Age Group	Rural			Urban			Combined		
	M	F	M+F	M	F	M+F	M	F	M+F
0-4	57215	11845	69060	530707	320289	850996	587922	332134	920056
5-9	22043	2174	24218	568658	381379	950037	590702	383553	974255
10-14	11593	2855	14448	485737	315330	801066	497330	318184	815514
0-14	90852	16874	107726	1585102	1016997	2602099	1675953	1033872	2709825
15-19	4658	16001	20659	575815	559224	1135040	580473	575226	1155699
20-24	29720	21506	51225	782293	615926	1398219	812013	637431	1449444
25-29	44605	29498	74103	824202	543282	1367484	868807	572779	1441587
15-29	78982	67005	145987	2182311	1718431	3900742	2261293	1785436	4046729
30-34	15902	21902	37804	743890	630359	1374249	759792	652260	1412053
35-39	20929	8964	29893	604472	404902	1009374	625400	413866	1039266
40-44	23883	24468	48351	402044	300480	702524	425928	324948	750876
30-44	60714	55334	116048	1750406	1335741	3086147	1811120	1391075	3202195
45-49	6311	6962	13272	350615	361501	712115	356926	368462	725388
50-59	33101	25831	58932	622866	477814	1100680	655967	503645	1159612
45-59	39412	32792	72204	973481	839315	1812795	1012893	872107	1885000
60-64	11412	9077	20489	163190	133887	297077	174602	142965	317567
65-69	957	3260	4216	68201	67660	135861	69158	70920	140078
70 & above	3378	280	3658	90755	84831	175586	94134	85111	179245
60 & above	15747	12617	28364	322147	286378	608525	337893	298995	636889
Total	285707	184622	470329	6813446	5196863	12010309	7099153	5381485	12480638

Table 2R: Distribution of ailing persons in households having drainage of different types for each MPCE, social, and household type (Rural)

Characteristics	PAP in households with					
	No drainage	Open drain		Covered drain (pucca)	Underground drainage	All
		<i>Kutchha</i>	<i>Pucca</i>			
MPCE						
Upto 4000	0	0	0	0	0	0
4001-8000	0	0	0	0	0	0
8001-12000	0	0	15	0	7164	7179
12001-16000	0	0	4166	0	4865	9032
16001-20000	0	0	0	0	158	158
20001-24000	0	0	0	0	201	201
above 24000	0	0	0	1913	4319	6232
All Class	0	0	4181	1913	16708	22802
Social Group						
ST	0	0	0	0	0	0
SC	0	0	0	0	0	0
OBC	0	0	918	0	16506	17425
others	0	0	3263	1913	201	5377
All Group	0	0	4181	1913	16708	22802
Household Type						
agricultural	0	0	922	0	12231	13152
non-agricultural	0	0	0	1913	158	2071
regular wages	0	0	3260	0	0	3260
casual labourer (agr)	0	0	0	0	0	0
casual labourer (non-agr)	0	0	0	0	0	0
Others	0	0	0	0	4319	4319
All	0	0	4181	1913	16708	22802

Table 2U: Distribution of ailing persons in households having drainage of different types for each MPCE, social, and household type (Urban)

Characteristics	Pap in households with					
	No drainage	Open drain		Covered drain (Pucca)	Underground drainage	All
		<i>Kutchha</i>	<i>Pucca</i>			
MPCE						
Upto 4000	739	0	0	570	209	1518
4001-8000	0	0	664	61789	49963	112416
8001-12000	0	0	4384	45724	84267	134375
12001-16000	0	0	2988	33852	63410	100250
16001-20000	0	0	29381	29037	50928	109345
20001-24000	0	0	0	0	11106	11106
above 24000	0	0	176	2310	130991	133477
All Class	739	0	37592	173282	390874	602487
Social Group						
ST	0	0	0	0	5328	5328
SC	739	0	31685	25500	93338	151262
OBC	0	0	2790	42271	60293	105354
others	0	0	3116	105512	231915	340543
All Group	739	0	37592	173282	390874	602487
Household Type						
self employed	0	0	4564	100307	134638	239509
regular wages	0	0	2677	51105	238159	291941
casual labourer	0	0	29779	21180	358	51317
others	739	0	572	690	17719	19720
All	739	0	37592	173282	390874	602487

Table 3R: Distribution of Ailing persons in households having major source of drinking water of different types for each MPCE, each social groups and each household type (Rural)

Characteristics	PAP in households having major source of drinking water as									
	Bottled water	Tap water	Tube well/hand pump	Tankers	Pucca well	Tank/pond reserved for drinking	River/canal	Others	Type of major source of drinking water nr	Any source
MPCE										
Upto 4000	0	0	0	0	0	0	0	0	0	0
4001-8000	0	0	0	0	0	0	0	0	0	0
8001-12000	0	7179	0	0	0	0	0	0	0	7179
12001-16000	0	4966	3	4062	0	0	0	0	0	9032
16001-20000	0	158	0	0	0	0	0	0	0	158
20001-24000	0	201	0	0	0	0	0	0	0	201
above 24000	0	6232	0	0	0	0	0	0	0	6232
All Class	0	18737	3	4062	0	0	0	0	0	22802
Social Group										
ST	0	0	0	0	0	0	0	0	0	0
SC	0	0	0	0	0	0	0	0	0	0
OBC	0	16623	0	802	0	0	0	0	0	17425
others	0	2114	3	3260	0	0	0	0	0	5377
All Group	0	18737	3	4062	0	0	0	0	0	22802
Household Type										
agricultural	0	12347	3	802	0	0	0	0	0	13152
non-agricultural	0	2071	0	0	0	0	0	0	0	2071
regular wages	0	0	0	3260	0	0	0	0	0	3260
casual labour (agri)	0	0	0	0	0	0	0	0	0	0
casual labour (non-agri)	0	0	0	0	0	0	0	0	0	0
others	0	4319	0	0	0	0	0	0	0	4319
All	0	18737	3	4062	0	0	0	0	0	22802

Table 3U: Distribution of Ailing persons in households having major source of drinking water of different types for each MPCE, each social groups and each household type (Urban)

Characteristics	Pap in households having major source of drinking water as									
	Bottled water	Tap water	Tube well/hand pump	Tankers	Pucca well	Tank/pond reserved for drinking	River/canal	Others	Type of major source of drinking water nr	Any source
MPCE										
Upto 4000	0	1518	0	0	0	0	0	0	0	1518
4001-8000	0	111010	1009	398	0	0	0	0	0	112416
8001-12000	0	129607	1340	3429	0	0	0	0	0	134375
12001-16000	0	99542	708	0	0	0	0	0	0	100250
16001-20000	0	109144	201	0	0	0	0	0	0	109345
20001-24000	0	11106	0	0	0	0	0	0	0	11106
above 24000	0	133268	209	0	0	0	0	0	0	133477
all class	0	595194	3467	3827	0	0	0	0	0	602487
social group										
ST	0	5328	0	0	0	0	0	0	0	5328
SC	0	149725	807	731	0	0	0	0	0	151262
OBC	0	104623	0	731	0	0	0	0	0	105354
others	0	335518	2659	2365	0	0	0	0	0	340543
All group	0	595194	3467	3827	0	0	0	0	0	602487
household type										
self employed	0	235773	1541	2195	0	0	0	0		239509
regular wages	0	288384	1925	1632	0	0	0	0		291941
casual labour	0	51317	0	0	0	0	0	0		51317
others	0	19720	0	0	0	0	0	0		19720
All	0	595194	3467	3827	0	0	0	0	0	602487

Table 4R: Distribution of persons by coverage of scheme of health expenditure support for each MPCE class , each social group and each household type (Rural)

Characteristics	Persons having coverage of scheme of health expenditure support					
	Not covered	Government funded insurance scheme	Employer supported health protection (other than govt.)	Arranged by household with insurance companies	Others	Total
MPCE						
Upto 4000	8154	0	0	0	0	8154
4001-8000	29086	0	1274	0	0	30360
8001-12000	93299	12568	58896	0	0	164762
12001-16000	102242	27064	0	0	0	129305
16001-20000	15920	6496	0	0	0	22415
20001-24000	89082	0	0	0	0	89082
above 24000	23620	2631	0	0	0	26251
All Class	361402	48758	60169	0	0	470329
Social Group						
ST	0	0	0	0	0	0
SC	16947	0	58222	0	0	75169
OBC	189950	10149	674	0	0	200773
others	154504	38609	1274	0	0	194387
All Group	361402	48758	60169	0	0	470329
Household Type						
agricultural	242928	2725	1274	0	0	246926
non-agricultural	60317	28387	674	0	0	89378
regular wages	46331	15733	58222	0	0	120286
casual labour (agri)	0	0	0	0	0	0
casual labour (non-agri)	67	0	0	0	0	67
others	11758	1913	0	0	0	13671
All	361402	48758	60169	0	0	470329

Table 4U: Distribution of persons by coverage of scheme of health expenditure support for each MPCE class , each social group and each household type (Urban)

Characteristics	Persons having coverage of scheme of health expenditure support					
	Not covered	Government funded insurance scheme	Employer supported health protection (other than govt.)	Arranged by household with insurance companies	Others	Total
MPCE						
Upto 4000	237325	5241	26484	0	0	269050
4001-8000	2330676	116136	50744	12714	0	2510270
8001-12000	2618226	677352	196972	51711	613	3544873
12001-16000	1555851	451962	260584	9153	288	2277837
16001-20000	900413	413718	86026	10133	2302	1412592
20001-24000	165798	108394	4054	4042	0	282288
above 24000	846949	401313	201038	264099	0	1713398
All Class	8655238	2174115	825901	351852	3202	12010309
Social Group						
ST	262822	102670	1229	2621	0	369342
SC	1890591	396558	164101	7018	613	2458881
OBC	2497473	393230	130311	50828	0	3071842
others	4004353	1281657	530260	291385	2589	6110244
All Group	8655238	2174115	825901	351852	3202	12010309
Household Type						
self employed	4696299	73983	224459	182475	547	5177763
regular wages	3097002	1934336	554815	165560	2367	5754080
casual labour	662274	677	15457	0	0	678408
others	199663	165120	31170	3818	288	400058
All	8655238	2174115	825901	351852	3202	12010309

Table 5R : Distribution of hospitalized cases (EC) by duration of stay in hospital separately for government and private hospitals and MPCE classes (Rural)

MPCE Class	Duration of stay in hospital											
	Government hospitals						Private hospitals					
	<7days	7days to <15 days	15 days to <30 days	30days to less than 90 days	more than 90 days	All	<7days	7days to <15 days	15 days to <30 days	30days to less than 90 days	more than 90 days	All
Upto 4000	0	0	0	0	0	0	0	0	0	0	0	0
4001-8000	668	0	645	0	0	1313	8	0	0	0	0	8
8001-12000	1234	37	0	0	0	1271	1394	329	135	0	0	1858
12001-16000	1433	0	0	0	0	1433	4745	0	0	0	0	4745
16001-20000	0	0	0	0	0	0	278	158	0	0	0	436
20001-24000	0	0	0	0	0	0	201	4510	0	0	0	4711
above 24000	0	0	0	0	0	0	5515	957	0	0	0	6471
All Class	3334	37	645	0	0	4017	12141	5954	135	0	0	18229

Table 5U: Distribution of hospitalized cases (EC) by duration of stay in hospital separately for government and private hospitals and MPCE classes (Urban)

MPCE Class	Duration of stay in hospital											
	Government hospitals						private hospitals					
	<7days	7days to <15 days	15 days to <30 days	30days to less than 90 days	more than 90 days	All	<7days	7days to <15 days	15 days to <30 days	30days to less than 90 days	more than 90 days	All
Upto 4000	1688	570	0	0	0	2258	1220	0	0	0	0	1220
4001-8000	21852	14341	1280	0	0	37473	7592	1767	154	503	0	10016
8001-12000	28383	10112	4618	0	0	43113	15251	7689	2033	0	0	24973
12001-16000	45612	5238	1462	0	0	52312	25702	1455	912	320	0	28389
16001-20000	11213	2973	650	369	0	15206	27488	6011	1772	0	0	35271
20001-24000	2466	602	0	0	0	3068	9906	566	0	0	0	10471
above 24000	5583	1772	597	0	0	7952	34639	5487	2124	73	0	42323
all class	116797	35607	8607	369	0	161381	121798	22975	6994	896	0	152664

Table 6 : Average medical expenditure for treatment per hospitalization case (EC) during stay at hospital (as inpatient) over last 365 days by gender and sector

Item	Average total medical expenditure for treatment (Rs.) per case								
	Rural			Urban			Rural + Urban		
	M	F	M+F	M	F	M+F	M	F	M+F
Persons	11198	11047	22246	187917	126128	314045	199116	137175	336291
Average Expenditure (in Rs)	6673	56381	31358	19573	24728	21644	18848	27277	22286

Table 7: Average medical expenditure (Rs) per hospitalization case (EC) during last 365 days and its break up for Private hospital separately for each class of MPCE

MPCE	Number of cases by major source of financing expenditure						
	Package component	Doctor's /surgeon's fee	Diagnostic tests	Bed charges	Other services	Medicines	Total
Rural							
Upto 4000	0	0	0	0	0	0	0
4001-8000	15000	0	0	0	0	0	15000
8001-12000	9849	0	0	0	0	0	9849
12001-16000	471	4223	1905	2409	0	2545	11554
16001-20000	25393	274	823	549	412	823	28275
20001-24000	119662	85	107	43	0	64	119960
above 24000	370	1001	1502	1251	0	1502	5625
All Classes	32795	1483	1076	1095	10	1232	37692
Urban							
Upto 4000	200646	254	182	581	5914	545	208121
4001-8000	32502	1488	1408	1347	1044	2194	39983
8001-12000	14476	3037	2504	2990	2750	3422	29179
12001-16000	12779	1803	2249	4372	7078	4655	32935
16001-20000	20073	3799	2866	2818	2199	3429	35184
20001-24000	5812	2061	2212	1684	1434	2480	15683
above 24000	30620	4175	2276	3652	2284	3326	46332
All Classes	22006	3108	2367	3174	3121	3458	37234

Table 8 : Average medical expenditure (Rs) per hospitalization case (EC) during last 365 days and its break up for public hospital separately for each class of MPCE

MPCE	Number of cases by major source of financing expenditure						
	Package component	Doctor's /surgeon's fee	Diagnostic tests	Bed charges	Other services	Medicines	Total
Rural							
Upto 4000	0	0	0	0	0	0	0
4001-8000	0	0	485	0	3	2000	2488
8001-12000	0	0	0	0	0	694	694
12001-16000	0	0	0	0	3112	1323	4435
16001-20000	0	0	0	0	0	0	0
20001-24000	0	0	0	0	0	0	0
above 24000	0	0	0	0	0	0	0
All Class	0	0	159	0	1111	1345	2615
Urban							
Upto 4000	0	0	55	0	35	533	623
4001-8000	1286	58	180	11	396	1488	3418
8001-12000	5	61	325	42	716	1362	2511
12001-16000	3504	22	440	25	619	1464	6074
16001-20000	265	158	638	79	2789	2588	6516
20001-24000	10275	127	971	380	576	1637	13965
above 24000	49308	60	204	36	1617	1005	52230
All Class	4086	57	361	38	838	1516	6895

Table 9 : Proportion of cases of reimbursement of hospitalization expenses and average amount of reimbursement per hospitalization case (EC) for each class of MPCE, gender for Public hospital

MPCE	Per 1000 no. Of cases reimbursed			Average amount reimbursed			Percentage of amount reimbursed out of total medical expenditure incurred		
	M	F	M+F	M	F	M+F	M	F	M+F
Upto 4000	0	0	0	0	0	0	0	0	0
4001-8000	1000	0	1000	128	0	83	6	0	2
8001-12000	1000	0	1000	224	0	134	11	0	5
12001-16000	0	0	0	0	0	0	0	0	0
16001-20000	830	170	1000	3805	1419	3047	54	27	47
20001-24000	357	643	1000	6536	12511	10275	89	70	74
above 24000	0	0	0	0	0	0	0	0	0
All Class	757	243	1000	515	547	526	7	10	8

Table 10 : Proportion of cases of reimbursement of hospitalization expenses and average amount of reimbursement per hospitalization case (EC) for each class of MPCE, gender for Private hospital

MPCE	No. of cases reimbursed			Average amount reimbursed			Percentage of amount reimbursed out of total medical expenditure incurred		
	M	F	M+F	M	F	M+F	M	F	M+F
Upto 4000	0	0	0	0	0	0	0	0	0
4001-8000	1000	0	1000	5967	0	2782	14	0	7
8001-12000	571	429	1000	6987	8050	7510	28	26	27
12001-16000	442	558	1000	4288	4581	4423	10	34	15
16001-20000	546	454	1000	7752	2696	5407	25	7	15
20001-24000	240	760	1000	2941	4791	4080	24	3	4
above 24000	611	389	1000	11860	9084	10711	36	18	26
All Class	542	458	1000	7813	5565	6750	24	11	16

Table 11: Distribution of ailment cases reported during last 15 days over age groups for each gender

Age group	Ailment Cases								
	Rural			Urban			Rural + Urban		
	M	F	M+F	M	F	M+F	M	F	M+F
0-4	0	0	0	3075	1143	4219	3075	1143	4219
5-9	0	0	0	22017	12894	34911	22017	12894	34911
9-14	0	0	0	14156	0	14156	14156	0	14156
0-14	0	0	0	39249	14037	53286	39249	14037	53286
15-19	0	0	0	696	1204	1900	696	1204	1900
20-24	0	0	0	10265	11941	22206	10265	11941	22206
25-29	17	0	17	39758	26954	66711	39775	26954	66729
15-29	17	0	17	50719	40099	90818	50736	40099	90835
30-34	0	0	0	9712	9875	19587	9712	9875	19587
35-39	0	0	0	26276	10301	36577	26276	10301	36577
40-44	238	0	238	1836	13878	15714	2075	13878	15953
30-44	238	0	238	37824	34055	71879	38062	34055	72117
45-49	546	0	546	10025	57916	67941	10571	57916	68488
50-59	2822	4520	7342	58120	70549	128669	60347	75664	136011
45-59	3369	4520	7889	68145	128466	196610	70919	133580	204499
60-64	9324	957	10280	33323	33216	66538	35482	41337	76819
65-69	957	0	957	36002	41387	77390	36959	41387	78346
70 & above	3421	0	3421	19715	26252	45966	22975	26413	49387
60 & above	13701	957	14658	89040	100855	189894	95415	109137	204552
Total	17326	5477	22802	284975	317512	602487	294381	330908	625289

Table 12R : Distribution of ailment cases over broad ailment categories for different age groups (Rural)

Nature of Ailment Codes	Ailment cases in age group							
	0-14	15-29	30-44	45-59	60-69	70+	60+	ALL
Infection	0	0	238	0	0	0	0	238
Cancers	0	0	0	0	0	0	0	0
Blood diseases	0	0	0	0	0	0	0	0
Endocrine, metabolic, nutritional	0	0	0	4520	0	0	0	4520
Psychiatric & neurological	0	0	0	0	0	0	0	0
Eye	0	0	0	0	0	0	0	0
Ear	0	0	0	2159	0	0	0	2159
Cardio-vascular	0	0	0	15	957	0	957	972
Respiratory	0	0	0	0	957	3260	4216	4216
Gastro-intestinal	0	0	0	0	0	0	0	0
Skin	0	0	0	0	2159	0	2159	2159
Musculo-skeletal	0	0	0	1194	7164	161	7326	8519
Genito-urinary	0	17	0	0	0	0	0	17
Obstetric	0	0	0	0	0	0	0	0
Injuries	0	0	0	0	0	0	0	0
Others	0	0	0	0	0	0	0	0
All	0	17	238	7889	11237	3421	14658	22802

Table 12U : Distribution of ailment cases over broad ailment categories for different age groups (Urban)

Nature of Ailment codes	Ailment cases in age group							
	0-14	15-29	30-44	45-59	60-69	70+	60+	ALL
Infection	30200	61705	30291	24974	2239	1229	3468	150638
Cancers	0	0	0	1967	843	0	843	2811
Blood diseases	0	0	0	365	0	0	0	365
Endocrine, metabolic, nutritional	627	1423	20408	17285	14738	11853	26591	66334
Psychiatric & neurological	9224	9367	308	8250	909	502	1411	28560
Eye	0	0	0	0	0	0	0	0
Ear	0	0	301	854	0	0	0	1155
Cardio-vascular	0	10560	1680	25916	31031	3481	34512	72668
Respiratory	927	2027	0	26685	4593	11125	15718	45357
Gastro-intestinal	12894	0	44	0	0	288	288	13226
Skin	291	664	7921	4076	249	0	249	13200
Musculo-skeletal	0	515	11444	83993	88992	17119	106111	202062
Genito-urinary	0	0	0	1938	0	369	369	2308
Obstetric	0	371	0	0	0	0	0	371
Injuries	0	2424	0	339	0	0	0	2763
Others	0	1189	385	0	0	0	0	1574
All	54162	90245	72781	196641	143593	45966	189560	603390

Table 13R : Average medical expenditure for non hospitalized treatment per ailing person by MPCE and gender (Rural)

MPCE	Gender	Medical expenditure per treated ailing person for treatment under					
		Doctor's/surgeon fee	Medicines : AYUSH	Medicines : non-AYUSH	Diagnostic tests	Other medical expenses	Total
Upto 4000	M	0	0	0	0	0	0
	F	0	0	0	0	0	0
	M+F	0	0	0	0	0	0
4001-8000	M	0	0	0	0	0	0
	F	0	0	0	0	0	0
	M+F	0	0	0	0	0	0
8001-12000	M	0	0	815	0	0	815
	F	0	0	0	80	0	80
	M+F	0	0	815	80	0	82
12001-16000	M	643	0	394	383	0	839
	F	350	0	374	250	0	845
	M+F	513	0	388	324	0	841
16001-20000	M	0	0	0	0	0	0
	F	0	0	100	0	0	100
	M+F	0	0	100	0	0	100
20001-24000	M	0	0	0	0	0	0
	F	250	600	0	50	0	900
	M+F	250	600	0	50	0	900
above 24000	M	300	400	615	50	0	709
	F	300	400	430	50	0	652
	M+F	300	400	523	50	0	680
All Class	M	491	400	424	236	0	796
	F	322	417	377	105	0	383
	M+F	410	409	408	144	0	553

Table 13U : Average medical expenditure for non hospitalized treatment per ailing person by MPCE and gender (Urban)

MPCE	Gender	Medical expenditure per treated ailing person for treatment under					
		Doctor's/surge on fee	Medicines :AYUSH	Medicines : non-AYUSH	Diagnostic tests	Other medical expenses	Total
Upto 4000	M	0	0	0	0	0	0
	F	0	0	180	0	0	180
	M+F	0	0	180	0	0	180
4001-8000	M	131	0	103	7	248	98
	F	180	0	217	155	2000	209
	M+F	156	0	161	83	1163	154
8001-12000	M	440	0	186	977	183	256
	F	778	0	842	1195	3588	924
	M+F	705	0	591	1177	494	691
12001-16000	M	628	821	1781	428	7329	2930
	F	340	0	626	551	319	504
	M+F	376	821	1050	469	5109	1616
16001-20000	M	330	0	597	587	100	558
	F	104	0	445	425	355	342
	M+F	144	0	518	501	237	431
20001-24000	M	355	4500	569	528	600	645
	F	493	2650	800	485	504	677
	M+F	432	3575	628	507	543	657
above 24000	M	642	1367	722	1298	478	735
	F	393	550	504	864	127	449
	M+F	551	958	623	1145	337	616
All Class	M	325	1604	559	548	2259	791
	F	418	1322	542	693	473	524
	M+F	384	1515	550	624	1688	649

Table 14R : Number of women aged 15-49 who were pregnant any time during last 365 days and their distribution by status of pregnancy and place of childbirth, separately for each age-group, MPCE and social group (Rural)

Characteristics	No. Of women who were pregnant at some time during last 365 days	No. Who didn't give birth	No. Of women who gave birth in					Total	
			HSC	PHC/CHC/Dispensary/mobile med unit	Public hospital	Private clinic	Private hospital		At home
Age Group									
<20	21	0	0	0	21	0	0	0	21
20-24	6890	0	0	0	1742	0	5148	0	6890
25-29	1743	0	0	0	1239	0	504	0	1743
30-34	833	0	0	0	227	0	606	0	833
35-39	0	0	0	0	0	0	0	0	0
40-44	0	0	0	0	0	0	0	0	0
>45	0	0	0	0	0	0	0	0	0
All	9487	0	0	0	3229	0	6258	0	9487
MPCE									
Upto 500	0	0	0	0	0	0	0	0	0
501-1000	0	0	0	0	0	0	0	0	0
1001-1500	0	0	0	0	0	0	0	0	0
1501-2000	0	0	0	0	0	0	0	0	0
2001-2500	0	0	0	0	0	0	0	0	0
2501-3000	0	0	0	0	0	0	0	0	0
above 3000	9487	0	0	0	3229	0	6258	0	9487
All Class	9487	0	0	0	3229	0	6258	0	9487
social group									
SC	0	0	0	0	0	0	0	0	0
ST	1504	0	0	0	1504	0	0	0	1504
OBC	1548	0	0	0	1044	0	504	0	1548
Others	6435	0	0	0	681	0	5754	0	6435
All	9487	0	0	0	3229	0	6258	0	9487

Table 14U : Number of women aged 15-49 who were pregnancy any time during last 365 days and their distribution by status of pregnancy and place of childbirth, separately for each age-group, MPCE and social group (Urban)

Characteristics	No. Of women who were pregnant at some time during last 365 days	No. Who didn't give birth	No. Of women who gave birth in					Total	
			HSC	PHC/CHC/Dispensary/mobile med unit	Public hospital	Private clinic	Private hospital		At home
Age Group									
<20	1234	0	0	0	1012	0	222	0	1234
20-24	62445	203	0	253	43296	0	14297	4396	62445
25-29	76315	13007	161	0	32361	0	24781	6004	76315
30-34	56193	9993	0	0	23633	1674	18949	1943	56193
35-39	11488	0	0	0	7364	1291	2462	371	11488
40-44	1398	0	0	0	1398	0	0	0	1398
>45	1171	0	0	0	1171	0	0	0	1171
All	210243	23203	161	253	110235	2965	60711	12715	210243
MPCE									
Upto 500	0	0	0	0	0	0	0	0	0
501-1000	0	0	0	0	0	0	0	0	0
1001-1500	0	0	0	0	0	0	0	0	0
1501-2000	0	0	0	0	0	0	0	0	0
2001-2500	0	0	0	0	0	0	0	0	0
2501-3000	0	0	0	0	0	0	0	0	0
above 3000	210243	23203	161	253	110235	2965	60711	12715	210243
All Class	210243	23203	161	253	110235	2965	60711	12715	210243
Social Group									
SC	5672	203	0	0	4684	0	786	0	5672
ST	45209	0	0	253	32964	0	8194	3798	45209
OBC	57911	3462	0	0	35184	531	14842	3892	57911
Others	101450	19538	161	0	37403	2434	36889	5025	101450
All	210243	23203	161	253	110235	2965	60711	12715	210243

Table 15R : Number of women aged 15-49 who were pregnant any time during last 365 days and their distribution by outcome of pregnancy, separately for each age-group and MPCE (Rural)

Characteristic	No. Of women who were pregnant at some time during last 365 days	Outcome of pregnancy				
		Pregnancy continuing	Live birth	Still birth	Abortion	All
Age Group						
<20	21	0	21	0	0	21
20-24	6890	0	6890	0	0	6890
25-29	1743	0	1743	0	0	1743
30-34	833	0	833	0	0	833
35-39	0	0	0	0	0	0
40-44	0	0	0	0	0	0
>45	0	0	0	0	0	0
All	9487	0	9487	0	0	9487
MPCE						
Upto 4000	0	0	0	0	0	0
4001-8000	1862	0	1862	0	0	1862
8001-12000	1001	0	1001	0	0	1001
12001-16000	1122	0	1122	0	0	1122
16001-20000	791	0	791	0	0	791
20001-24000	4510	0	4510	0	0	4510
above 24000	201	0	201	0	0	201
All Class	9487	0	9487	0	0	9487

Table 15U : Number of women aged 15-49 who were pregnant any time during last 365 days and their distribution by outcome of pregnancy, separately for each age-group and MPCE (Urban)

Characteristic	No. Of women who were pregnant at some time during last 365 days	Outcome of pregnancy				
		Pregnancy continuing	Live birth	Still birth	Abortion	All
Age Group						
<20	1234	0	1234	0	0	1234
20-24	62445	203	61909	333	0	62445
25-29	76315	13007	63307	0	0	76315
30-34	56193	9993	46200	0	0	56193
35-39	11488	0	11488	0	0	11488
40-44	1398	0	1398	0	0	1398
>45	1171	0	1171	0	0	1171
All	210243	23203	186707	333	0	210243
MPCE						
Upto 4000	0	0	0	0	0	0
4001-8000	46790	2306	44484	0	0	46790
8001-12000	38317	0	38317	0	0	38317
12001-16000	48334	1156	46846	333	0	48334
16001-20000	35111	6734	28377	0	0	35111
20001-24000	4428	0	4428	0	0	4428
above 24000	37263	13007	24256	0	0	37263
All Class	210243	23203	186707	333	0	210243

Table 16R : (i) number of women aged 15-49 who were pregnant any time during last 365 days by nature of pre natal care received (ii) distribution of women aged 15-49 who gave birth during last 365 days by nature of post natal care received and (iii) average expenditure on pre natal care and post natal care by nature of care received for each age-group (Rural)

Age group	No. of pregnant women reporting pre-natal care					Average expenditure incurred on pre natal care (rs.)				No. of pregnant women reporting post-natal care					Average expenditure incurred on post natal care (rs.)			
	Not received	Received			All	AYUSH	Non-AYUSH	Both	All	Not received	Received			All	AYUSH	Non-AYUSH	Both	All
		AYUSH	Non-AYUSH	Both							AYUSH	Non-AYUSH	Both					
<20	0	0	21	0	21	0	4000	0	4000	0	0	21	0	21	0	1000	0	1000
20-24	0	0	6890	0	6890	0	3922	0	3922	1725	0	5165	0	6890	0	2143	0	1607
25-29	0	0	1743	0	1743	0	3885	0	3885	591	0	1151	0	1743	0	2842	0	1878
30-34	0	0	270	564	833	0	1158	6000	4433	270	0	564	0	833	0	2500	0	1691
35-39	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
40-44	0	0	0	0	0	0	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	0	0	0	0	0	0
All	0	0	8923	564	9487	0	3832	6000	3960	2586	0	6902	0	9487	0	2285	0	1663

Table 16U : (i) number of women aged 15-49 who were pregnancy any time during last 365 days by nature of pre natal care received (ii) distribution of women aged 15-49 who gave birth during last 365 days by nature of post natal care received and (iii) average expenditure on pre natal care and post natal care by nature of care received for each age-group (Urban)

Age group	No. Of pregnant women reporting pre-natal care					Average expenditure incurred on pre natal care (rs.)				No. Of pregnant women reporting post-natal care					Average expenditure incurred on post natal care (rs.)			
	Not received	Received			All	AYUSH	Non-AYUSH	Both	All	Not received	Received			All	AYUSH	Non-AYUSH	Both	All
		AYUSH	Non-AYUSH	Both							AYUSH	Non-AYUSH	Both					
<20	0	0	1234	0	1234	0	2344	0	2344	0	0	1234	0	1234	0	1410	0	1410
20-24	1120	748	54155	6422	62445	354	1678	2607	1727	14017	1492	39668	7065	62242	132	1447	1449	1090
25-29	8738	586	64127	2864	76315	1115	2585	6223	2414	18022	586	39929	4771	63307	379	1687	1986	1217
30-34	2787	0	43147	10259	56193	0	3815	3073	3490	7193	710	30320	7976	46200	800	2257	2630	1947
35-39	730	655	10102	0	11488	2000	2748	0	2531	3828	655	7004	0	11488	1200	2593	0	1649
40-44	0	0	1398	0	1398	0	1314	0	1314	0	0	1398	0	1398	0	929	0	929
>45	0	0	1171	0	1171	0	0	0	0	0	0	1171	0	1171	0	500	0	500
All	13374	1989	175336	19544	210243	1120	2588	3382	2483	43059	3444	120724	19813	187040	515	1781	2054	1376

Table 17: Per 1000 no. of persons reporting ailment (PAP) and No. per 1000 of persons hospitalized in each State/UT: rural, urban

State/UT	per 1000 no. of persons reporting ailment		per 1000 no. of persons hospitalized (including child birth)	
	Rural	Urban	Rural	Urban
Andhra Pradesh	155	204	59	55
Arunachal Pradesh	95	49	34	41
Assam	31	47	28	36
Bihar	57	62	34	33
Chhattisgarh	40	44	31	42
Delhi (Central Sample)	15	41	15	36
Delhi (State Sample)	48	50	67	41
Goa	160	194	44	40
Gujarat	92	103	48	49
Haryana	56	75	42	50
Himachal Pradesh	82	51	57	33
Jammu & Kashmir	64	41	39	37
Jharkhand	52	96	32	35
Karnataka	93	103	52	49
Kerala	310	306	117	99
Madhya Pradesh	53	71	40	44
Maharashtra	80	70	53	47
Manipur	26	4	43	35
Meghalaya	32	26	27	35
Mizoram	26	31	36	41
Nagaland	31	19	17	22
Odisha	103	97	45	51
Punjab	161	170	41	40
Rajasthan	54	83	47	43
Sikkim	34	67	26	33
Tamil Nadu	146	184	57	59
Telangana	97	95	48	49
Tripura	35	51	55	57
Uttar Pradesh	68	91	34	40
Uttarakhand	77	111	30	37
West Bengal	161	179	50	51
A & N Islands	188	156	52	61
Chandigarh	109	135	28	35
Dadra & N. Haveli	56	165	49	54
Daman & Diu	39	186	55	53
Lakshadweep	159	219	47	76
Puducherry	175	227	58	63
all	89	118	44	49

* Source: Key Indicators of Social Consumption in India Health, NSS 71st Round Report, MOSPI, GOI

Table 18: Average total (medical+non medical) expenditure (in Rs.) on account of hospitalization per hospitalization case (EC) for each State/UT, gender and sector

State/UT	Rural			Urban		
	Male	Female	Person	Male	Female	Person
Andhra Pradesh	18229	11774	15411	45623	18186	33671
Arunachal Pradesh	8323	7752	8042	12693	8445	10715
Assam	9051	7905	8520	36711	65921	52368
Bihar	15237	12208	13626	39521	17687	28058
Chhattisgarh	12164	16099	14043	27904	19139	24891
Delhi (Central Sample)	17752	54024	32211	41864	30516	37049
Delhi (State Sample)	8359	60066	34037	23172	27604	24952
Goa	29131	36225	32503	29824	19992	26401
Gujarat	19023	11886	15660	23145	19309	21276
Haryana	26155	14888	20945	38827	30030	35217
Himachal Pradesh	25977	18823	22004	48434	18905	31160
Jammu & Kashmir	12539	9142	10777	19979	13274	16174
Jharkhand	11984	13210	12578	16712	13679	15011
Karnataka	18101	13926	16118	29996	19124	24202
Kerala	25961	12389	19385	18854	15766	17117
Madhya Pradesh	21224	9816	15326	33857	19306	26374
Maharashtra	24072	20534	22486	30194	31854	31028
Manipur	8170	9945	9058	13669	13953	13810
Meghalaya	3867	4358	4098	19271	24206	21789
Mizoram	12833	10651	11652	13773	19459	17216
Nagaland	10456	4763	7750	20090	17055	18477
Odisha	15262	10168	12616	20131	26186	22713
Punjab	42817	19335	29779	34033	29800	31978
Rajasthan	17489	13812	15609	25480	11267	18346
Sikkim	16042	10636	12648	20195	12151	15751
Tamil Nadu	16317	11704	13968	31808	20050	26092
Telangana	15393	28902	21683	28486	17856	22584
Tripura	9773	4468	7242	16390	10721	13931
Uttar Pradesh	24291	17449	20594	35488	31704	33402
Uttarakhand	9705	11498	10476	33641	23869	27883
West Bengal	14766	10917	12841	30293	23812	27249
A & N Islands	5809	1753	4374	20848	3314	11316
Chandigarh	18626	17909	18327	58408	19684	37243
Dadra & N. Haveli	6243	1774	4948	10505	5386	8286
Daman & Diu	10706	12162	11250	10232	6482	7737
Lakshadweep	18819	8434	14766	13548	13150	13348
Puducherry	12685	6987	9893	21210	10564	15891
all	19727	14136	16956	30450	22511	26455

* Source: Key Indicators of Social Consumption in India Health, NSS 71st Round Report, MOSPI, GOI

Table 19 : Per thousand distribution of hospitalisation cases (EC) during the last 365 days by type of hospital and by sector for each State/UT

State/UT	Rural		Urban	
	Public	Private	Public	Private
Andhra Pradesh	225	775	218	782
Arunachal Pradesh	886	114	876	124
Assam	892	108	515	485
Bihar	426	574	388	612
Chhattisgarh	494	506	294	706
Delhi (Central Sample)	631	369	450	550
Delhi (State Sample)	181	819	514	486
Goa	510	490	668	332
Gujarat	234	766	233	767
Haryana	333	667	183	817
Himachal Pradesh	758	242	718	282
Jammu & Kashmir	939	61	854	146
Jharkhand	396	604	264	736
Karnataka	268	732	183	817
Kerala	347	653	333	667
Madhya Pradesh	535	465	417	583
Maharashtra	192	808	200	800
Manipur	888	112	786	214
Meghalaya	891	109	473	527
Mizoram	860	140	601	399
Nagaland	731	269	399	601
Odisha	813	187	580	420
Punjab	293	707	302	698
Rajasthan	542	458	544	456
Sikkim	727	273	553	447
Tamil Nadu	404	596	293	707
Telangana	286	714	212	788
Tripura	933	67	892	108
Uttar Pradesh	302	698	283	717
Uttarakhand	508	492	397	603
West Bengal	772	228	526	474
A & N Islands	941	59	822	178
Chandigarh	772	228	849	151
Dadra & N. Haveli	700	300	199	801
Daman & Diu	253	747	175	825
Lakshadweep	628	372	685	315
Puducherry	318	682	622	378
all	419	581	320	680

* Source: Key Indicators of Social Consumption in India Health, NSS 71st Round Report, MOSPI, GOI

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ANNEXURE

FACSIMILE OF SCHEDULE 25.0

RURAL	*
URBAN	

**GOVERNMENT OF INDIA
NATIONAL SAMPLE SURVEY OFFICE
SOCIO-ECONOMIC SURVEY**

CENTRAL	*
STATE	

**SEVENTY-FIRST ROUND: JANUARY TO JUNE, 2014
HOUSEHOLD SCHEDULE 25.0: SOCIAL CONSUMPTION: HEALTH**

* tick mark (✓) may be put in the appropriate place

[0] descriptive identification of sample household	
1. state/u.t.:	5. hamlet name:
2. district:	6. investigator unit /block:
3. tehsil/town:*	7. name of head of household:
4. village name:	8. name of informant:

[1] identification of sample household							
item no.	item	code			item no.	item	code
1.	srl. no. of sample village/ block				10.	sub-round	
2.	round number	7		1	11.	sub-sample	
3.	schedule number	2	5	0	12.	FOD sub-region	
4.	sample (<i>central-1, state-2</i>)				13.	sample hg/sb number	
5.	sector (<i>rural-1, urban-2</i>)				14.	second-stage stratum number	
6.	NSS region				15.	sample household number	
7.	district				16.	serial number of informant (as in column 1 of block 4)	
8.	stratum				17.	response code	
9.	sub-stratum				18.	survey code	
					19.	reason for substitution of original household	

CODES FOR BLOCK 1

item 17: **response code:** informant: *co-operative and capable -1, co-operative but not capable -2, busy -3, reluctant -4, others -9.*

item 18: **survey code:** *original -1, substitute -2, casualty -3.*

item 19: **reason for substitution of original household:** *informant busy -1, members away from home -2, informant non-cooperative -3, others -9.*

[2] particulars of field operations											
sl. no.	item	field investigator (FI) / asstt. superintending officer (ASO)					field officer (FO)/ superintending officer (SO)				
(1)	(2)	(3)					(4)				
1.(a)	(i) name (block letters)										
	(ii) code										
	(iii) signature										
1.(b)	(i) name (block letters)										
	(ii) code										
	(iii) signature										
2.	date(s) of:	DD	MM	YY	DD	MM	YY				
	(i) survey/ inspection										
	(ii) receipt										
	(iii) scrutiny										
	(iv) despatch										
3.	number of additional sheet(s) attached										
4.	total time taken to canvass the schedule by the team of investigators (FI/ASO) (in minutes) [no decimal point]										
5.	number of investigators (FI/ASO) in the team who canvassed the schedule										
6.	whether any remark has been entered by FI/ASO/supervisory officer (yes-1, no-2)	(i) in block 12/13									
		(ii) elsewhere in the schedule									

[12] remarks by investigator (FI/ASO)

[13] comments by supervisory officer(s)

[3] household characteristics									
1. household size						6. social group (code)			
2. principal industry (NIC-2008)	description:					7. type of latrine (code)			
	code (5-digit)					8. type of drainage (code)			
3. principal occupation (NCO-2004)	description:					9. major source of drinking water (code)			
	code (3-digit)					10. primary source of energy for cooking during the last 30 days (code)			
4. household type (code)						11. amount of medical insurance premium paid for household members in last 365 days (Rs.)			
5. religion (code)						12. household's usual consumer expenditure (Rs.) in a month			

CODES FOR BLOCK 3

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

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

item 5: religion: Hinduism -1, Islam -2, Christianity -3, Sikhism-4, Jainism -5, Buddhism -6, Zoroastrianism -7, others -9

item 6: social group: Scheduled Tribes-1, Scheduled Castes -2, Other Backward Classes -3, Others- 9

item 7: type of latrine: latrine: service -1, pit -2, septic tank/flush system -3, others -9; no latrine -4

item 8: type of drainage; drainage: open kutchha -1, open pucca- 2, covered pucca -3, underground -4; no drainage -5

item 9: major source of drinking water: bottled water –1, tap –2, tube-well/hand pump-3, tankers -4, pucca well -5, tank/pond reserved for drinking –6, river/canal -7, others –9

item 10: primary source of energy for cooking: coke, coal –01, firewood and chips -02, LPG -03, gobar gas -04, dung cake -05, charcoal -06, kerosene -07, electricity -08, others -09; no cooking arrangement -10

[5] particulars of former household members who died during the last 365 days								
srl. no.	name of deceased member	sex (male -1, female-2)	age at death (years)	whether medical attention received before death (yes-1, no-2)	whether hospitalised (yes-1, no-2)	if 1 in col. 6, no. of times hospitalised	*if 2 in col. 3 and age 15-49 in col.4,	
							whether pregnant any time during last 365 days (yes-1, no-2)	if 1 in col. 8, time of death (code)
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)
91								
92								
93								

*information not to be sought for unmarried females, but may be recorded if voluntarily provided

CODES FOR BLOCK 5

col.9: time of death: deaths related to pregnancy: during pregnancy -1, during delivery -2, during abortion -3, within 6 weeks of delivery/abortion -4,

other deaths -9

[4] demographic particulars of household members														
sl. no.	name of member	relation to head (code)	sex (male -1, female-2)	age (yrs)	marital status (code)	general education (code)	whether resident of student's hostel (yes-1, no-2)	during last 365 days		whether suffering from any chronic ailment (yes -1, no -2)	whether suffering from any other ailment		whether covered by any scheme for health expenditure support (code)	reporting of columns 11-13 (self- 1, proxy- 2)
								whether hospitalised (yes-1, no-2)	if 1 in col. 9, no. of times hospitalised		any time during last 15 days (yes-1, no-2)	on the day before the date of survey (yes -1, no -2)		
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)	(15)

CODES FOR BLOCK 4

col. relation to head: self - 1, spouse of head - 2, married child - 3, spouse of married child - 4, unmarried child - 5, grandchild - 6, 3: father/mother/father-in-law/mother-in-law - 7, brother/sister/brother-in-law/sister-in-law/other relatives - 8, servant/employees/other non-relatives - 9

col. marital status: never married - 1, currently married - 2, widowed - 3, divorced/separated- 4
6:

col. general education: not literate -01, literate without any schooling: 02, literate without formal schooling: through NFEC -03, literate through TLC/ AEC -04, others-05; literate with formal schooling: below primary-06, primary-07, upper primary/middle-08, secondary-10, higher secondary -11, diploma/certificate course (up to secondary)-12, diploma/certificate course (higher secondary)-13, diploma/certificate course (graduation & above)-14, graduate-15, postgraduate and above-16

col. whether covered by any scheme for health expenditure support: government funded insurance scheme (e.g. RSBY, Arogyasri, CGHS, 14: ESIS, etc.) -1, employer supported health protection (other than govt.) -2, arranged by household with insurance companies-3, others-4, not covered-5

[6] particulars of medical treatment received as in-patient of a medical institution during the last 365 days						
1.	sr1. no. of the hospitalisation case	1	2	3	4	5
2.	sr1. no. of member (as in col. 1, block 4/5) hospitalised					
3.	age (years) (as in col.5, block 4/ col.4, block 5)					
4.	nature of ailment (code list on pages 11-12)					
5.	nature of treatment (code)					
6.	level of care (code*)					
7.	type of ward (free -1, paying general -2, paying special -3)					
8.	when admitted (code)					
9.	when discharged (code)					
10.	duration of stay in hospital (days)					
details of medical services received (not received -1; received: free -2, partly free -3, on payment -4)						
11.	surgery					
12.	medicine					
13.	X-ray/ECG/EEG/Scan					
14.	other diagnostic tests					
15.	whether treated on medical advice before hospitalisation (yes -1, no-2)					
if 1 in item 15	16.	nature of treatment (code)				
	17.	level of care (code)				
	18.	duration of treatment (days)				
19.	whether treatment on medical advice continued after discharge from hospital (yes -1, no-2)					
if 1 in item 19	20.	nature of treatment (code)				
	21.	level of care (code)				
	22.	duration of treatment (days)				

*For item 6, code 4 is not applicable. Code 1 is also not applicable, except for ailment code 88.

CODES FOR BLOCK 6

item 5, 16, 20: nature of treatment:

<i>Allopathy</i>	-1	<i>Homoeopathy</i>	-3
<i>Indian system of medicine</i>		<i>Yoga & Naturopathy</i>	-4
<i>(desi dawai: ayurveda, unani or siddha)</i>	-2	<i>other</i>	-9

items 6, 17, 21: level of care:

<i>HSC/ANM/ASHA/AWW</i>	-1	<i>private doctor/clinic</i>	-4
<i>PHC/dispensary/CHC/mobile medical unit</i>	-2	<i>private hospital</i>	-5
<i>public hospital</i>	-3		

item 8: when admitted: during last 15 days - 1, 16 days to 365 days ago - 2, more than 365 days ago - 3

item 9: when discharged: not yet -1, during last 15 days -2, 16 days to 365 days ago -3

[7] expenses incurred during the last 365 days for treatment of members as in-patient of medical institution						
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)					
4.	whether any medical service provided free (yes: Govt. -1, private -2; no -3)					
expenditure for treatment during stay at hospital (Rs.)						
5.	package component (Rs.)					
non-package component (Rs.):		#####				
6.	doctor's/ surgeon's fee (hospital staff/ other specialists)					
7.	medicines					
8.	diagnostic tests					
9.	bed charges					
10.	other medical expenses (attendant charges, physiotherapy, personal medical appliances, blood, oxygen, etc.)					
11.	medical expenditure (Rs.): total (items 5-10)					
expenditure (Rs.): total (items 11-13)						
12.	transport for patient					
13.	other non-medical expenses incurred by the household (Rs.) (food, transport for others, expenditure on escort, lodging charges if any, etc.)					
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 nd most important source of finance (code)					
18.	place of hospitalisation (state code)					

CODES FOR BLOCK 7**items 16, 17: source of finance for expenses:**

household income/ savings -1
 borrowings -2
 sale of physical assets -3

contributions from friends and relatives -4
 other sources -9

[8] particulars of spells of ailment of household members during the last 15 days (including hospitalisation)							
1.	srl. no. of spell of ailment		1	2	3	4	5
2.	srl. no. of member reporting ailment (as in col.1 of block 4/5)						
3.	age (years) (as in col.5, block 4/ col.4, block 5)						
no. of days within the ref. period	4.	ill					
	5.	on restricted activity					
	6.	confined to bed					
7.	nature of ailment (code list on pages 11-12)						
8.	whether chronic (yes-1, no-2)						
9.	status of ailment (code)						
10.	total duration of ailment (days)						
11.	nature of treatment (code)						
12.	whether hospitalised (yes-1, no-2)						
13.	if 1-4 or 9 in item 11 , whether treatment taken on medical advice (yes -1, no -2)						
if 1 in item 13	14.	level of care (code)					
	15.	if 4 or 5 in item 14 , reason for not availing govt. sources (code)					
if 2 in item 13	16.	reason for not seeking medical advice (code)					
	17.	whom consulted (code)					
18.	loss of household income, if any, due to ailment (Rs.)						

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 -2 Yoga & Naturopathy -4
(desai dawai: ayurveda, unani or siddha) -2 Other -9

item 14: level of care:

HSC/ANM/ASHA/AWW -1 private doctor/clinic -4
PHC/dispensary/CHC/mobile medical unit -2 private hospital -5
public hospital -3

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 other -9

item 16: reason for not seeking medical advice:

no medical facility available in the neighbourhood -1 facility of satisfactory quality involves long waiting -4
facility of satisfactory quality not available -2 ailment not considered serious -5
facility of satisfactory quality too expensive -3 other -9

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

[9] expenses incurred during the last 15 days for treatment of members (not as in-patient of medical institution)						
1.	srl. no. of ailing member (as in item 2, block 8)					
2.	age (years) (as in item 3, block 8)					
3.	whether any medical service provided free (yes: Govt. -1, Pvt. - 2; no - 3)					
details of medical services received (not received - 1; received: free - 2, partly free - 3, on payment - 4)						
4.	surgery					
5.	medicine received (AYUSH)					
6.	medicine received (other than AYUSH)					
7.	X-ray/ECG/EEG/Scan					
8.	other diagnostic tests					
medical expenditure for treatment (Rs.)						
9.	doctor's/ surgeon's fee (hospital staff/ other specialists)					
10.	medicines: AYUSH					
11.	medicines: other than AYUSH					
12.	diagnostic tests					
13.	other medical expenses (attendant charges, physiotherapy, personal medical appliances, blood, oxygen, etc.)					
14.	medical expenditure (Rs.): total (items 9-13)					
15.	transport for patient					
16.	other expenses (Rs.) incurred by the household (food, transport for others, expenditure on escort, etc.)					
17.	expenditure (Rs.): total (items 14-16)					
18.	total amount reimbursed by medical insurance company or employer (Rs.)					
19.	major source of finance for expenses (code)					
20.	2 nd most important source of finance for expenses (code)					
21.	place of treatment (state code)					

CODES FOR BLOCK 9

items 19, 20: source of finance for expenses:

household income/ savings

-1

contributions from friends and relatives

-4

borrowings

-2

other sources

-9

sale of physical assets

-3

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

CODES FOR BLOCK 10

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 8: living arrangement:

living alone:as an inmate of old age home -1	living with spouse and other members - 4
living alone:not as an inmate of old age home -2	living without spouse but with: children -5
living with spouse only - 3	other relations - 6
	non-relations - 9

item 9: 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 11: own perception about current state of health: excellent/very good - 1, good/fair - 2, poor - 3

item 12: 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

[11] particulars of pre-natal and post-natal care for women of age 15-49 years during the last 365 days													
for women aged 15-49 years													
serial. no. (as in block 4/5)	age (years) (as in block 4/5)	whether pregnant any time during last 365 days (yes-1, no-2)	if 1 in col. 3										
			serial no. of pregnancy (1/2)	whether received tetanus toxoid vaccine during pregnancy (yes-1, no-2)	whether taken IFA during pregnancy (yes-1, no-2)	whether any other pre-natal care received (code)	if 1-6 in col. 7	total expenditure incurred on pre-natal care (Rs.)	out-come of pregnancy (code)	if 1-3 in col. 10		if 1-6 in col. 12	
							nature of pre-natal care (AYUSH-1, non-AYUSH-2, both-3)			place of delivery/abortion (code)	whether any post-natal care received (code)	nature of post-natal care (AYUSH-1, non-AYUSH-2, both-3)	expenditure incurred on post-natal care (Rs.)
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)

CODES FOR BLOCK 11

cols. 7, 12: *whether any other pre-natal/ any post-natal care received:*

<i>yes, from HSC/ANM/ASHA/AWW</i>	-1	<i>yes, from private doctor/clinic</i>	-4
<i>yes, from PHC/dispensary/CHC/mobile medical unit</i>	-2	<i>yes, from private hospital</i>	-5
<i>yes, from public hospital</i>	-3	<i>no</i>	-8

col. 10: *outcome of pregnancy: live birth -1, stillbirth -2, abortion-3, pregnancy continuing -4*

col. 11: *place of delivery/ abortion:*

<i>in HSC</i>	-1	<i>in private clinic</i>	-4
<i>in PHC/dispensary/CHC/mobile medical unit</i>	-2	<i>in private hospital</i>	-5
<i>in public hospital</i>	-3	<i>at home</i>	-6

**“CODES FOR “NATURE OF
AILMENT”**

Schedule 25.0: A-11

Block 6: item 4; Block 8: item 7

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

<i>Reported Diagnosis and/or Main Symptom</i>	<i>Code</i>	<i>Reported Diagnosis and/or Main Symptom</i>	<i>Code</i>
GENITO-URINARY		INJURIES	
<i>Any difficulty or abnormality in urination</i>	46	<i>Accidental injury, road traffic accidents and falls</i>	52
<i>Pain the pelvic region/reproductive tract infection/ Pain in male genital area</i>	47	<i>Accidental drowning and submersion</i>	53
<i>Change/irregularity in menstrual cycle or excessive bleeding/pain during menstruation and any other gynaecological and andrological disorders incl. male/female infertility</i>	48	<i>Burns and corrosions</i>	54
		<i>Poisoning</i>	55
		<i>Intentional self-harm</i>	56
		<i>Assault</i>	57
		<i>Contact with venomous/harm-causing animals and plants</i>	58
OBSTETRIC		<i>Symptom not fitting into any of above categories</i>	59
<i>Pregnancy with complications before or during labour (abortion, ectopic pregnancy, abortion, hypertension, complications during labour)</i>	49	<i>Could not even state the main symptom</i>	60
<i>Complications in mother after birth of child</i>	50	<i>Childbirth – Caesarean/ normal/ any other (for both live birth and stillbirth)</i>	88
<i>Illness in the newborn/ sick newborn</i>	51		