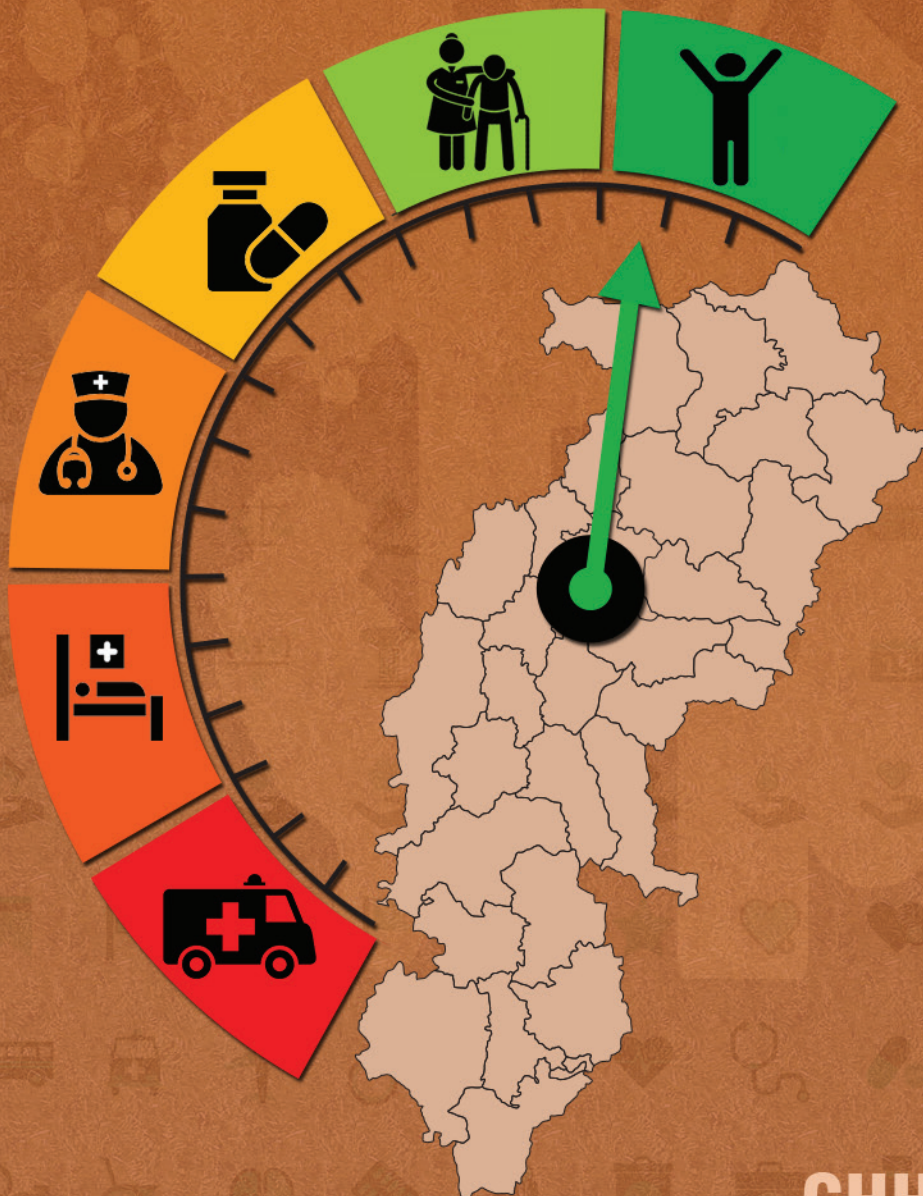


HEALTH DOSSIER 2021

Reflections on Key Health Indicators



CHHATTISGARH

DISTRICTS VISITED IN COMMON REVIEW MISSIONS

CRM	Districts Visited	
1 st	Kanker, Durg & Rajnandgaon	
2 nd	Bilaspur, Dhamtari & Raipur	
3 rd	Raigarh	Bastar
4 th	Raipur	Surguja
5 th	Kanker	(Kawardha) Kabirdham
6 th	Dantewada	Mahasamund
8 th	Jashpur	Korba
9 th	Balrampur	Rajnandgaon
11 th	Dhamtari	Bijapur
12 th	Raipur	Korba
13 th	Rajnandgaon	Korba

CHHATTISGARH

1. BACKGROUND

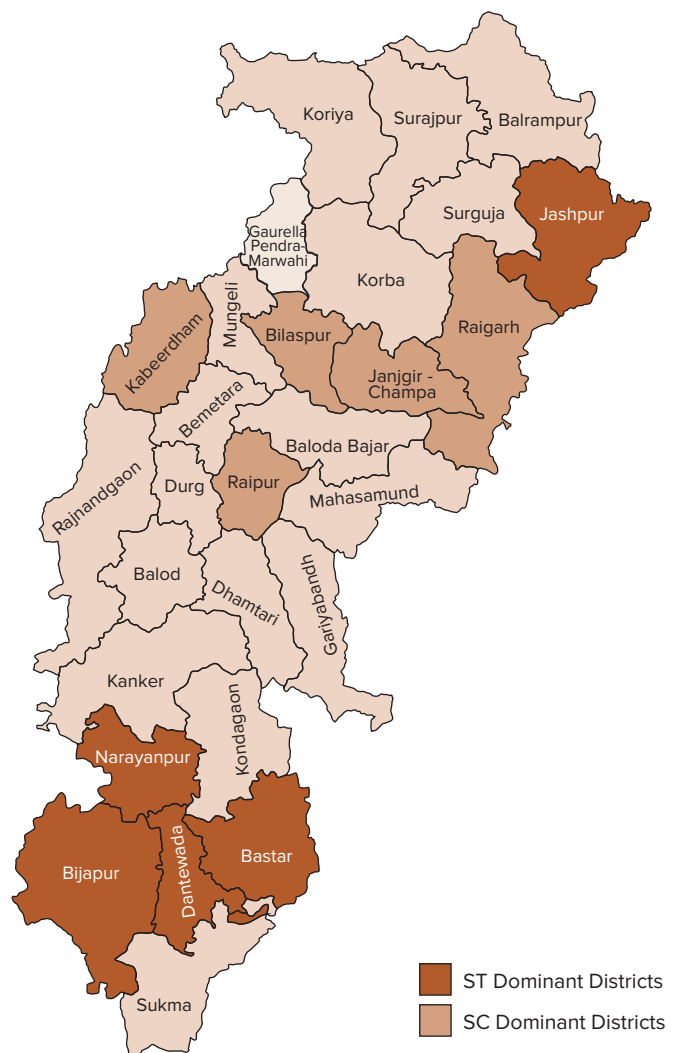
1.1 State Profile

Chhattisgarh is the 10th largest state in India for a geographical spread of 1,35,192 km² with an estimated population of 2.55 crore^a (RHS 2019). The State is divided into 27 districts, with a projected population increase to 2.94 crores by 2021 (Census Population Projection 2011 Report). As per census 2011, the Scheduled Caste (SC) and Scheduled Tribe (ST) population is 0.32 crores (12.82%) and 0.78 crores (30.62%), respectively. Out of the 27 districts, top five ST & SC dominant districts account for 27.93% of ST & 61.69% of SC population in the State (Annexure 1.1; Figure 1). As per Census 2011, 76.76% reside in rural areas, while the rest constitute the urban population.

The total length of roads^b in the State is 97,845 km (1.95%^c), in which the national highways constitute 3,232 km (2.8%^d) and state highways constitute 4,438 km (2.53%^e). Agriculture and allied activities account for nearly 80 per cent of the work force in the State^f.

A detail report on the key indicators has been attached as Annexure 1

Figure 1: Top 5 ST & SC Dominant Districts



^a Census 2011

^b Basic Road Statistics 2019, MoRTH

^c Percentage of total length of roads in State

^d Percentage of total length of National Highways in the country

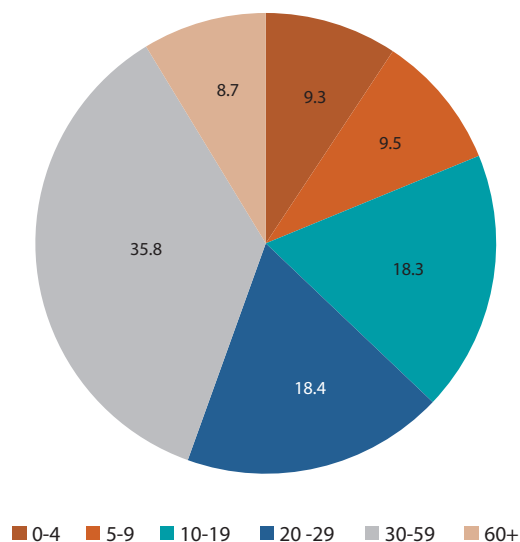
^e Percentage of total length of State Highways in the country

^f <https://knowindia.gov.in/states-uts/chhattisgarh.php>

1.2 Demography

In Chhattisgarh, out of the 27 districts, 2 districts have a population of over 30 lakhs, 2 districts have a population of 20-30 lakhs, 6 districts have a population between 10-20 lakhs and 8 districts have a population less than 10 lakhs (Annexure 1.1, State Profile). The State's sex ratio at birth of 958 females for every 1000 males is higher than the national average of 899 females for every 1000 males (Annexure 1.2). Around 18.3% of the total population is in 10-19 years' age group, 54.2% between 20 to 59 years; and 8.7% above 60 years of age (Figure 2). The crude birth and death rates have declined from 27.2 and 8.1 in 2005 to 22.2 and 7.3 in 2019 respectively (Annexure 2, Figure 2). The literacy rate increased from 64.7% in 2001 to 70.28% in 2011, with male and female literacy rates being 80.3% and 60.24%, respectively (Annexure 1). As per ESAG 2018 report, the Gross Enrollment Rate (GER)⁹ is 15.1% for higher education, 54% for senior secondary education, 91.93% for secondary education, 100.87% for elementary education, and 100.02% for primary education.

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



1.3 Elderly

Population ageing has profound social, economic, and political implications. Elderly people over 60 years constitute 8.7% of the State's total population. The life expectancy at 60 years of age is 14.4 years for males, and 16.3 years for females (2014-2018). The old age dependency ratio is 13.1 in 2011; 12 for males, 14.2 for females; 13.9 in rural and 10.5 in urban areas. As per Elderly in India 2016 report, the illness (any deviation from the state of physical and mental well-being) perception among the elderly men and women is 18% & 16% respectively, which is lower than the national average of 31% for both.

2. HEALTH STATUS AT A GLANCE

2.1 Maternal Health

The State has been able to provide RMNCHA+N^h services with major focus on primary and secondary care services under NHM. Indicators for Antenatal care (ANC)ⁱ, institutional deliveries, C sections, distribution of IFA^j tablets, follow up of high-risk pregnancies, provision of postnatal and newborn care, have shown substantial improvement since 2005 (NFHS 4 & 5 report). The maternal mortality

⁹ 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

^h Reproductive, Maternal, Newborn, Child, Adolescent Health & Nutrition

ⁱ Antenatal Check up

^j Iron Folic Acid Tablets

ratio has significantly declined from 269^k (SRS MMR Bulletin 2007-09) to 159 (SRS MMR Bulletin 2018) per 1,00,000 live births. In Chhattisgarh, 93.8% of women received 4 ANC check-ups (Annexure 1.4). As per NFHS 5 report, Baloda Bazar, Bilaspur, Jashpur, Korba and Surjpur districts reported poor ANC coverage ranging from 46.9% to 49.5%. As reported in HMIS 2019-20, around 98.3% of the deliveries took place in institutions, out of which 76.4% took place in public health facilities. Total percentage of C-sections (15.3%) is slightly above the recommended range by the WHO (10-15%); out of which 45.5% are conducted at private facilities in the State. It is reported that around 61.6% women are given their first postpartum checkup between 48 hours and 14 days (Annexure 1.4). Prevalence of Anaemia in women aged 15-49 years has increased from 47% (NFHS 4) to 60.8% (NFHS 5). Anaemia in females of reproductive age group is more than twice than in men of similar age group (Annexure 2, Figure 5).

Refer Annexure 3 for detailed district wise comparison of NFHS 5 key indicators.

2.2 Newborn, Infant & Child Health

Ever since the inception of NHM in 2005, the State has shown a significant decline in IMR from 63 (2005) to 40 (2019); yet is higher than the national average of 30 (Annexure 2, Figure 1 & Annexure 1.2). Though NNMR^l and Still Birth (per 1,000 live births) Rates have significantly declined from 33.7 and 11.9 (2005) to 29 and 9 (2018), respectively, an increasing trend from 2015 is reported (Annexure 2, Figure 4). In general, improvement in the indicators can be attributed to several interventions at the State level, including infrastructure strengthening under NHM, such as establishment of SNCUs, NBSUs and NBCCs^m. The life expectancy at birth has also improved from 62.4 (2006-10) to 65.2 (2014-18) (Annexure 2, Figure 3). As per NFHS 5 report, Durg, Janjgir-Champa, Kabeertham, Koriya and Rajgarh districts reported low SRBsⁿ ranging from 795 to 864; whereas Dantewada, Dhamtari, Kodagaon, Surguja and Uttar Bastar Kanker districts reported high SRB ranging from 1111 to 1296.

Full immunization coverage for children between 12 – 23 months has improved from 81.8% (NFHS 4) to 84.8% (NFHS 5). Though the burden of malnutrition declined over time^o, a wide intra-state variation in the nutritional status exists. The proportion of under 6-months children exclusively breastfed improved from 77.2% (NFHS 4) to 80.3% (NFHS 5). Prevalence of childhood anaemia, however, increased from 41.3% to 67.2% (Annexure 2, Figure 5). As per NFHS 5, Bilaspur, Gariyaband, Rajnandgaon, Surajpur and Uttar Bastar Kanker districts reported comparatively low burden of stunting, ranging from 24.8% to 28.9%; whereas Bastar, Bijapur, Dantewada, Narayanpur and Sukma districts reported high burden of stunting, ranging from 41.8% to 53.8%. For under-5 wasting, Balod, Kabeertham, Korba, Mahasamund and Rajgarh districts reported relatively low burden, ranging from 12% to 15.1%; whereas Balrampur, Bilaspur, Janjgir-Champa, Kodagaon and Uttar Bastar Kanker districts reported high burden ranging from 23% to 24.6%.

^k MMR of Madhya Pradesh/Chhattisgarh as per SRS 2007-09

^l Neonatal Mortality Rate

^m QPR NHM MIS Report (Status as on 01.03.2022)

ⁿ Sex Ratio at Birth

^o Disease Burden Trends in the States of India 1990 to 2016

2.3 Family Planning

The TFR^p has reduced from 3.4 in 2005 to 2.4 in 2018, which is higher than the national average of 2.2 (Annexure 2 Figure 4). The total unmet need in the State is reported as 8.3%, while unmet need for spacing is 3.4% (NFHS 5). Balrampur reported highest unmet need (16%), while Balod reported the lowest (2.6%). Around 61.7% of married women reported to avail any modern method of family planning in the State (NFHS 5), with sterilization acceptance being 47.5% among females and 0.8% among males.

2.4 Communicable Diseases

The State has 27 functional IDSP units in place^q. The proportion of Communicable, Maternal, Neonatal, and Nutritional Diseases [CMNND] contribute to 34.78% of total disease burden (GBD 2019) while diarrheal diseases, lower respiratory tract infection, & drug-susceptible TB being the major causes of DALY in the State (Annexure 2, Figure 6)^r. As per QPR report, for TB, the annualized total case notification rate is 136% and NSP^s success rate is 82% as opposed to the national averages of 163% and 79%, respectively. For NLEP^t, the reported prevalence rate of 2.08 per 10,000 population is higher than the national average of 0.61. In FY 2019-20, deaths from vector borne diseases include 31 from malaria, 5 from JE^u, while none from Dengue & Kala azar.

2.5 Non-Communicable Diseases (NCDs) and Injuries

It is reported that premature deaths account for 70.1% of the total disease burden, while disability or morbidity account for 29.9%. Ischaemic heart disease, COPD & Diabetes Mellitus Type 2 remain the major causes for DALYs (Annexure 2, Figure 6). NCDs contribute 53.82% of total DALYs, while injuries contribute to 11.4% of total DALYs. The State ranks 14th in the country for the total number of fatal road accidents (Annexure 1.4). It is reported that 17.3% of women and 43.1% of men used any kind of tobacco, while 5% of women and 34.8% of men consumed alcohol. In general, low birth weight, short gestation period, high systolic blood pressure, high fasting plasma glucose, household air pollution from solid fuels, & ambient particulate matter pollution are the major risk factors for all DALYs (Annexure 2, Figure 7).

2.6 Health Care Financing

The State's Net State Domestic Product (NSDP) for FY 2018-19 is ₹ 2,66,537 crores. The State is positioned 24th out of 32 States in terms of per capita expenditure of ₹ 92,413^v. According to NHA (2017-18), the per capita Government Health Expenditure in the State is estimated as ₹ 1,516, which is less than the national average of ₹ 1,753. On the other hand, the OOPE^w as a share of Total Health Expenditure is estimated as 38.8%, which is less than the national average of 48.8%. As per NSSO 2017-18, the OOPE for IPD care per hospitalized case in rural areas is estimated as ₹ 61,900 in private hospitals and ₹ 4,314 in public hospitals, while the same in urban areas is around ₹ 28,435 in private hospitals and ₹ 4,155 in

^p Total Fertility Rate

^q QPR NHM MIS Report

^r <https://vizhub.healthdata.org/gbd-compare/india>

^s New Smear Positive

^t National Leprosy Eradication Programme

^u Japanese Encephalitis

^v Directorate of Economics and Statistics of State Government

^w Out of Pocket Expenditure

public hospitals. For childbirth, OOPE in public facilities is estimated to be around ₹ 1,497 in rural areas & ₹ 2,414 in urban areas, whereas in private health facilities, it is ₹ 18,308 in rural areas and ₹ 21,936 in urban areas. In public health facilities, the share of expenditure on drugs is estimated as 37% and 41% for inpatient care; and 8% and 11% for diagnostics in rural and urban areas respectively (Annexure 1.6, Healthcare Financing).

2.7 Health Infrastructure

As per the RHS data, the number of SCs, PHCs and CHCs have been increasing since 2005 (Annexure 2, Figure 8). Though public health facilities have increased over time, 3.09% shortfall in SCs, 6.93% shortfall in PHCs and 19.81% shortfall in CHCs still remain in Chhattisgarh (Annexure 2, Figure 9). Currently, there are 5,205 SCs, 792 PHCs & 170 CHCs in place, against the required 5,371 SCs, 851 PHCs and 212 CHCs. Similarly, in urban settings, there are 45 PHCs in place against the required 154, accounting to a shortfall of 70.78%. The State has 26 DHs, 20 SDHs and 7 Government medical colleges. In the State, 23 DHs, 3 SDH & 31 CHCs serve as functional FRUs. In tribal catchments, there are 2,817 SCs (6.34% excess), 399 PHCs (0.5% excess) and 89 CHCs in place against the required 2,649 SCs, 397 PHCs and 202 CHCs.

Under the recently introduced Ayushman Bharat – Health and Wellness Centres (AB-HWCs), a total of 3248 HWCs (2556 SHCs, 645 PHCs & 47 UPHCs) are operationalized in the State as of 22nd December 2021^x.

In Chhattisgarh, 16 districts are equipped with MMUs under NHRM, while none under the NUHM. The State has 97% of ASHAs in position under both NRHM & NUHM. In the State, doctors to staff nurse ratio is 1:2, with 5 public healthcare 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, 899 availed (events) OPD services and 56 availed (events) IPD services. However, as per the NSSO data (2017-18), 48% of all OPD cases in rural and 25% of all OPD cases in urban; 60% of all IPD cases in rural and 38% of all IPD cases in urban utilized public health facilities. Public health facilities utilization in the State is higher than the national average (Annexure 1.6).

^x AB-HWC Portal

ANNEXURE 1: KEY INDICATORS

1.1 State Profile^y

Indicator	Chhattisgarh 2011 ¹	India
Total Population (In Crore)	2.55	121.08
Rural (%)	76.76	68.85
Urban (%)	23.24	31.14
Scheduled Caste population (SC) (in crore)	0.32 (12.82%)	20.14 (16.63%)
Scheduled Tribe population (ST) (in crore)	0.78 (30.62%)	10.45 (8.63%)
Total Literacy Rate (%)	70.28	72.99
Male Literacy Rate (%)	80.27	80.89
Female Literacy Rate (%)	60.24	64.64
Number of Districts in the Chhattisgarh ²	27	
Number of districts per lakh population in Chhattisgarh (Census 2011)	Population ¹	Districts ¹ (Numbers)
	<10 Lakhs	8
	≥ 10 Lakhs - <20 Lakhs	6
	≥20 Lakhs - <30 lakhs	2
	≥30 Lakhs	2
ST SC Dominant (Top 5) Districts of Chhattisgarh ¹		
ST Dominant Districts (%)	SC Dominant Districts (%)	
Bijapur - 80.01%	Janjgir Champa - 24.56%	
Narayanpur - 77.35%	Bilaspur - 20.76%	
Dakshin Bastar Dantewada - 76.87%	Raipur - 17.82%	
Bastar - 65.93%	Raigarh - 15.05%	
Jashpur - 62.27%	Kabirdham - 14.56%	
Top 5 ST dominant district accounts for - 27.93%	Top 5 SC dominant district accounts for - 61.69%	

1.2 Key Health Status & Impact Indicators

Indicators	Chhattisgarh	India
Infant Mortality Rate (IMR) ³	40	30
Crude Death Rate (CDR) ³	7.3	6

^y Sources are mentioned at the end of Annexure 1

Crude Birth Rate (CBR) ³	22.2	19.7
Maternal Mortality Ratio (MMR) ³	159	113
Neo Natal Mortality Rate (NNMR) ⁴	29	23
Under Five Mortality Rate (U5MR) ⁴	45	36
Still Birth Rate ⁴	9	4
Total Fertility Rate (TFR) ⁴	2.4	2.2
Life expectancy at birth ⁵	65.2	69.4
Sex Ratio at Birth ⁴	958	899

1.3 Key Health Infrastructure Indicators²

Indicators	Numbers (Total)			
Number of District Hospitals ²	26			
Number of Sub District Hospital ²	20			
Number of Government (Central + State) Medical College ⁶	7			
Number of Private (Society + Trust) Medical Colleges ⁶	3			
Number of AB-HWCs functional as of 22 nd December 2021 ¹⁶	Status (Total)	Target FY (2020-21)	Target FY (2021-22)	Target FY (2022-23)
SHC-HWC	2556	1627	3043	3987
PHC-HWC	645	793	793	793
UPHC-HWC	47	45	45	45
Total-HWC	3248	2465	3881	4825
Rural ²	Required (R)	In place (P)	Shortfall (S) (%)	
Number of Community Health Centres (CHC)	212	170	19.81	
Number of Primary Health Centres (PHC)	851	792	6.93	
Number of Sub Centres (SC)	5,371	5,205	3.09	
Number of functional First Referral Units (FRUs)	DH	SDH	CHC	
	23	3	31	
Urban ²	Required (R)	In place (P)	Shortfall (S) (%)	
Number of PHC	154	45	70.78	
Tribal ²	Required (R)	In place (P)	Shortfall (S)%	
Number of CHC	99	89	10.10	
Number of PHC	397	399	-0.50	
Number of SC	2,649	2,817	-6.34	

² Sources are mentioned at the end of Annexure 1

Patient Service⁹	Chhattisgarh	India
IPD per 1000 population	56.3	62.6
OPD per 1000 population	899.4	1337.1
Operation (surgeries) major (General and Spinal Anaesthesia) per 10000 population	12.0	36.4

1.4 Major Health Indicator^{aa}

% Share of DALYs to Total Disease Burden (GBD 2019)⁷	Chhattisgarh	India
% DALY ^{bb} accountable for CMNNDs ^{cc}	34.78	27.46
% DALY accountable for NCDs	53.82	61.43
% DALY accountable for Injuries	11.4	11.11
Birth, Death Registration & Medical Certification of Cause of Death (MCCD) Indicator⁸	Chhattisgarh	India
Level of Birth Registration (%)	85.9	92.7
Level of Death Registration (%)	81.5	92
Percentage of medically certified deaths to total registered deaths (%)	21.4	20.7
RMNCHA+N		
Maternal Health⁹	Chhattisgarh	India
% 1st Trimester registration to Total ANC Registrations	90.1	71.9
% Pregnant Woman received 4 ANC check-ups to Total ANC Registrations	93.8	79.4
Total Reported Deliveries	485292	21410780
% Institutional deliveries to Total Reported Deliveries	98.3	94.5
% Deliveries conducted at Public Institutions to Total Institutional Deliveries	76.4	67.9
% Deliveries conducted at Private Institutions to Total Institutional Deliveries	23.6	32.1
% C-section deliveries (Public + Pvt.) to reported institutional (Public + Pvt.) deliveries	15.3	20.5
% C-sections conducted at public facilities to Deliveries conducted at public facilities	5.9	14.1
% C-sections conducted at Private facilities to Deliveries conducted at private facilities	45.5	34.2
% Women getting 1st Post-Partum Checkup between 48 hours and 14 days to Total Reported Deliveries	61.6	53.4
Neonatal⁹	Chhattisgarh	India
% live birth to Reported Birth	98	98.8
% Newborns having weight less than 2.5 kg to Newborns weighed at birth	11.4	12.4
% Newborns breast fed within 1 hour of birth to Total live birth	97.5	89.9

^{aa} Sources are mentioned at the end of Annexure 1

^{bb} Disability Adjusted Life Years

^{cc} Communicable, Maternal, Neonatal, and Nutritional Diseases

New Born Care Units Established¹¹	Chhattisgarh	India
Sick New Born Care Unit (SNCU)	23	895
New Born Stabilization Unit (NBSU)	157	2418
New Born Care Corner (NBCC)	1249	20337
Child Health & Nutrition¹⁰	Chhattisgarh (NFHS 5)	India (NFHS 5)
Prevalence of diarrhoea (reported) in the last 2 weeks preceding the survey (%)	3.6	7.3
Children with diarrhoea in the last 2 weeks who received oral rehydration salts (ORS) (%)	67.3	60.6
Children under 5 years who are underweight (weight-for-age) (%)	31.3	32.1
Child Immunization¹⁰	Chhattisgarh (NFHS 5)	India (NFHS 5)
Children age 12-23 months fully vaccinated based on information from vaccination card only (%)	84.8	83.8
Children age 12-23 months who have received BCG (%)	96.4	95.2
Children age 12-23 months who have received first dose of measles containing vaccine (%)	90.2	87.9
Family Planning¹⁰	Chhattisgarh (NFHS 5)	India (NFHS 5)
Unmet need for spacing (%)	3.4	4
Communicable Diseases		
Integrated Disease Surveillance Programme (IDSP)¹¹	Chhattisgarh	India
Number of districts with functional IDSP unit	27	720
Revised National Tuberculosis Control Programme (RNTCP)¹¹	Chhattisgarh	India
Annualized total case notification rate (%)	136	163
New Smear Positive (NSP) Success rate (in %)	82	79
National Leprosy Eradication Programme (NLEP)¹¹	Chhattisgarh	India
Prevalence Rate/10,000 population	2.08	0.61
Number of new cases detected	8,905	114,359
Malaria, Kala Azar, Dengue¹¹	Chhattisgarh	India
Deaths due to Malaria ¹¹	31	79
Deaths due to Kala azar reported ¹¹	0	0
Deaths due to Dengue reported ¹¹	0	168
Number of Kala Azar Cases reported ¹¹	0	3,706
HIV¹⁰	Chhattisgarh (NFHS 5)	India (NFHS 5)
Women (age 15-49 years) who have comprehensive knowledge of Human Immunodeficiency Virus (HIV)/Acquired immunodeficiency syndrome (AIDS) (%) ¹⁰	23.1	21.6
Men (age 15-49 years) who have comprehensive knowledge of HIV/AIDS (%) ¹⁰	30.7	30.7

Non-Communicable Disease		
Diabetics and Hypertension¹⁰	Chhattisgarh (NFHS 5)	India (NFHS 5)
Women - Mildly elevated Blood Pressure (Systolic 140-159 mm of Hg and/or Diastolic 90-99 mm of Hg) (%)	14.8	12.4
Men - Mildly elevated Blood Pressure (Systolic 140-159 mm of Hg and/or Diastolic 90-99 mm of Hg) (%)	19	15.7
Women - Blood sugar level - high (141-160 mg/dl) (%)	4.5	6.1
Men - Blood sugar level - high (141-160 mg/dl) (%)	5.4	7.3
Tobacco Use and Alcohol Consumption among Adults (age 15 years & above)¹⁰	Chhattisgarh (NFHS 5)	India (NFHS 5)
Women who use any kind of tobacco (%)	17.3	8.9
Men who use any kind of tobacco (%)	43.1	38
Women who consume alcohol (%)	5	1.3
Men who consume alcohol (%)	34.8	18.8
Injuries		
Road Traffic Accident¹²	Chhattisgarh	India
Rank (Total number of fatal Road Accidents in State/UT wrt other States/UTs)	14	N/A
Total number of fatal Road Accidents	4,603	137,689
Severity (Road accident deaths per 100 accidents) of Road Accidents	36	33.7
Number of persons killed in Road Accidents	5003	115113

1.5 Access to Care^{dd}

Health Systems Strengthening		
Ambulances & Mobile Medical Units (MMU)¹¹	Chhattisgarh	India
Number of Districts equipped with MMU under NRHM	16	506
Number of Districts equipped with MMU/Health Units under NUHM	0	31
Number of ERS vehicles operational in the States/UTs Under NHM	Chhattisgarh	India
102 Type	324	9955
104 Type	1	605
108 Type	300	10993
Others	0	5129
Number of Ambulances functioning in the State/UTs other than NHM (At PHC/CHC/SDH/DH)	400	11070

^{dd} Sources are mentioned at the end of Annexure 1

Key Domain Indicators		
ASHA¹³	Chhattisgarh	India
Total number of ASHA targeted under NRHM	68277	946563
Total number of ASHA in position under NRHM	66220	904211
% of ASHA in position under NRHM	97	96
Total number of ASHA targeted under NUHM	3883	75597
Total number of ASHA in position under NUHM	3771	64272
% of ASHA in position under NUHM	97	85
Community Process¹¹	Chhattisgarh	India
Number of Village Health Sanitation and Nutrition Committees (VHSNCs) constituted	19180	554847
Number of Mahila Arogya Samitis (MAS) formed	3245	81134
Number of Rogi Kalyan Samitis (RKS) registered (Total)¹¹	Chhattisgarh	India
DH	26	796
CHC	154	6036
PHC	774	20273
UCHC	3	126
UPHC	45	3229
Human Resource for Health ¹⁴		
HRH Governance	Chhattisgarh	
Specialist Cadre Available in the state (Y/N)	No	
HR Policy available (Y/N)	Yes	
Implementation of HRIS (Y/N)	Yes	
HR Integration initiated (Y/N)	Yes	
Public Health Cadre available (Y/N)	No	
Overall Vacancies (Regular + contractual)	Specialists (%)	55
	Dentists (%)	40
	MO MBBS (%)	37
	Nurse (%)	41
	LT (%)	24
	ANM (%)	10
HRH Distribution	Sanctioned	In Place
Doctors (MO & specialists) to staff nurse ¹⁴	1:1	1:2
Availability of public healthcare providers (MO, specialists, staff nurse & ANM) in district healthcare system ¹⁴	6 per 10,000	5 per 10,000
Regular to contractual service delivery staff ratio ¹⁴	5:1	5:1

Ranking: Human Resource Index of Chhattisgarh¹⁵

Category	Total (Regular + NHM)					Ranking: HR Gap Index
	Required (R)	Sanctioned (S)	In-Place (P)	Vacancy (V)	Actual Gap# (R-P)	
MPW ^{ee}	12048	13910	11258	2652	790	58.8
Staff Nurse	10387	7917	4885	3032	5502	
Lab Technician	2554	1649	1322	327	1232	
Pharmacists	1461	1329	1051	278	410	
MO MBBS ^{ff}	2588	2473	1975	498	613	
Specialist ^{gg}	2064	1807	404	1403	1660	

1.6 Healthcare Financing^{hh}

National Health Accounts (NHA) (2017-18)	Chhattisgarh		India	
Per Capita Government Health Expenditure (in ₹)	1516		1753	
Government Health expenditure as % of Gross Domestic Product (GSDP)	1.5		1.35	
Government Health Expenditure as % of General Government Expenditure (GGE)	6.4		5.12	
OOPE as a Share of Total Health Expenditure (THE) %	38.8		48.8	
National Sample Survey Office (NSSO) (2017-2018)	Chhattisgarh		India	
	Rural	Urban	Rural	Urban
OPD - % of non-hospitalized cases using public facility	48	25	33	26
IPD - % of hospitalized cases using public facility	60	38	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	267	332	472	486
OPD - Per non-hospitalized ailing person (in INR) in last 15 days - Private	553	784	845	915
IPD - Per hospitalized case (in INR) - Public	4,314	4,155	5,729	5,939
IPD - Per hospitalized case (in INR) - Private	61,900	28,435	28,816	34,122
IPD - % of diagnostics expenditure as a proportion of inpatient medical expenditure in Public (NSSO)	8	11	18	17
IPD - % of drugs expenditure as a proportion of inpatient medical expenditure – Public (NSSO)	37	41	53	43

^{ee} MPW – Multi Purpose Health Worker (Female + Male)

^{ff} MO MBBS (Full Time)

^{gg} Specialist (All Specialist)

^{hh} Sources are mentioned at the end of Annexure 1

* 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)	1,497	2,414	2,402	3,091
Childbirth - Average out of pocket expenditure per delivery in private health facility (₹)	18,308	21,936	20,692	26,701
State Health Expenditure	Chhattisgarh		All India Average	
State Health Department expenditure as a share of total expenditure (%) (2017-18)**	5.9		5 ⁱⁱ	

Sources used for Annexure 1

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

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

** RBI, State Finances: Study of Budgets 2019-20

ANNEXURE 2

Figure 1: IMR Trend

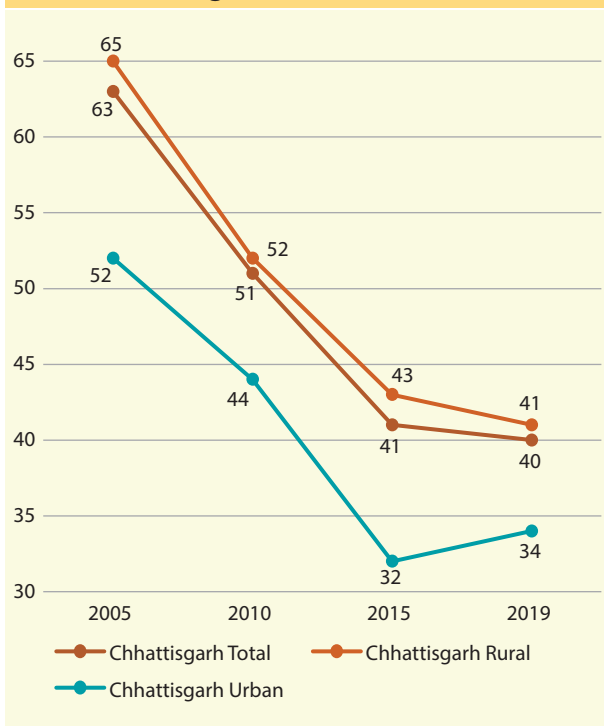


Figure 2: CBR & CDR Trend

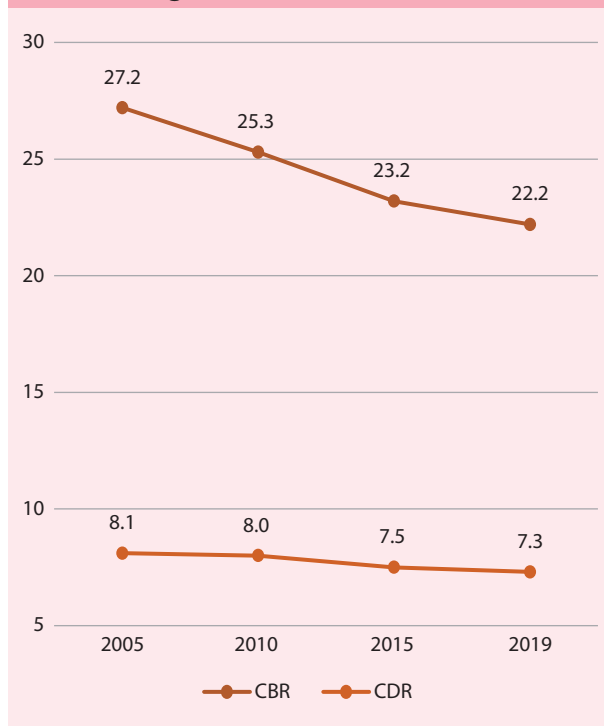


Figure 3: Life Expectancy At Birth Trend

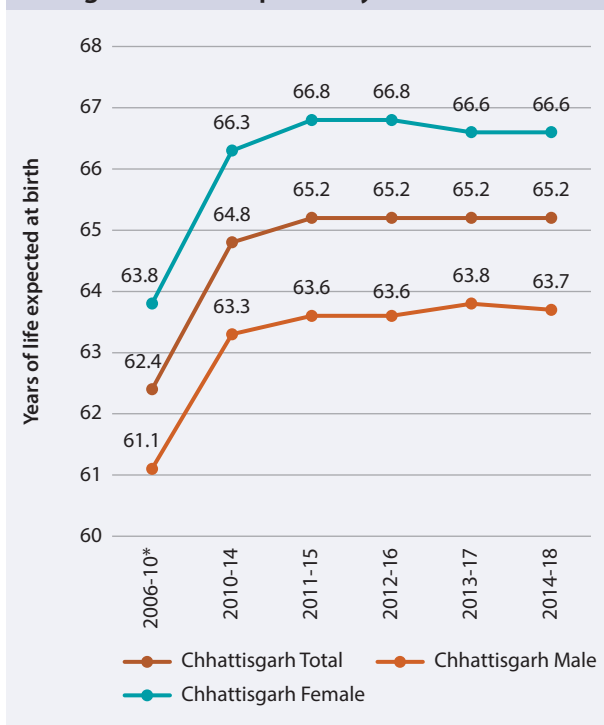
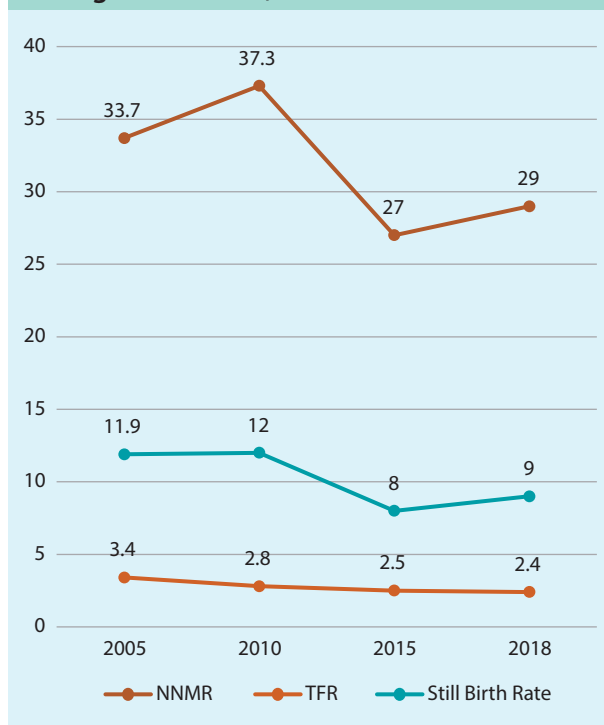


Figure 4: NNMR, TFR & Still Birth Trend



* Including Madhya Pradesh

Figure 5: Comparison of Key NFHS 5 & 4 Indicators

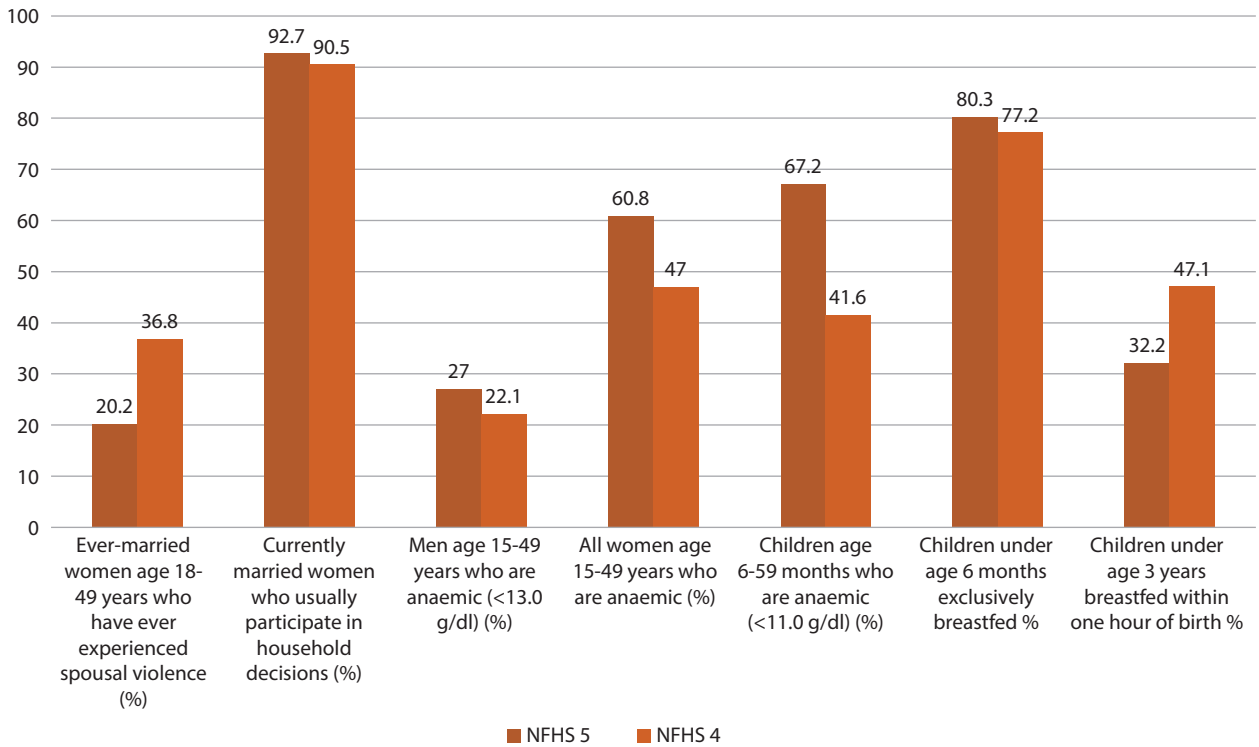


Figure 6: Top 15 causes of DALYs, 1990-2019

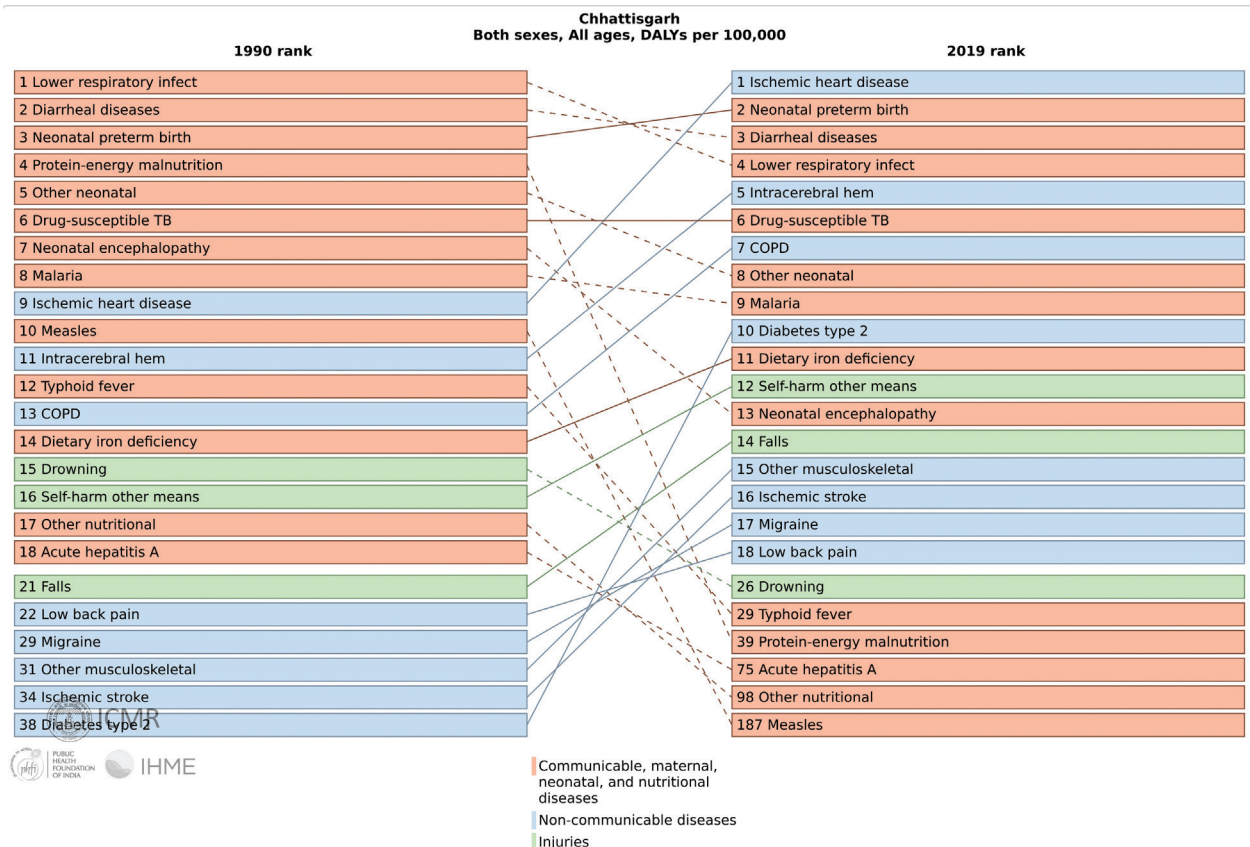


Figure 7: Top 15 risk of DALYs, 1990-2019

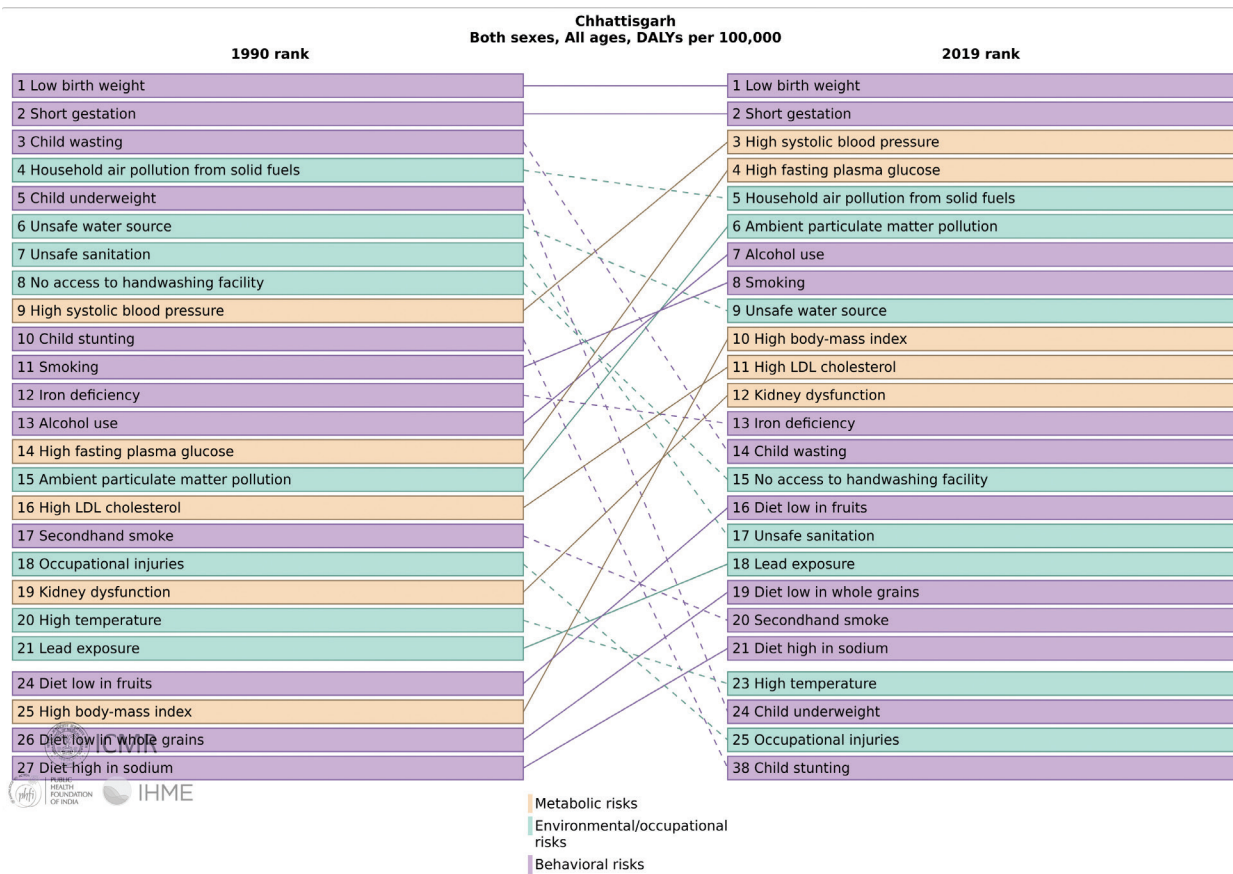


Figure 8: Year Wise Required/In Position Health Infrastructure Status in Rural Area (In numbers)

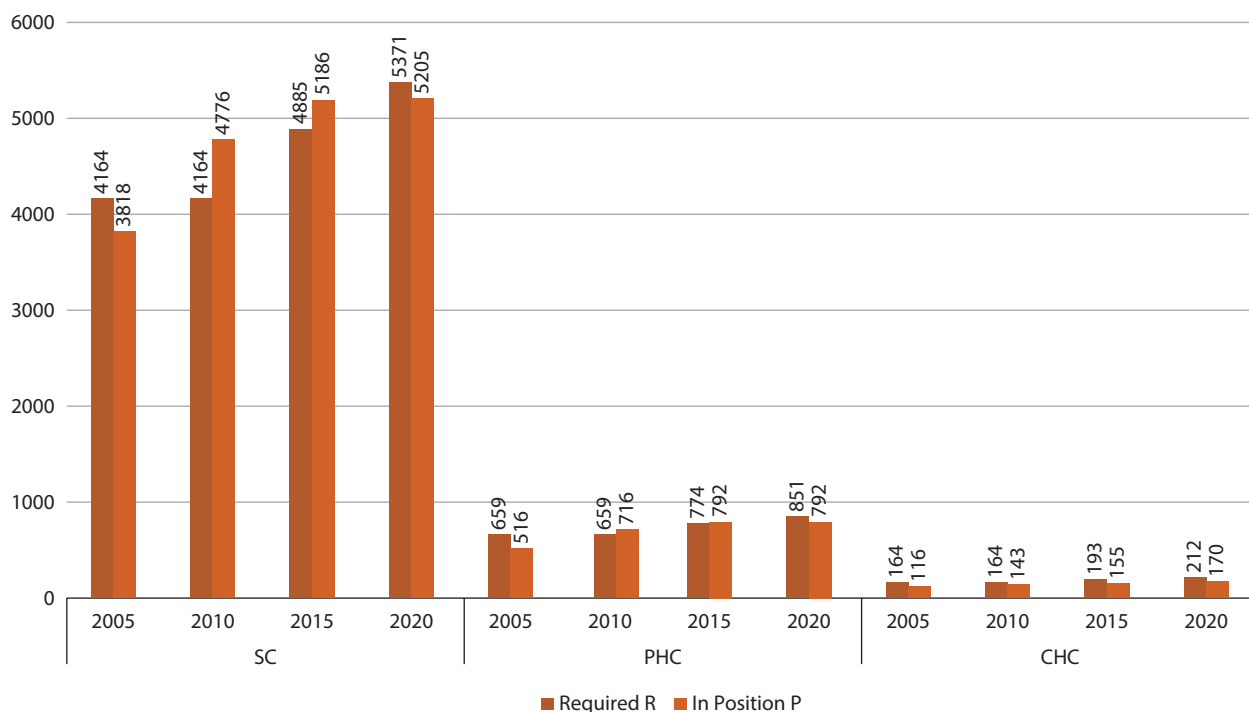


Figure 9: Year Wise Health Infrastructure Shortfall (%)

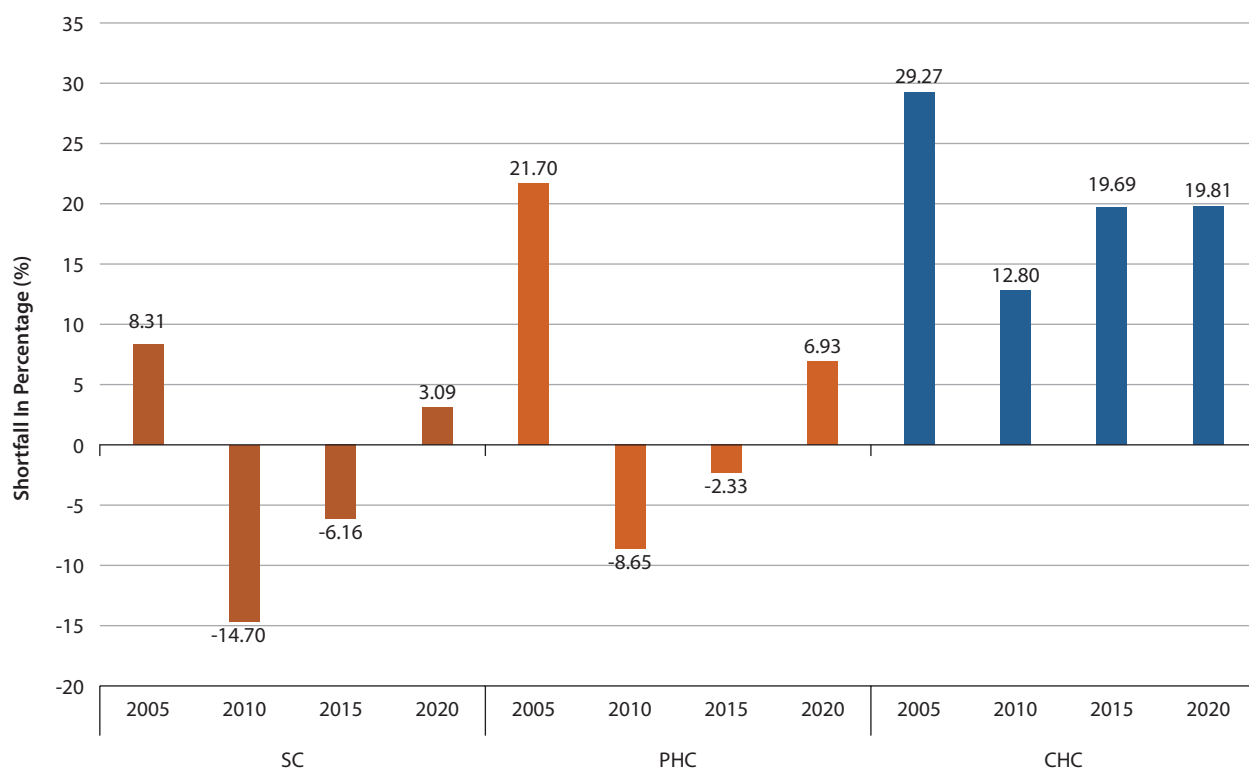
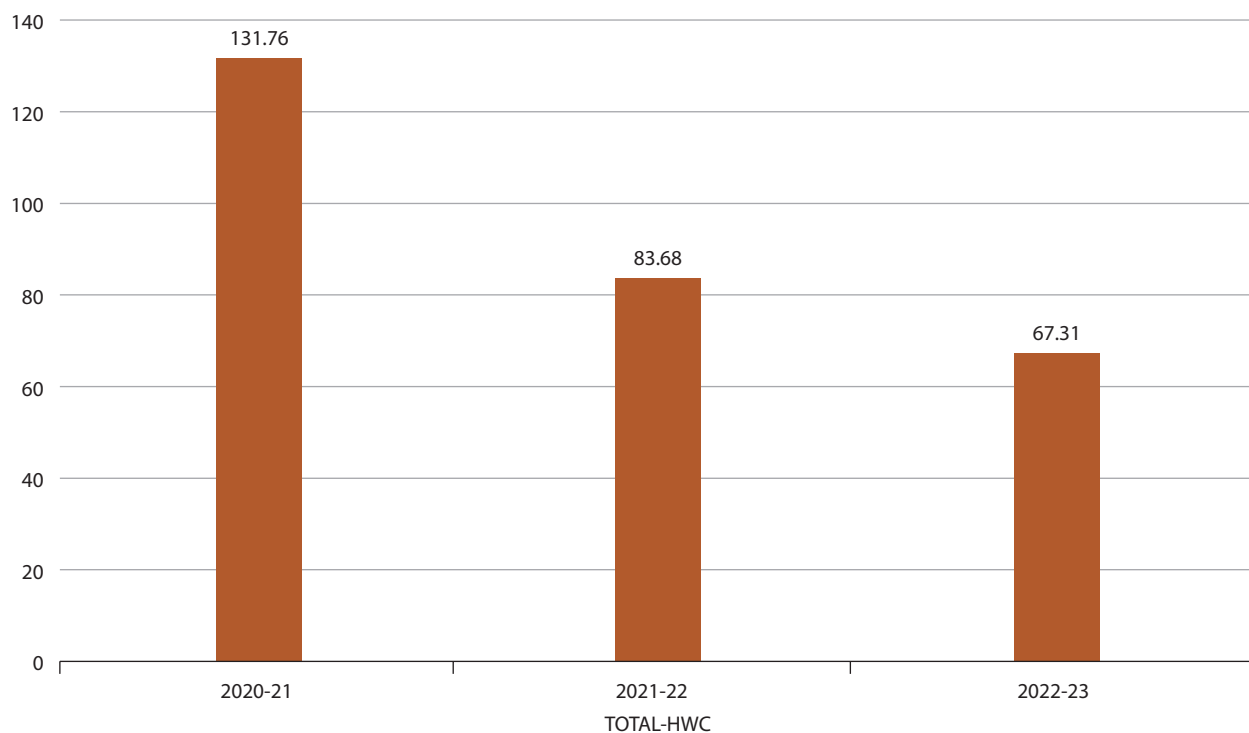


Figure 10: Percentage HWCs progress against target - FY wise (%)



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

S. No.	States/Districts	Data Source	(Green – Good Performance, Red – Poor Performance) (District Wise Rural/Urban Stats Not Available)																
			Sex Ratio At Birth (Females/1000 Males)	Households with any usual member covered under a health insurance/financing scheme (%)	Women Literate 15-49 Age (%)	Women Age 20-24 Years Married Before 18 (%)	Any Method Used For Family Planning By Currently Married Women Age 15-49 years (%)	IUD/PPIUD (%)	Condom Use (%)	Total Unmet Need (%)	Mother Who Had At Least 4 Antenatal Care Visits (%)	Institutional Births (%)	Children Age 12-23 Months Fully Vaccinated Based On Information From Vaccination Card Only* (%)	Total Children Age 6-23 Months Receiving Adequate Diet** # (%)	Children Under 5 Years - Stunted (Height For Age) (%)	Children Under 5 Years - Wasted (Weight For Height) (%)			
1	Chhattisgarh	NFHS 4 Total	977	68.5	NA	21.3	57.7	1.6	3.9	11.1	59.1	70.2	81.8	10.9	37.6	23.1			
2	Chhattisgarh	NFHS 5 Urban	933	68.8	83.4	8.1	71.3	3.7	7.9	8	62.2	93.1	81.8	9	30	18.9			
3	Chhattisgarh	NFHS 5 Rural	967	72.1	69.1	13.2	66.8	2.6	3	8.3	59.6	83.9	85.6	9.4	35.7	18.9			
4	Chhattisgarh	NFHS 5 Total	960	71.4	72.5	12.1	67.8	2.8	4.1	8.3	60.1	85.7	84.8	9.3	34.6	18.9			
5	Balod	NFHS 5 Total	1068	79.5	78.6	3.3	83.5	2.3	3.4	2.6	81.5	97.4	92.4	2.9	33.6	15.1			
6	Baloda Bazar	NFHS 5 Total	1021	66.1	73.4	11.4	71.5	4.7	3.9	5.3	49.5	78.1	84.7	11.5	40.9	19.4			
7	Bairampur	NFHS 5 Total	887	62.3	65.4	24.6	52	2.9	3.2	1.6	52.1	78.9	86.2	13.4	35.1	23			
8	Bastar	NFHS 5 Total	1042	69.3	52.9	17.3	54.2	2.2	4.9	12.1	55.1	63.5	61.1	10.6	48.1	20.4			
9	Bemetara	NFHS 5 Total	987	63.4	71.1	15.1	75.6	1.9	2.8	5	54.6	95	93.4	14.7	38.4	16.4			
10	Bijapur	NFHS 5 Total	1045	73.5	44.7	18.3	35.7	4.1	3.1	15.5	56.9	63.6	79	16.4	53.8	20			
11	Bilaspur	NFHS 5 Total	1070	60.4	72.8	11.2	58.5	3	5.5	10.4	46.9	79.4	69.5	15.2	25.7	24			
12	Dantewada	NFHS 5 Total	1296	82.2	49.3	16.3	58.8	6.8	6.3	7.1	68.2	90.5	73.7	19.6	45.6	19.4			
13	Dhamtari	NFHS 5 Total	1120	86.8	82.7	5.8	81.1	1.5	5.5	4.5	70.4	94.3	82.3	8.9	30.5	17.9			
14	Durg	NFHS 5 Total	812	67	80.3	4.3	80.6	3.8	6.5	4.9	69.9	96.7	87	8.3	38.9	16.9			
15	Gariyaband	NFHS 5 Total	1011	79.8	68.9	9.7	76.2	2.5	5.6	3.5	57.8	87.6	81.1	9.4	28.9	21.9			

16	Janjgir - Champa	NFHS 5 Total	795	74	74.9	10.2	74.8	2.1	7.8	6.3	62.8	86.2	86.8	4.8	32.5	24.6
17	Jashpur	NFHS 5 Total	951	80.6	73.1	21.9	56	6.6	2.4	12.9	48.6	85.6	94.1	5.8	35.8	17
18	Kabeerdham	NFHS 5 Total	826	72.1	66.2	15.3	75.2	2.8	1.7	6.2	58.9	91.7	96.9	6.8	37.9	12
19	Kodagaon	NFHS 5 Total	1111	80.6	54.7	11.8	68.2	1.9	4.8	3.7	64.1	78.7	64.4	9.3	37.6	22.8
20	Korba	NFHS 5 Total	989	60.6	73.2	7.2	53.6	1.4	5.7	13.4	49.3	75.4	89.3	4	34.7	14.7
21	Koriya	NFHS 5 Total	864	62.8	74.8	22.9	56.4	3.8	4.6	12.6	70	80.8	87	8	32.1	18.1
22	Mahasamund	NFHS 5 Total	1077	76.2	70.6	9.5	71.4	2.5	2.6	5.5	65.8	92.9	86.3	15.7	36.8	14
23	Mungeli	NFHS 5 Total	1017	68	66.5	20.5	64	0.8	1.9	11.4	67.3	69.8	85.7	3	30.1	17.7
24	Narayanpur	NFHS 5 Total	1102	83.1	52	11.1	57.7	3	4.3	9.2	59.1	74.2	82.7	14.8	43.7	21.5
25	Raigarh	NFHS 5 Total	812	66.3	74.9	11.5	64.1	1.9	2.8	10.3	55.4	87.7	91.9	4.5	39.1	14.9
26	Raipur	NFHS 5 Total	1000	76.9	79.6	8.8	76.8	3.4	5	6.1	65.6	90.7	75.4	7.9	32.2	21.7
27	Rajnandgaon	NFHS 5 Total	988	80.8	80.6	3.8	73.3	2.5	1.8	6.3	76.1	95.5	91	10.6	27.6	19.4
28	Sukma	NFHS 5 Total	925	78.1	39.8	18.9	53.7	6.6	8.2	7.6	74	81.2	76.8	20.9	41.8	21.2
29	Surajpur	NFHS 5 Total	916	75.7	66.9	34.3	59.8	2.8	2.6	14.1	48.9	85.9	85	11.4	27.6	19.3
30	Surguja	NFHS 5 Total	1139	65.1	71	18.1	55.2	2.2	2.4	15	57.7	85.3	89	9.9	29.4	17.5
31	Uttar Bastar Kanker	NFHS 5 Total	1131	84.8	77.2	5.4	74.7	2.5	0.9	3	77.9	94.1	97	8	24.8	24.5

* NFHS5 replaced 'immunized' (word) from NFHS4 to 'vaccinated'; Out of two indicators with 'either vaccination card or mother's recall' & '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)/MMR/Measles, and 3 doses each of polio (excluding polio vaccine given at birth) and DPT or pentavalent 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 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 foods from at least four food groups not including the milk or milk products food group)

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

A. Green Color - Best five performing districts within the districts for a particular indicator

B. Red - Worst five performing districts within the districts for a particular indicator

C. * 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

D. ** Based on the youngest child living with the mother

E. # 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 foods from at least four food groups not including the milk or milk products food group)

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

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