

CHAPTER 1

INTRODUCTION

1.1 Background

- 1.1.1. The National Sample Survey Office (NSSO), Ministry of Statistics & Programme Implementation (MOSPI), Government of India, since its inception in 1950 has been conducting nationwide integrated large scale sample surveys, employing scientific sampling methods to generate data and statistical indicators on diverse socio-economic aspects.
- 1.1.2 During the period 1st January 2014 to 30th June 2014, NSS conducted its 71st round on the subject of social consumption on Health and Education. The 60th round of NSS (January- June 2004), a survey on morbidity and health care, was conducted after which there has been no survey on health till this 71st round (January- June 2014).

1.2 Objective of the survey

- 1.2.1 The survey on Social Consumption: Health in 71st round aimed to generate basic quantitative information on the health sector at the national as well as the state level. One vital component 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 the 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.
- 1.2.2 For the first time in an NSS health survey, the data collected has enabled assessment of the role of alternative schools 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 the condition of the 60-plus population was also obtained which have a bearing on their state of health, economic independence and degree of isolation.

1.3 Schedules of enquiry

- 1.3.1 The survey period of the 71st round was from January to June 2014. The required information was collected from a set of sample households using *Schedule 25.0* (see *Appendix B for details*).

1.3.2 In addition to the household characteristics and demographic particulars, the following information was collected in this round from each household:

- I. Particulars of medical treatment received as in-patient of a medical institution during the last 365 days and expenses incurred during the last 365 days for treatment of members as in-patient of medical institution
- II. Particulars of spells of ailment of household members during the last 15 days (including hospitalization) and expenses incurred during the last 15 days for treatment of members (not as an in-patient of medical institution)
- III. Particulars of pre-natal and post-natal care for pregnant women of age 15-49 years during the last 365 days
- IV. Particulars of economic independence and state of health of persons aged 60 years and above

1.4 Outline of survey programme

1.4.1 **Geographical coverage:** The survey covers the entire state of Nagaland.

1.4.2 **Population coverage:** The following rules regarding the population coverage were adhered to compile listing of households and persons:

- Under-trial prisoners in jails and indoor patients of hospitals, nursing homes etc. were excluded, but residential staffs therein were listed whenever listing was done in such institutions. The persons of the first category was considered as members of their parent households and counted there. Convicted prisoners undergoing sentence was outside the coverage of the survey.
- Floating population, i.e., persons without any normal residence were not listed. But households residing in open space, roadside shelter, under a bridge, etc. more or less regularly in the same place, were listed.
- Neither the foreign nationals nor their domestic servants were listed, if by definition the latter belong to the foreign national's household. If, however, a foreign national became an Indian citizen for all practical purposes, he or she was covered.
- Persons residing in barracks of military and paramilitary forces (like police, BSF, etc.) were kept outside the survey coverage due to difficulty in conduct of survey therein. However, civilian population residing in their neighborhood, including the family quarters of service personnel, was covered.
- Orphanages, rescue homes, *ashrams* and vagrant houses were outside the survey coverage. However, persons staying in old age homes, *ashrams/hostels (other than students)* and the residential staff (other than monks/nuns) of these ashrams were listed. For orphanages, although orphans were not listed, the persons looking after them and staying there were considered for listing.

- Students residing in the students' hostels were excluded from the hostel as they were considered as members of the household to which they belonged before moving to the hostel. However, residential staff was listed in the hostel. In this round, however, following exceptions in the definition of household was integrated:

1. *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.*
2. *Any woman who has undergone childbirth during last 365 days before the date of survey was considered a member of the household which incurred the cost of childbirth irrespective of her place of residence during the last 365 days.*
3. *A child aged less than 1 year was considered a member of the household to which its mother belongs.*

1.4.3 Table 1.1 shows the number of FSUs (villages/blocks), households, persons surveyed and persons aged 60 years and above, number of persons having chronic ailments and number of hospitalized and ailing who were covered under the survey.

Table 1.1: No. of FSUs, households, persons surveyed, persons (aged 60 years and above), persons having chronic ailments, hospitalized and ailing

Sector	Number of surveyed						
	FSUs	Households	Persons	Persons aged >=60	Persons hospitalized during last 365 days	Persons reporting chronic ailment during last 15 days for which	
						Hospitalized	Not hospitalized
Rural	44	352	1703	48	204	1	56
Urban	84	672	3146	63	405	2	103
All	128	1024	4849	111	609	3	159

1.4.4 **Period of survey and work programme:** The period of survey was for six months duration starting from 1st January 2014 and ending on 30th June 2014. The survey period of this round will be 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 sub-rounds equal number of sample villages/ blocks (FSUs) were allotted for survey with a view to ensure uniform spread of sample FSUs over the entire survey period.

1.4.5 **Sample design:** A stratified multi-stage design was adopted for the 71st round survey. The First Stage Unit (FSU) was the census village in the rural sector and Urban Frame Survey (UFS) blocks in the urban sector. The Ultimate Stage Units (USU) was households in both the sectors. In case of large FSUs, one intermediate stage of sampling was the selection of two hamlet groups (hgs)/ sub-blocks (sbs) from each rural/ urban FSU.

1.4.6 **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 (2007-12) were considered as the sampling frame.

1.4.7 **Stratification:** Within each district of the state, two basic strata were formed:

- i) rural stratum comprising of all rural areas of the district and
- ii) urban stratum comprising of all urban areas of the district

In case of rural areas of Nagaland, one special stratum was formed within the state consisting of all the interior and inaccessible villages which were not covered in previous rounds.

1.4.8 **Total sample size (FSUs):** A total of 128 FSUs were allotted to Nagaland out of which were 44 for rural and 84 for urban.

1.4.9 **Selection of FSUs:** For the rural sector, each stratum/sub-stratum 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 will be selected by Probability Proportional to Size With Replacement (PPSWR), size being the number of households of the UFS blocks.

1.5 Conceptual framework

1.5.1 The estimates of number of households presented in this report are based on data with a moving reference point, from 1.1.2014 to 30.6.2014, which spans over a period of six months. These estimates, therefore, may be taken to represent the number of households existing as on 31.03.2014, the mid-point of the six-month period.

1.5.2 **Reference period:** Details of all ailments (as in-patient or otherwise) during last 15 days were collected for all current members and former members. On the other hand, the number of 'hospitalized' members and the number of 'death occurred' were collected with a different reference period as follows:

- (i) details of hospitalization for all current and former members were collected for last 365 days (hospitalization occurred from January 2013 to June 2014)
- (ii) details of death were collected for last 365 days (death occurred from January 2013 to June 2014).

Thus the estimates of number of 'hospitalized' members as well as number of 'death occurred' may be taken to represent the same as on 30.09.2013.

1.5.3 Quintile class of UMPCE (Usual Monthly Per Capita Expenditure):

1.5.3.1 This refers to the 5 quintile classes of the Rural/Urban distribution (estimated distribution) of households by MPCE. In the tables, the different quintile classes are referred to simply as 1 (lowest quintile class), 2, 3, 4 and 5.

1.5.3.2 Following table 1.2 shows the lower and upper limits of the all-India quintiles to have an idea of level of living of the households belonging to these quintile classes.

Table 1.2: Lower and upper limits of UMPCE in different quintile classes for each sector

Quintile class of MPCE	MPCE in Rs.			
	Rural		Urban	
	Lower limit	Upper limit	Lower limit	Upper limit
1	0	800	0	1182
2	800	1000	1182	1600
3	1000	1264	1600	2200
4	1264	1667	2200	3200
5	1667	-	3200	-