

Government of India
Ministry of Statistics and Programme Implementation
National Sample Survey Office

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PRESS NOTE

KEY INDICATORS OF SOCIAL CONSUMPTION: HEALTH, 2014

The National Sample Survey Office (NSSO), Ministry of Statistics and Programme Implementation has released the key indicators of Social Consumption in India: Health, generated from the data collected during the period January to June 2014 in its 71st round survey. NSS Survey on morbidity are being conducted from 28th round (1973-1974) and the last survey was conducted in NSS 60th round (January to June 2004).

The survey on Social Consumption: Health conducted during the period January to June 2014 aimed at generating basic quantitative information on the health sector. One of the vital components of the survey was dedicated to collect information relevant for determination of the prevalence rate of different diseases among various age-sex groups in different regions of the country. Further, measurement of the extent of use of health services provided by the Government was an important part of this exercise. Special attention was given to hospitalisation i.e. 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 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 in-patient and otherwise.

The detailed results of this survey on health are planned to be brought out by the NSSO through a main report. In order to make available the salient results of the survey well in advance of the release of its report for use in planning, policy formulation, and decision support and as input for further statistical exercises, the NSSO has released the key indicators.

The key indicators are based on the Central sample consisting of 4,577 villages in rural areas and 3,720 urban blocks spread over all States and Union Territories of India. The information was collected through a schedule (25.0) from a set of sample households during the period January to June 2014. The total number of households in which Schedule was canvassed, was 36480 in rural India and 29452 in urban India.

A. NON-HOSPITALISED TREATMENT:

- Table below gives the survey estimates on Proportion (per 1000) of Ailing Persons (PAP) measured as the number of living persons reporting ailments (per 1000 persons) during 15-day reference period for different gender and age groups in rural and urban sectors. The PAP (per 1000 persons) was 89 persons in rural India and 118 persons in urban India. It may be mentioned that these estimates are based on self-reported morbidity data, rather than on medical examination. As expected, the PAPs were found to be high for children and much higher for the higher age groups and low for the younger age groups.

Table: Proportion (per 1000) of ailing persons (PAP) during last 15 days for different age groups separately for gender: rural, urban

age-group	rural			urban		
	male	female	persons	male	female	persons
(1)	(2)	(3)	(4)	(5)	(6)	(7)
0-4	119	86	103	111	117	114
5-9	65	50	58	87	71	80
10-14	43	47	45	57	53	56
15-29	35	57	46	38	59	48
30-44	60	94	77	71	126	98
45-59	109	163	135	173	239	206
60-69	247	270	259	331	379	355
70+	327	286	306	376	371	373
all	80	99	89	101	135	118

- Inclination towards allopathy treatment was prevalent (around 90% in both the sectors). Only 5 to 7 percent usage of 'other' including AYUSH (Ayurveda, Yoga or Naturopathy Unani, Siddha and homoeopathy) was reported both in rural and urban area. Moreover, un-treated spell was higher in rural (both for male and female) than urban areas.
- Private doctors were the most important single source of treatment in both the sectors (Rural & Urban). More than 70% (72 per cent in the rural areas and 79 per cent in the urban areas) spells of ailment were treated in the private sector (consisting of private doctors, nursing homes, private hospitals, charitable institutions, etc.).

B. HOSPITALISED TREATMENT:

- Medical treatment of an ailing person as an in-patient in any medical institution having provision for treating the sick as in-patients, was considered as hospitalised treatment. In the urban population, 4.4% persons were hospitalised at some time during a reference period of 365 days. The proportion of persons hospitalised in the rural areas was lower (3.5%).
- It is observed that in rural India, 42% hospitalised treatment was carried out in public hospital and rest 58% in private hospital. For the urban India, the corresponding

figures were 32% and 68%. It may be noted in this context that households (or persons within households) were segregated in sector (rural/urban) by their place of domicile, and not by the place of treatment.

- Preference towards allopathy treatment was observed in cases of hospitalised treatment as well.

C. COST OF TREATMENT – AS IN-PATIENT AND OTHER:

- Average medical expenditure per hospitalisation case: Higher amount was spent for treatment per hospitalised case by people in the private hospitals (₹ 25850) than in the public hospitals (₹ 6120). The highest expenditure was recorded for treatment of Cancer (₹ 56712) followed by that for Cardio-vascular diseases (₹ 31647).
- Average medical expenditure per non-hospitalisation case was ₹ 509 in rural India and ₹639 in urban India.
- As much as 86% of rural population and 82% of urban population were still not covered under any scheme of health expenditure support. Government, however, was able to bring about 12% urban and 13% rural population under health protection coverage through RastriyaSwasthyaBimaYojana (RSBY) or similar plan. Only 12% households of the 5th quintile class (Usual Monthly Per Capita Consumer Expenditure) of urban area had some arrangement of medical insurance from private provider.

D. INCIDENCE OF CHILDBIRTH, EXPENDITURE ON INSTITUTIONAL CHILDBIRTH:

- In rural area 9.6% women (age 15-49) were pregnant at any time during the reference period of 365 days; for urban this proportion was 6.8%. Evidence of interrelation of place of childbirth with level of living is noted both in rural and urban areas. In the rural areas, about 20% of the childbirths were at home or any other place other than the hospitals. The same for urban areas was 10.5%. Among the institutional childbirth, 55.5% took place in public hospital and 24% in private hospital in rural area. In urban area, however, the corresponding figures were 42% and 47.5% respectively.
- An average of ₹5544 was spent per childbirth (as inpatient) in rural area and ₹11685 in urban area. The rural population spent, on an average, ₹1587 for the same in a public sector hospital and ₹14778 for one in a private sector hospital. The corresponding figures for urban India were ₹2117 and ₹20328.

The publication based on the above-cited Key-Indicators is also available on the website (www.mospi.gov.in) of the Ministry of Statistics & Programme Implementation.