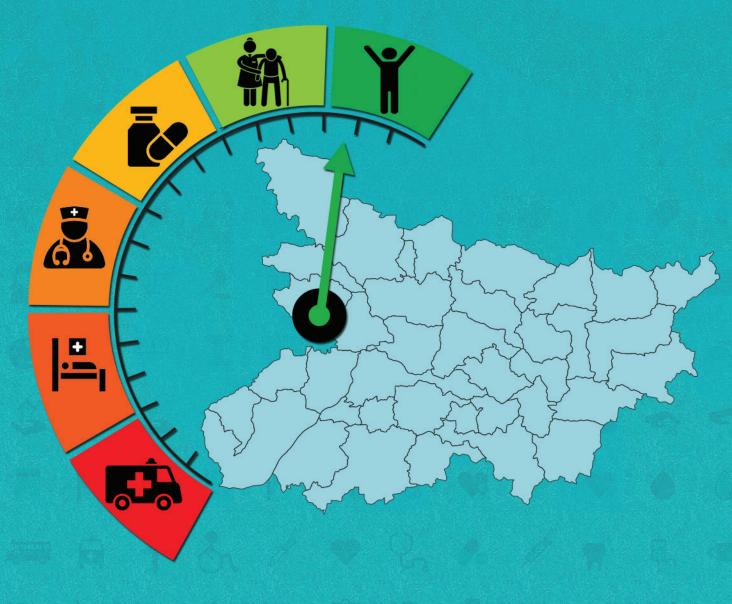




# **HEALTH DOSSIER 2021** Reflections on Key Health Indicators





# DISTRICTS VISITED IN COMMON REVIEW MISSIONS

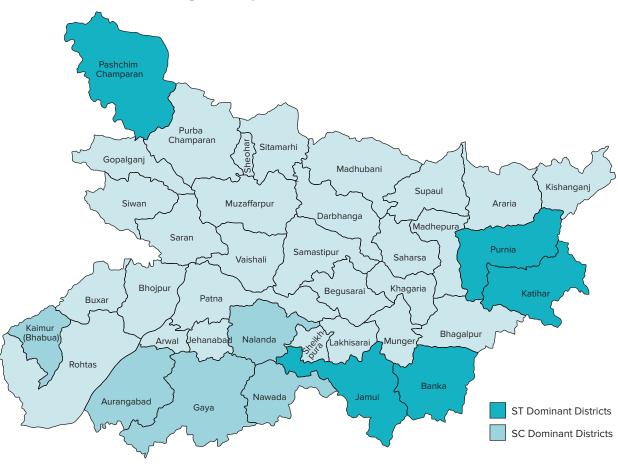
CRM	Districts Visited		
1 <sup>st</sup>	Patna	Vaishali	
2 <sup>nd</sup>	Muzaffarpur	Vaishali	
3 <sup>rd</sup>	Nalanda	Khagariya	
5 <sup>th</sup>	Begusarai	Kishangarh	
6 <sup>th</sup>	Banka	Gopalganj	
7 <sup>th</sup>	Purnea	Vaishali	
8 <sup>th</sup>	Patna	Madhubani	
10 <sup>th</sup>	Siwan	West Champaran	
11 <sup>th</sup>	Bhojpur	Madhepur	
12 <sup>th</sup>	Rohtas	Muzaffarpur	
13 <sup>th</sup>	Bhagalpur	Begusarai	
14 <sup>th</sup>	Jamui	Lakhisarai	



# **1. BACKGROUND**

### **1.1 State Profile**

**Bihar** is the thirteenth<sup>a</sup> largest State by area in India, with a geographical spread of 94,163 km<sup>2</sup>, accounting for 2.89% of the country's area (RHS 2019-20). The State is divided into 38 districts. It is the third most populous State in the country, with a population of over 10.4 crores, accounting for 8.6% of the country's total population<sup>b</sup>, and is projected to increase to 12.3 crores by 2021 (Census



#### Figure 1: Top 5 ST & SC Dominant Districts

<sup>a</sup> Including all States & UTs, as per RHS 2019-20

<sup>b</sup> Census 2011

Population Projection 2019 Report). As per Census 2011, the Scheduled Caste (SC) and Scheduled Tribe (ST) population is 1.6 crores (15.91%) and 0.13 crores (1.28%), respectively. Out of the 38 districts, top five SC & ST dominant districts account for 21.06% of SC & 55.27% of ST population in the State (Figure 1 & Annexure 1.1, State Profile). As reported, Bihar has the second lowest urbanization rate in India, with 88.7% of the population residing in rural areas, while only 11.3% in urban areas.

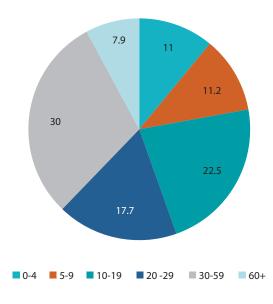
The total length of roads<sup>c</sup> in the State is 2,09,549 kms (4.19%<sup>d</sup>), in which, the length of national highways is 4,839 kms (4.2%<sup>e</sup>) and state highways is 4,006 kms (2.2%<sup>f</sup>). Agriculture remains the mainstay of the Bihar's economy.

A detailed report on the Key indicators has been attached as Annexure 1.

### **1.2 Demography**

In Bihar, 15 districts have a population over 30 lakhs, 11 districts have around 20-30 lakhs population, 9 districts have around 10-20 lakhs population and only 3 districts have less than 10 lakhs population (Annexure 1.1). The State's sex ratio of 895 females for every 1000 males is only slightly higher than the national average of 889 females for every 1000 males (Annexure 1.2). As estimated, there are 22.5% of the total population in the age group of 10-19 years, 47.7% within 20 to 59 years, and 7.9% are in the age group of 60 years and above (Figure 2). The crude birth and death rates have declined from 30.4 and 8.1 (2005) to 25.8 and 5.5 (2019) respectively (Annexure 2, Figure 2). The literacy rate has increased from 47% in 2001 to 61.8% in 2011, with male literacy reported as 71.2%, while female literacy being only 51.5% (Annexure 1.1). As per ESAG 2018 report, the Gross Enrollment Rate (GER)<sup>g</sup> is 107.67% for primary education, 107.74% for elementary education, 78.37% for secondary education, 35.62% for senior secondary education, and 14.3 % for higher education.

Figure 2: Bihar - distribution of estimated population 2021 (%)



### **1.3 Elderly**

Elderly people aged 60 years and above share 7.9% of the State's total population (Figure 2). The life expectancy at 60 years of age is 16.3 years for males and 16.8 years for females (SRS Based Life Abridged Table, 2014-18). It is reported<sup>h</sup> that in rural areas, around 73% of elderly females and 23% elderly males are economically fully dependent. As per Elderly in India 2016 report, the old age dependency ratio of

<sup>&</sup>lt;sup>c</sup> Basic Road Statistics 2019, MoRTH

<sup>&</sup>lt;sup>d</sup> Percentage of total length of roads in the State/UT

<sup>&</sup>lt;sup>e</sup> Percentage of total length of National Highways in the country

<sup>&</sup>lt;sup>f</sup> Percentage of total length of State Highways in the country

<sup>&</sup>lt;sup>9</sup> Gross Enrolment Rate (GER): Total enrolment in a specific level of education, regardless of age, expressed as a percentage of the eligible official school-age population corresponding to the same level of education in a given school-year. School-age Population: Population of the age group which officially corresponds to the relevant level of education; senior secondary education is XI-XII, secondary is IX-X, primary is I-V and elementary is I-VIII

<sup>&</sup>lt;sup>h</sup> NSSO report number 586

14.2 (2011) is at par with the national average, with regional variations of 14.5 in rural areas & 12.3 in urban areas. The illness (any deviation from the state of physical and mental well-being) perception among the elderly is low. Only 19% of men and 17% of women reported illness, which is less than the national average of 31% for both.

# 2. HEALTH STATUS AT A GLANCE

# **2.1 Maternal Health**

The RMNCHA+N<sup>i</sup> services have improved with the launch of NHM in the State. Indicators for Antenatal care (ANC)<sup>j</sup>, institutional deliveries, C sections, distribution of IFA<sup>k</sup> tablets, follow up of high-risk pregnancies, provision of postnatal and newborn care have shown improvement since 2005 (NFHS 4 & 5). The maternal mortality ratio has declined from 261<sup>i</sup> (SRS MMR Bulletin 2007-09) to 149 (SRS MMR Bulletin 2018) per 1,00,000 live births. In Bihar, out of the total ANC registration, 69.8% of pregnant women received 4 ANC check-ups (Annexure 1.4). As reported in HMIS 2019-20, around 85% of all reported deliveries took place in institutions out of which 88.3% deliveries took place in public health facilities. Total percentage of C-section deliveries out of the reported institutional deliveries in the State (2.6%) is less than the national average of 20.5%, out of which 8.5% of them are conducted in private facilities (Annexure 1.4). Around 38% of women were tracked for the first postpartum check-up between 48 hours and 14 days (Annexure 1.4). The prevalence of anaemia in women increased from 61% to 65.7%. Anemia in females of reproductive age group (65.7%) is more than thrice than in men (29.5%) of similar age group (Annexure 2, Figure 5).

### 2.2 Newborn, Infant & Child Health

Ever since the inception of NHM in 2005, the State has shown a decline in IMR from 61 (2005) to 29 (2019), which is below the national average of 30 (Annexure 2, Figure 1). Though the NNMR<sup>m</sup> has significantly decreased from 32.4 (2005) to 25 (2018), the Still Birth (per 1,000 live births) Rate, however, shows a rising trend from 1.7 (2005) to 2 (2018) (Annexure 2, Figure 4). The life expectancy at birth<sup>n</sup> has improved from 65.8 years in 2006-10 to 69.1 years in 2014-18, varying marginally between females (68.7 years) and males (69.4 years) (Annexure 2, Figure 3), yet is slightly less than the national average of 69.4 years. In NFHS 5, Vaishali, Jehanabad, Siwan, Begusarai & Madhepura districts reported high SRBs ranging between 1118-1058, while Muzaffarpur, Saran, Madhubani, Darbhanga & Arwal districts reported low SRBs ranging between 685-815 (Annexure 3, NFHS 5).

Full vaccination<sup>o</sup> for children between 12–23 months has improved from 77.1% (2015-16) to 82.7% (2019-20; NFHS 5). The percentage of under 6-months children exclusively breastfed also increased from 53.4% to 58.9% (NFHS 5). Though the burden of malnutrition declined over time<sup>p</sup>, there is a wide variation in the nutritional status across the state. A considerable increase in childhood anaemia from 63.5% to 69.4% in children aged 6-59 months has been reported (Annexure 2, figure 5). For under-5 stunting,

<sup>i</sup> Reproductive, Maternal, Newborn, Child Health, Adolescent Health & Nutrition

<sup>&</sup>lt;sup>j</sup> Antenatal Check up

k Iron Folic Acid Tablets

Including Jharkhand

<sup>&</sup>lt;sup>m</sup> Neonatal Mortality Rate

<sup>&</sup>lt;sup>n</sup> SRS Based Abridged Life Tables

<sup>°</sup> NFHS 5 State/UT Factsheet, based on information from vaccination card only

<sup>&</sup>lt;sup>p</sup> Disease Burden Trends in the States of India 1990 to 2016

Gopalganj, Sheohar, Patna, Khagaria & Munger districts reported relatively low burden, ranging from 34.2% to 35.5%; and Sitamarhi, Sheikhpura, Araria, Nawada & Purba Champaran districts reported high burden ranging from 49.1% to 54.2%. Similarly, for under-5 wasting, Pashchim Champaran, Sitamarhi, Sheikhpura, Purba Champaran & Madhubani districts reported relatively low burden, ranging from 13.2% to 17.1%, while Arwal, Jehanabad, Sheohar, Buxar & Aurangabad districts reported high burden ranging from 32.9% to 36.8% (Annexure 3, NFHS 5).

## **2.3 Family Planning**

The TFR<sup>q</sup> has reduced from 4.3 (2005) to need 3.2 (2018) which is more than the national average of 2.2 (SRS Statistical Reports). The total unmet is 13.6%, while unmet need for spacing is 6.1 (NFHS 5). In the State, Sheikhpura reported the lowest unmet need (3.2%) and Nawada reported the highest (6.5). Around 44.4% of married women reported to avail any modern method of family planning in Bihar, with sterilization acceptance among females being 34.8% and nil among males (NFHS 5).

### **2.4 Communicable Diseases**

The State has 38 functional IDSP units in place<sup>r</sup>. The proportion of Communicable, Maternal, Neonatal, and Nutritional Diseases [CMNND] contribute to 40.24% of total disease burden while Diarrheal diseases, Lower Respiratory Infection and neonatal disorders remain the major causes of death in the State (Annexure 2, Figure 6). As per QPR report, for TB, the annualized total case notification rate is 92% and NSP<sup>s</sup> success-rate is 75%, as opposed to the national averages of 163% and 79% respectively. For NLEP<sup>t</sup>, the reported prevalence rate of 0.77% per 10,000 population is higher than the national average of 0.61. No death(s) from vector borne diseases (Dengue, Malaria, Kala Azar) are reported.

### 2.5 Non-Communicable Diseases (NCDs)& Injuries

It is reported that 69.9% of the total disease burden is due to premature deaths and 30.1% is due to disability or morbidity(2016)<sup>[1]</sup>. As per GBD<sup>u</sup> 2019, the leading causes of DALY include Ischemic Heart Disease, Chronic Obstructive Pulmonary Disease, and Diabetes Mellitus Type 2. NCDs contribute to 50.34% of DALYs, while injuries contribute to around 9.42% of DALYs in the State (Annexure 1.4). It is found in recent NFHS 5 report that 5% of women and 48.8% of men used any kind of tobacco, while 0.4% of women and 15.5% of men consumed alcohol. In general, the major risk factors for DALYs includes child & maternal malnutrition, air pollution, WASH<sup>v</sup>, dietary risk factors and high blood pressure (Annexure 2, Figure 7).

### 2.6 Health Care Financing

The State's Net State Domestic Product (NSDP) for FY 2018-19 is ₹ 4,86,775.84 crores. In terms of per capita of ₹ 40,982, Bihar is positioned last among the 32 states<sup>w</sup>. According to NHA 2017-18, the per capita Government Health Expenditure in the State is ₹ 556, which is less than the national average of

<sup>&</sup>lt;sup>q</sup> Total Fertility Rate

r QPR NHM MIS Report as on 01.03.2020 & 31.12.2020

<sup>&</sup>lt;sup>s</sup> New Smear Positive

t National Leprosy Eradication Programme

<sup>&</sup>lt;sup>u</sup> Global Burden of Disease, https://vizhub.healthdata.org/gbd-compare/india

Water, Sanitation and Hygiene

Directorate of Economics & Statistics

₹ 1,753. On the other hand, the OOPE<sup>×</sup> as a share of Total Health Expenditure (THE) is 58.2%, as opposed to the national average of 48.8%. As per the NSSO 2017-18, the OOPE for inpatient care per hospitalization in rural areas is around ₹ 5,390 in public hospitals and ₹ 18,189 in private hospitals, in urban areas it is around ₹ 5,220 in public hospitals and ₹ 26,217 in private hospitals (Annexure 1.6). For childbirth, OOPE in public health facilities is around ₹ 2,422 in rural areas and ₹ 2,966 in urban areas, whereas in private health facilities, it is ₹ 15,729 in rural areas and ₹ 17,866 in urban areas. In public health facilities, the share of expenditure on medicine is 48% for inpatient care in rural and in urban areas; whereas for diagnostics it is 16 % and 17% in rural and urban areas respectively<sup>y</sup>.

### 2.7 Health Infrastructure

As per the recent RHS data, the number of public health facilities have been increasing since 2005 (Annexure 1, Figure 8). Yet, a shortfall amounting to 57.88%, 52.68% and 93.66% of the required SCs, PHCs and CHCs, respectively still exist (Annexure 1, Figure 8 & 9). Currently, there are 9,112 SCs, 1,702 PHCs and 57 CHCs in place against the required 21,634 SCs, 3,597 PHCs and 899 CHCs. Similarly, in tribal areas there are only 232 SCs, 33 PHCs and no CHCs in place against the required 491 SCs, 73 PHCs and 80 CHCs. This accounts for a shortfall of 52.75% SCs, 54.79% PHCs and 100% CHCs in the tribal areas. However, in urban areas there are 325 PHCs in place against the required 294, thereby amounting to an excess of 10.54%. The State has 36 DHs, 35 SDHs and 10 Government medical colleges. In Bihar, 100% DHs & SDHs serve as functional FRUs (Annexure 1.3).

Under the recently introduced Ayushman Bharat – Health and Wellness Centres (AB-HWCs), a total of 2341 HWCs (1194 SHCs, 1049 PHCs & 98 UPHCs) are operationalized in the State as of 22<sup>nd</sup> December 2021<sup>z</sup>.

In the State, none of the districts are equipped with MMUs under NHM. The State has 95% of ASHA in position under NRHM and 54% under NUHM. The doctors to staff nurse ratio is 1:1, with 3 public health providers available for every 10,000 population (Annexure 1, Table 1.5).

Recent data (Annexure 1.3) reveals that out of 1000 population who availed services from public health facilities, 642 availed (events) OPD services and 33 availed (events) IPD services. However, as per the NSSO data (2017-18), only 18% of all OPD cases in rural and 23% in urban areas used public health facilities, which is less than the national average of 33% and 26% respectively. Whereas, 70% of all IPD cases in rural and 72% in urban areas utilized public health facilities, which is more than the national average of 46% and 35% respectively.

<sup>×</sup> Out of Pocket Expenditure

y National Sample Survey Office NSSO Figures

<sup>&</sup>lt;sup>z</sup> AB-HWC Portal

# **ANNEXURE 1: KEY INDICATORS**

# **1.1 State Profile**<sup>aa</sup>

Indicator	Bihar 2011 <sup>1</sup>	India
Total Population (In Crore)	10.4	121.08
Rural (%)	88.7	68.85
Urban (%)	11.92	31.14
Scheduled Caste population (SC) (in crore)	1.6 (15.91%)	20.14 (16.63%)
Scheduled Tribe population (ST) (in crore)	0.13 (1.28%)	10.45 (8.63%)
Total Literacy Rate (%)	61.8	72.99
Male Literacy Rate (%)	71.2	80.89
Female Literacy Rate (%)	51.5	64.64
Number of Districts in the Bihar <sup>2</sup>	38	5
	Population <sup>1</sup>	Districts <sup>1</sup> (Numbers)
	<10 Lakhs	3
Number of districts per lakh population in <b>Bihar</b> (Census 2011)	≥ 10 Lakhs - <20 Lakhs	9
	≥20 Lakhs - <30 lakhs	11
	≥30 Lakhs	15

ST SC Dominant (Top 5) Districts of Bihar <sup>1</sup>			
ST Dominant Districts (%) SC Dominant Districts (%)			
Paschim Champaran - 6.35%	Gaya - 30.38%		
Katihar - 5.86%	Nawada - 25.46		
Jamui - 4.47%	Aurangabad - 24.09%		
Banka - 4.44%	Kaimur (Bhabua) - 22.69%		
Purina - 4.27% Nalanda - 21.11%			
Top 5 ST dominant district accounts for - 55.27%	Top 5 SC dominant district accounts for - 21.06%		

1.2 Key Health Status & Impact Indicators			
Indicators	Bihar	India	
Infant Mortality Rate (IMR) <sup>3</sup>	29	30	
Crude Death Rate (CDR) <sup>3</sup>	5.5	6.0	

<sup>aa</sup> Sources are mentioned at the end of Annexure 1

Crude Birth Rate (CBR) <sup>3</sup>	25.8	19.7
Maternal Mortality Ratio (MMR) <sup>3</sup>	149	113
Neo Natal Mortality Rate (NNMR) <sup>4</sup>	25	23
Under Five Mortality Rate (U5MR)⁴	37	36
Still Birth Rate <sup>4</sup>	2	4
Total Fertility Rate (TFR) <sup>4</sup>	3.2	2.2
Life expectancy at birth⁵	69.1	69.4
Sex Ratio at Birth⁴	895	899

# 1.3 Key Health Infrastructure Indicators<sup>bb</sup>

Indicators			
Number of District Hospitals <sup>2</sup>			
			35
al College <sup>6</sup>			10
leges <sup>6</sup>			6
Status (Total)			
1194	2724	5437	7246
1049	1899	1899	1899
98	100	100	100
2341	4723	7436	9245
Require	ed (R)	In place (P)	Shortfall (S) (%)
899	9	57	93.66
3,59	97	1,702	52.68
21,6	34	9,112	57.88
DH	I	SDH	СНС
36		35	64
Require	ed (R)	In place (P)	Shortfall (S) (%)
294	1	325	-10.54
Require	ed (R)	In place (P)	Shortfall (S)%
80		0	100.00
73		33	54.79
491	1	232	52.75
	leges <sup>6</sup> Status (Total) 1194 1049 98 2341 Require 899 3,59 21,63 0H 36 Require 294 Require 80 73	Status (Total)         Target FY (2020-2)           1194         2724           1049         1899           98         100	Arrow leges <sup>6</sup> Target FY (202)       Target FY (2021-22)         1194       2724       5437         1049       1899       1899         1049       1899       1899         98       100       100         98       100       100         2341       4723       7436         Require (R)       7436       7436         89       57       100         3635       1,702       1,702         13.5       9,112       9,112         13.5       9,112       35         Arequire (R)       35       35         13.6       325       325         294       325       0         880       0       0         138       0       33

<sup>&</sup>lt;sup>bb</sup> Sources are mentioned at the end of Annexure 1

Patient Service <sup>9</sup>	Bihar	India
IPD per 1000 population	33.3	62.6
OPD per 1000 population	641.8	1337.1
Operation (surgeries) major (General and Spinal Anaesthesia) per 10000 population	21.7	36.4

1.4 Major Health Indicator <sup>cc</sup>		
% Share of DALYs to Total Disease Burden (GBD 2019) <sup>7</sup>	Bihar	India
% DALY accountable for CMNNDs <sup>##</sup>	40.24	27.46
% DALY accountable for NCDs	50.34	61.43
% DALY accountable for Injuries	9.42	11.11
Birth, Death Registration & Medical Certification of Cause of Death (MCCD) Indicator <sup>8</sup>	Bihar	India
Level of Birth Registration (%)	89.3	92.7
Level of Death Registration (%)	51.6	92
Percentage of medically certified deaths to total registered deaths (%)	5.1	20.7
RMNCHA+N		·
Maternal Health <sup>9</sup>	Bihar	India
% 1st Trimester registration to Total ANC Registrations	69.1	71.9
% Pregnant Woman received 4 ANC check-ups to Total ANC Registrations	69.8	79.4
Total Reported Deliveries	2,207,610	21410780
% Institutional deliveries to Total Reported Deliveries	84.8	94.5
% Deliveries conducted at Public Institutions to Total Institutional Deliveries	88.3	67.9
% Deliveries conducted at Private Institutions to Total Institutional Deliveries	11.7	32.1
% C-section deliveries (Public + Pvt.) to reported institutional (Public + Pvt.) deliveries	2.6	20.5
% C-sections conducted at public facilities to Deliveries conducted at public facilities	1.8	14.1
% C-sections conducted at public facilities to Deliveries conducted at public facilities % C-sections conducted at Private facilities to Deliveries conducted at private facilities	8.5	14.1 34.2
% C-sections conducted at Private facilities to Deliveries conducted at		
<ul> <li>% C-sections conducted at Private facilities to Deliveries conducted at private facilities</li> <li>% Women getting 1st Post-Partum Checkup between 48 hours and 14 days to</li> </ul>	8.5	34.2
<ul> <li>% C-sections conducted at Private facilities to Deliveries conducted at private facilities</li> <li>% Women getting 1st Post-Partum Checkup between 48 hours and 14 days to Total Reported Deliveries</li> </ul>	8.5 38	34.2 53.4
<ul> <li>% C-sections conducted at Private facilities to Deliveries conducted at private facilities</li> <li>% Women getting 1st Post-Partum Checkup between 48 hours and 14 days to Total Reported Deliveries</li> </ul> Neonatal <sup>9</sup>	8.5 38 <b>Bihar</b>	34.2 53.4 India

 $<sup>^{\</sup>rm cc}$  Sources are mentioned at the end of Annexure 1

New Born Care Units Established <sup>11</sup>	Bihar	India
Sick New Born Care Unit (SNCU)	43	895
New Born Stabilization Unit (NBSU)	41	2418
New Born Care Corner (NBCC)	708	20337
Child Health & Nutrition <sup>10</sup>	Bihar (NFHS 5)	India (NFHS 5)
Prevalence of diarrhoea (reported) in the last 2 weeks preceding the survey (%)	13.7	7.3
Children with diarrhoea in the last 2 weeks who received oral rehydration salts (ORS) (%)	58.2	60.6
Children under 5 years who are underweight (weight-for-age) (%)	41	32.1
Child Immunization <sup>10</sup>	Bihar (NFHS 5)	India (NFHS 5)
Children age 12-23 months fully vaccinated based on information from vaccination card only (%)	77.1	83.8
Children age 12-23 months who have received BCG (%)	91.6	95.2
Children age 12-23 months who have received first dose of measles containing vaccine (%)	NA	87.9
Family Planning <sup>10</sup>	Bihar (NFHS 5)	India (NFHS 5)
Unmet need for spacing (%)	6.1	4
Communicable Diseases		
Integrated Disease Surveillance Programme (IDSP) <sup>11</sup>	Bihar	India
Number of districts with functional IDSP unit	38	720
Revised National Tuberculosis Control Programme (RNTCP) <sup>11</sup>	Bihar	India
Annualized total case notification rate (%)	92	163
New Smear Positive (NSP) Success rate (in %)	75	79
National Leprosy Eradication Programme (NLEP) <sup>11</sup>	Bihar	India
Prevalence Rate/10,000 population	0.77	0.61
Number of new cases detected	16,595	114,359
Malaria, Kala Azar, Dengue <sup>11</sup>	Bihar	India
Deaths due to Malaria <sup>11</sup>	0	79
Deaths due to Kala azar reported <sup>11</sup>	0	0
Deaths due to Dengue reported <sup>11</sup>	0	168
Number of Kala Azar Cases reported <sup>11</sup>	2,846	3,706
HIV <sup>10</sup>	Bihar (NFHS 5)	India (NFHS 5)
Women (age 15-49 years) who have comprehensive knowledge of Human Immunodeficiency Virus (HIV)/Acquired immunodeficiency syndrome (AIDS) (%) <sup>10</sup>	10.3	21.6

Non-Communicable Disease				
Diabeties and Hypertension <sup>10</sup>	Bihar (NFHS 5)	India (NFHS 5)		
Women - Mildly elevated Blood Pressure (Systolic 140-159 mm of Hg and/or Diastolic 90-99 mm of Hg) (%)	8.7	12.4		
Men - Mildly elevated Blood Pressure (Systolic 140-159 mm of Hg and/or Diastolic 90-99 mm of Hg) (%)	11.2	15.7		
Women - Blood sugar level - high (141-160 mg/dl) (%)	6.4	6.1		
Men - Blood sugar level - high (141-160 mg/dl) (%)	8.3	7.3		
Tobacco Use and Alcohol Consumption among Adults (age 15 years & above) <sup>10</sup>	Bihar (NFHS 5)	India (NFHS 5)		
Women who use any kind of tobacco (%)	5	8.9		
Men who use any kind of tobacco (%)	48.8	38		
Women who consume alcohol (%)	0.4	1.3		
Men who consume alcohol (%)	15.5	18.8		
Injuries				
Road Traffic Accident <sup>12</sup>	Bihar	India		
Rank (Total number of fatal Road Accidents in State/UT wrt other States/UTs)	8	N/A		
Total number of fatal Road Accidents	6,731	1,37,689		
Severity (Road accident deaths per 100 accidents) of Road Accidents	72	33.7		
Number of persons killed in Road Accidents	7205	115113		

# 1.5 Access to Cared

Health Systems Strengthening			
Ambulances & Mobile Medical Units (MMU) <sup>11</sup>	Bihar	India	
Number of Districts equipped with MMU under NRHM	0	506	
Number of Districts equipped with MMU/Health Units under NUHM	0	31	
Number of ERS vehicles operational in the States/UTs Under NHM	Bihar	India	
102 Туре	1158	9955	
104 Туре	0	605	
108 Туре	0	10993	
Others	86	5129	
Number of Ambulances functioning in the State/UTs other than NHM (At PHC/CHC/SDH/DH)	164	11070	

dd Sources are mentioned at the end of Annexure 1

	Key Domain Indicators		
ASHA <sup>13</sup>		Bihar	India
Total number of ASHA ta	rgeted under NRHM	93687	946563
Total number of ASHA in	position under NRHM	88837	904211
% of ASHA in position ur	nder NRHM	95	96
Total number of ASHA ta	irgeted under NUHM	977	75597
Total number of ASHA in	position under NUHM	527	64272
% of ASHA in position ur	nder NUHM	54	85
Community Process <sup>11</sup>		Bihar	India
Number of Village Health (VHSNCs) constituted	n Sanitation and Nutrition Committees	8406	554847
Number of Mahila Arogy	a Samitis (MAS) formed	731	81134
Number of Rogi Kalya	n Samitis (RKS) registered (Total) <sup>11</sup>	Bihar	India
DH		36 796	
СНС		230	6036
РНС		235	20273
UCHC		0	126
UPHC		80	3229
	Human Resource for Healt	th <sup>14</sup>	
HRH Governance		Bil	har
Specialist Cadre Availabl	e in the state (Y/N)	Yes	
HR Policy available (Y/N)		Y	es
Implementation of HRIS	(Y/N)	In Process	
HR Integration initiated (	(Y/N)	Y	es
Public Health Cadre avai	lable (Y/N)	N	lo
	Specialists (%)	72	
	Dentists (%) 97		7
Overall Vacancies	MO MBBS (%)	3	57
(Regular + contractual)	Nurse (%)	5	2
LT (%)		68	
	ANM (%)	60	
HRH Distribution		Sanctioned	In Place
Doctors (MO & specialist	s) to staff nurse <sup>14</sup>	1:1	1:1
Availability of public healthcare providers (MO, specialists, staff nurse & ANM) in district healthcare system <sup>14</sup>		7 per 10,000	3 per 10,000
Regular to contractual se	ervice delivery staff ratio <sup>14</sup>	4:1	3:1

Ranking: Human Reso	urce Index of	Bihar <sup>15</sup>									
			Total (Regu	ılar + NHM)							
Category	Required (R)	Sanctioned (S)	In-Place (P)	Vacancy (V)	Actual Gap# (R-P)	Ranking: HR Gap Index					
MPW <sup>ee</sup>	45222	37591	19474	18117	25748						
Staff Nurse	17996	19434	10737	8697	7259						
Lab Technician	4146	3653	921	2732	3225	46.70					
Pharmacists	2705	2359	766	1593	1939	46.79					
MO MBBS <sup>#</sup>	6131	7164	4258	2906	1873						
Specialist <sup>99</sup>	3214	5749	1593	4156	1621						

1.6 Healthcare Financing <sup>hh</sup>						
National Health Accounts (NHA) (2017-18)	Bil	har	In	dia		
Per Capita Government Health Expenditure (in ₹)	556 1,75					
Government Health expenditure as % of Gross Domestic Product (GSDP)	1	.4	1.	35		
Government Health Expenditure as % of General Government Expenditure (GGE)		5	5.	12		
OOPE as a Share of Total Health Expenditure (THE) %	58	3.2	48	3.8		
	Bil	har	In	dia		
National Sample Survey Office (NSSO) (2017-2018)	Rural	Urban	Rural	Urban		
OPD - % of non-hospitalized cases using public facility	18	23	33	26		
IPD - % of hospitalized cases using public facility	39	32	46	35		
Out of Pocket Expenditure (OOPE) (NSSO)*	Rural	Urban	Rural	Urban		
OPD - Per non-hospitalized ailing person (in INR) in last 15 days - Public	420	973	472	486		
OPD - Per non-hospitalized ailing person (in INR) in last 15 days - Private	1196	1484	845	915		
IPD - Per hospitalized case (in INR) - Public	5,390	5,220	5,729	5,939		
IPD - Per hospitalized case (in INR) - Private	18,189	26,217	28,816	34,122		
IPD - % of diagnostics expenditure as a proportion of inpatient medical expenditure in Public (NSSO)	16	17	18	17		
IPD - % of drugs expenditure as a proportion of inpatient medical expenditure – Public (NSSO)	48	48	53	43		

<sup>ee</sup> MPW – Multi Purpose Health Worker (Female + Male)

<sup>#</sup> MO MBBS (Full Time)

<sup>&</sup>lt;sup>99</sup> Specialist (All Specialist)

<sup>&</sup>lt;sup>hh</sup> Sources are mentioned at the end of Annexure 1

<sup>\*</sup> Estimated by NHSRC using unit level data of NSSO 2017-18, where OOPE = [Total Medical Expenditure + Transportation Cost] – Reimbursement

Childbirth - Average out of pocket expenditure per delivery in public health facility (₹) (NSSO)	2,422	2,966	2,402	3,091			
Childbirth - Average out of pocket expenditure per delivery in private health facility (₹)	15,729	17,866	20,692	26,701			
State Health Expenditure	Bil	Bihar All India Ave					
State Health Department expenditure as a share of total expenditure (%) (2017-18)**	4	.5	5	<b>5</b> <sup>ii</sup>			

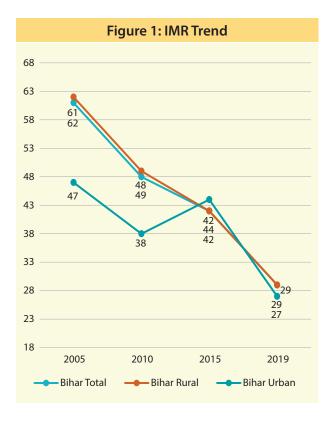
#### Sources used for Annexure 1

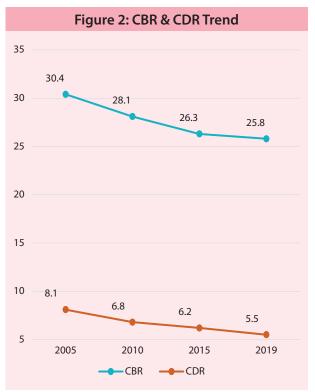
- <sup>1</sup> 1 Census 2011
- <sup>2</sup> Rural Health Statistic (RHS) 2019-20
- <sup>3</sup> Sample Registration Survey (SRS) Bulletin 2018 & 2019
- <sup>4</sup> Registrar General of India (RGI) Statistical Report (SRS) 2018
- <sup>5</sup> SRS Based Abridged Life Tables 2014-18
- <sup>6</sup> National Health Profile 2020
- <sup>7</sup> Global Burden of Disease Data 2019, https://vizhub.healthdata.org/gbd-compare/
- <sup>8</sup> Annual Report on Vital Statistics of India based on CRS 2019 & Medical Certification of Cause of Death 2019
- 9 HMIS (2019-20)
- <sup>10</sup> NFHS 4 & 5
- <sup>11</sup> QPR NHM MIS Report [Status as on 01.03.2020 & recent 31.12.2020 (some indicators removed from the recent report have been taken from report released on 01.03.2020)
- <sup>12</sup> Ministry of Road Transport & Highways (MoRTH) Road Accidents in India 2019
- <sup>13</sup> Update on ASHA Programme July 2019 (NHSRC Publication)
- <sup>14</sup> Human Resources for Health in District Public Health Systems of India: State Wise Report 2020
- <sup>15</sup> HRH Division NHSRC
- <sup>16</sup> As per HWC Portal

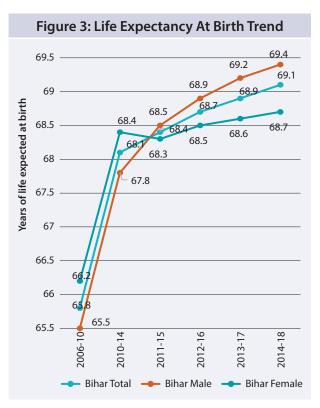
ii Represents data for all states and 2 UTs with legislative assembly (Puducherry + Delhi)

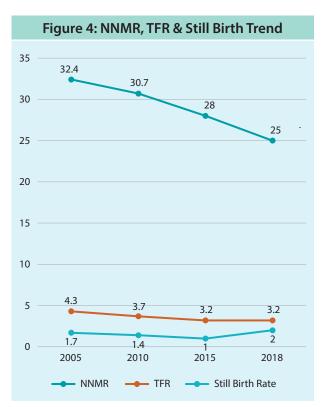
<sup>\*\*</sup> RBI, State Finances: Study of Budgets 2019-20

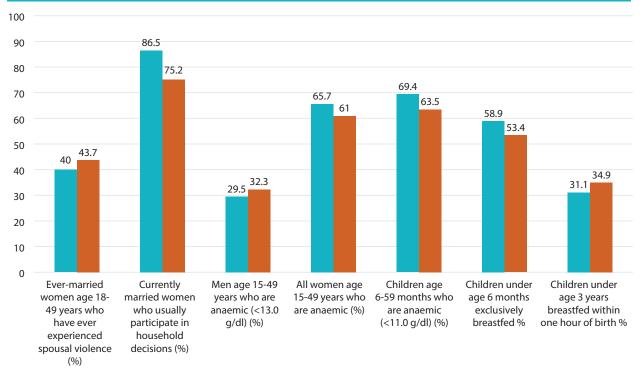
# **ANNEXURE 2**











#### Figure 5: Comparison of Key NFHS 5 & 4 Indicators

NFHS 5 NFHS 4

#### Figure 6: Top 15 causes of DALYs, 1990-2019

Bihar Both sexes, All ages, DALYs per 100,000							
1990 rank	2019 rank						
1 Lower respiratory infect		1 Diarrheal diseases					
2 Diarrheal diseases		2 Ischemic heart disease					
3 Neonatal preterm birth		3 Lower respiratory infect					
4 Other neonatal		4 Neonatal preterm birth					
5 Drug-susceptible TB	h.,	5 Other neonatal					
6 Measles		6 COPD					
7 Neonatal encephalopathy	francista /	7 Dietary iron deficiency					
8 Tetanus	N	8 Neonatal encephalopathy					
9 Protein-energy malnutrition		9 Drug-susceptible TB					
10 Visceral leishmaniasis		10 Falls					
11 Ischemic heart disease		11 Diabetes type 2					
12 pertussis		12 Other musculoskeletal					
13 COPD		13 Intracerebral hem					
14 Dietary iron deficiency		14 Migraine					
15 Meningitis		15 Low back pain					
16 Venomous animal		16 Age-related hearing loss					
18 Falls		28 Venomous animal					
24 Intracerebral hem		35 Protein-energy malnutrition					
26 Low back pain		47 pertussis					
28 Migraine		57 Meningitis					
32 Other musculoskeletal		103 Measles					
35 Age related hearing loss		108 Visceral leishmaniasis					
37 Diabetes type 2	Y	125 Tetanus					

Communicable, maternal, neonatal, and nutritional diseases Non-communicable diseases Injuries

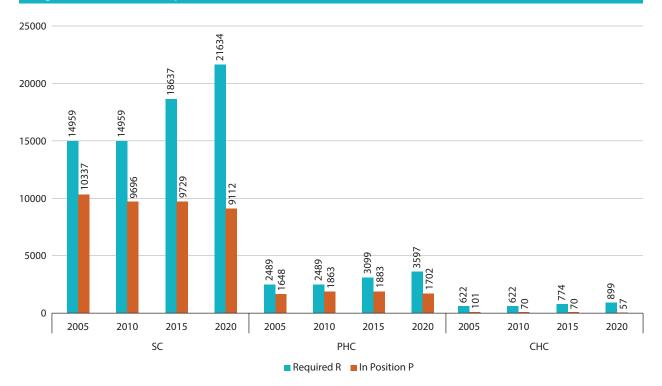
### Figure 7: Top 15 risk of DALYs, 1990-2019

Both	Bihar sexes, All ages, DALYs per 100,000
1990 rank	2019 rank
1 Child and maternal malnutrition	1 Child and maternal malnutrition
2 Unsafe water, sanitation, and handwashing	2 Air pollution
3 Air pollution	3 Unsafe water, sanitation, and handwashing
4 Tobacco	4 High systolic blood pressure
5 High systolic blood pressure	5 Dietary risks
6 Dietary risks	6 High fasting plasma glucose
7 Non-optimal temperature	7 Tobacco
8 Occupational risks	8 High LDL cholesterol
9 High fasting plasma glucose	9 Occupational risks
10 Alcohol use	10 High body-mass index
11 High LDL cholesterol	11 Alcohol use
12 Other environmental risks	12 Kidney dysfunction
13 Kidney dysfunction	13 Other environmental risks
14 High body-mass index	14 Non-optimal temperature
15 Drug use	15 Low bone mineral density
16 Low bone mineral density	16 Drug use
17 Unsafe sex	17 Unsafe sex
18 Childhood sexual abuse and bullying	18 Childhood sexual abuse and bullying
19 Low physical activity	19 Intimate partner violence
20 Intimate partner violence	20 Low physical activity

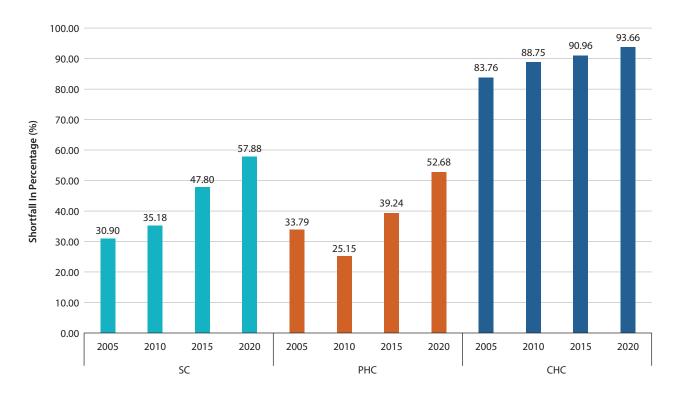


Metabolic risks Environmental/occupational risks Behavioral risks

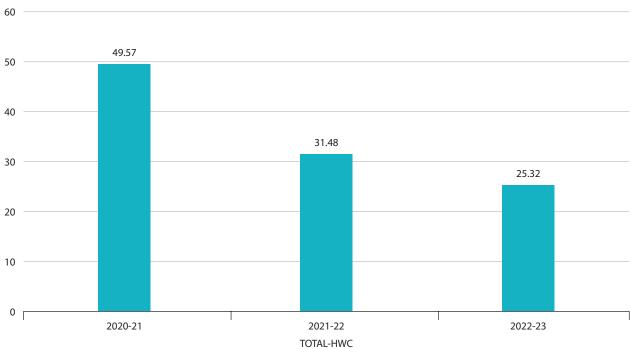
#### Figure 8: Year Wise Required/In Position Health Infrastructure Status in Rural Area (In numbers)



#### Figure 9: Year Wise Health Infrastructure Shortfall (%)



#### Figure 10: Percentage HWCs progress against target - FY wise (%)



Bihar (% HWCs progress as of 22/Dec/2021 against targets - FY wise)

# ANNEXURE 3: DISTRICT WISE PERFORMANCE WITH RESPECT TO KEY NFHS 5 INDICATORS

rformance) t Available)	Children Under 5 Years - Wasted^ (%) (the Hort For Height) (%)	20.8	21.6	23.1	22.9	23.9	36.8	32.9	26.9	21	21.2	31.3	33.2	19.3	24.3	21.5	19.4	36.6	27.3	23.5	25.3	23.9
Good Performance, Red – Poor Performance) (District Wise Rural Urban Stats Not Available)	Children Under 5 Years - Stunted^ (%) (%)	48.3	36.8	43.9	42.9	49.9	45.6	41.2	46.7	37.8	40	40.7	39.6	45.4	47.4	34.2	43	41.3	44.1	43.9	34.8	38.8
ormance, R ise Rural Urb	Total Children Age 6-23 Months Receiving Adequate Diet**, # (%)	7.5	9.2	11.2	10.9	12.8	11.5	5.8	2.8	4.6	8.1	7.7	8.3	14	12.5	13.8	3.3	6.6	13.4	13.8	16.3	13.1
(Green – Good Performance, Red – Poor Performance) (District Wise Rural Urban Stats Not Available)	Children Age 12-23 Months Fully Vaccinated Based On Information From Vaccination Card Only* (%)	77.1	77.4	83.4	82.7	1.17	89	90.6	89.5	80.8	81	80.6	81.7	80.7	84.2	97.9	80.2	79.1	90.4	82.6	84.3	80.9
(Gree	(%) sıtıtıa laroitutiznl	63.8	84.1	75	76.2	66.2	79.2	77.5	79.8	86	77.2	86.9	89.5	6.69	76.6	85.9	73.4	89.1	83.3	6.99	74.2	54.6
	4 teast 4 beH orlW orlyoM (%) stisiV Sise Case (%)	14.4	32.4	24	25.2	25.8	34.5	29.3	31.7	21.6	27.6	33.5	27.4	24.9	25.1	27.9	37.9	17.4	25.6	15.3	17.4	17.1
	Total Unmet Need (%)	21.2	11.5	13.9	13.6	15.9	12.2	7.2	9.7	16	12.8	11.8	9.1	12.7	5.9	19.4	9.5	13	3.7	22.4	15.4	21.7
	(%) ssU mobnoD	-	7.3	3.4	4	1.7	3.4	4.3	4.7	2.9	9.1	4.1	3.8	4.9	4.4	3.3	5.3	4.2	7.3	1.7	2.8	2.5
	(%) UD/PPIUD	0.5	1.3	0.7	0.8	0.1	0.5	0.9	0.7	-	•	2.2	1	0.4	1.4	0.2	6.0	1.5	0.4	0.5	0.2	0.5
	ylims7 ro7 bəsU bort9M ynA Pairied By Currently Mərried (%) sısay 94-21 geA 19m0W	24.1	62.3	54.6	55.8	46	60.5	69.4	71.5	55.8	57.4	63.9	60.5	61.3	73.3	57.3	69.6	52.5	78.6	33.8	40.9	25.3
	bəirnaM zrasy Xc-0S əpA nəmoW Before 18 (%)	42.5	27.9	43.4	40.8	52	37.5	27.3	49.4	49.5	42.4	31.2	30.8	45.1	42.8	28	51.9	41.6	27.1	49.4	44.9	36.6
	(%) 9pA 94-21 9ferati namoW	N/A	74.9	54.5	57.8	43.7	62.5	67.6	55.7	62.3	65.6	64.1	68.1	49.4	59.4	63.3	48.7	63.2	66	49.7	51.8	48
	leusu ۲ne diiw sblodesuoH (%) الماقة مانة ماقة من الماقة مانية مانة من المانة من المانية من المانية (%) المانة من المانية من المانية من المانية من المانية من المانية من المان	12.3	11.6	15.1	14.6	19.5	15.6	15.4	13.6	13.2	16.3	9.6	11.4	25.3	6.7	12.7	14.3	13.2	18.1	8.4	15.6	8.1
	000 l`\zəlsməT) dfrifi A oitsA xə2 Məles)	934	940	903	908	885	815	988	991	1058	628	872	988	812	863	943	986	1066	644	888	918	1016
	Data Source	NFHS 4 Total	NFHS 5 Urban	NFHS 5 Rural	NFHS 5 Total	NFHS 5 Total	NFHS 5 Total	NFHS 5 Total														
	stətricis/səfəs?	Bihar	Bihar	Bihar	Bihar	Araria	Arwal	Aurangabad	Banka	Begusarai	Bhagalpur	Bhojpur	Buxar	Darbhanga	Gaya	Gopalganj	Jamui	Jehanabad	Kaimur (Bhabua)	Katihar	Khagaria	Kishanganj
	.oN .2		2.	ж.	4.	5.	6.	7.	8.	9.	10.	11.	12.	13.	14.	15.	16.	17.	18.	19.	20.	21.

				1		;		1	/	Q7	2.2.2			42.7	25.6
Madhepura	NFHS 5 Total	1058	9.5	47.6	52	55.8	0.3	4.3	11.1	20.9	75	87.7	6.9	46.3	20.6
Madhubani	NFHS 5 Total	805	19.2	53.2	39.2	47.4	0.7	2.2	17.7	34.9	73.7	85.6	12	43.3	17.1
Munger	NFHS 5 Total	966	15.2	69.5	34.7	68.6	9.0	8.6	10.3	36.8	93.2	84.8	5.1	35.5	26.7
Muzaffarpur	NFHS 5 Total	685	13.2	63	32.9	66.1	0.9	4.7	12.1	28.2	72.5	83.7	17.2	42.6	19.9
Nalanda	NFHS 5 Total	959	12.8	56.1	42	72.3	9.0	9	7.5	29.3	80.3	83.8	9.6	42.6	27.8
Nawada	NFHS 5 Total	865	8.1	62.1	43.3	69.8	0.9	7.3	6.5	31.6	79.9	85.2	5.1	49.4	18.2
Pashchim Champaran	NFHS 5 Total	904	20	52.5	39.1	50.7	0.2	2.7	12.1	25.4	79.5	82.7	13.6	43.5	13.2
Patna	NFHS 5 Total	1002	10.2	67.6	26.6	49.3	1.9	4.9	15	17.9	89.1	72.5	8.3	34.5	27.5
Purba Champaran	NFHS 5 Total	841	19.4	50.2	49.2	49.9	1.1	2.5	17.2	21.7	61.5	73.8	15.4	49.1	16.8
Purnia	NFHS 5 Total	938	10.2	47.5	51.2	25.7	0.3	0.9	20.2	11.1	68.9	81.8	5.5	43.5	25.8
Rohtas	NFHS 5 Total	924	17.2	76.5	30.3	73.9	1.2	6.1	5.9	34.2	89.1	93.6	2.6	40	31.8
Saharsa	NFHS 5 Total	1034	12.8	43.1	51	44.7	0.8	0.9	16.7	11.7	70.4	88.5	10.3	47.8	20.5
Samastipur	NFHS 5 Total	890	19	54.3	49.8	63.7	0.6	4.4	11.1	23.5	83.4	85.5	17.7	44	21.3
Saran	NFHS 5 Total	779	9.4	65.6	26.2	41.1	0.4	4.9	17.3	30.7	73	85.7	7.1	39.7	28.8
Sheikhpura	NFHS 5 Total	888	9.7	55	46.1	78.8	0.6	4.8	3.2	28.4	89.2	86.6	5.5	53.6	16.3
Sheohar	NFHS 5 Total	1017	18.1	52.5	34.6	65.6	1.1	4.3	10.4	25.3	74.3	73.5	3.5	34.4	35.4
Sitamarhi	NFHS 5 Total	1009	20.7	51.7	46.8	52.8	1.2	2.1	17	20.3	64.4	76.1	16.3	54.2	16.2
Siwan	NFHS 5 Total	1060	8.2	70.9	21.3	53.5	•	7	15.4	30.3	86.4	83.2	10.8	36.7	18.2
Supaul	NFHS 5 Total	884	14.2	42.1	55.9	63.7	0.6	1.5	12.1	30.9	80.4	80.5	14.5	42.3	25.8
Vaishali	NFHS 5 Total	1118	13.5	62.4	44.9	45.8	0.9	1.9	16.7	24.5	81.6	84.2	11.7	38.3	19.6

\* NFH5S replaced 'Immunized' (word) from NFH54 to 'Vaccinated'. Out of two Indicators with 'either vaccination card or mother's recall' & vaccination card only - 'vaccination card only 'indicator was used to reduce the recall bias, among children whose vaccination card only - vaccination card only 'indicator was used to reduce the recall bias, among children whose vaccination card only - vaccination card only 'indicator was used to reduce the recall bias, among children whose vaccination card was shown to the interviewer, percentage vaccinated with BCG, measles-containing vaccine (MCV)/MR/MMR/Measles, and 3 doses each of polio (excluding polio vaccine given at birth) and DPT or penta vaccine \*\* Based on the youngest child living with the mother

# Breastfed children receiving 4 or more food groups and a minimum meal frequency, non-breastfed children fed with a minimum of 3 Infant and Young Child Feeding Practices (fed with or milk products at least twice a day, a minimum meal frequency that is receiving solid food at least twice a day for breastfed children fed with a minimum of 3 Infant and Young Child Feeding Practices (fed with or milk products at least twice a day, a minimum meal frequency, that is receiving solid food at least twice a day for breastfed infants 6-8 months and at least three times a day for breastfed children 9-23 months, and solid or semi-solid foods from at least four food groups not including the milk products food group)

^ Below -2 standard deviations, based on the WHO standard. 13 Below -3 standard deviations, based on the WHO standard

Green Color – Best five performing districts within the districts for a particular indicator Ř æ

Red – Worst five performing districts within the districts for a particular indicator

\* Full antenatal care is at least four antenatal visits, at least one tetanus toxoid (TT) injection and iron folic acid tablets or syrup taken for 100 or more days ċ

\*\* Based on the youngest child living with the mother Ō.

# Breastfed children receiving 4 or more food groups and a minimum meal frequency, non-breastfed children fed with a minimum of 3 Infant and Young Child Feeding Practices (fed with other milk or milk products at least twice a day a minimum meal frequency that is receiving solid or semi-solid food at least twice a day for breastfed infants 6-8 months and at least three times a day for breastfed children 9-23 months, and solid or semi-solid food at least twice a day for breastfed infants 6-8 months and at least three times a day for breastfed children 9-23 months, and solid or semi-solid foods from at least four food groups not including the milk or milk products food group) ய்

A Below -2 standard deviations, based on the WHO standard. 13 Below -3 standard deviations, based on the WHO standard

ш.

# **NOTES**


# **LIST OF CONTRIBUTORS**

Maj Gen (Prof) Dr. Atul Kotwal, Executive Director, NHSRC

#### **KNOWLEDGE MANAGEMENT DIVISION, NHSRC**

- Dr. Neha Dumka, Lead Consultant
- Dr. Deepak Bhagat, Consultant
- Dr. Erin Hannah, Fellow
- Dr. Vineeta Sharma, Consultant
- Dr. Padam Khanna, Senior Consultant
- Mr. Arun Srivastava, Senior Consultant
- Dr. Rajnesh Kumar, Consultant
- Dr. Vineet Kumar Pathak, Senior Consultant
- Dr. Devaki, Senior Consultant
- Dr. Tarannum Ahmed, Consultant
- Dr. Roopani, Consultant
- Dr. Diksha Dhupar, Consultant



NATIONAL HEALTH SYSTEMS RESOURCE CENTRE