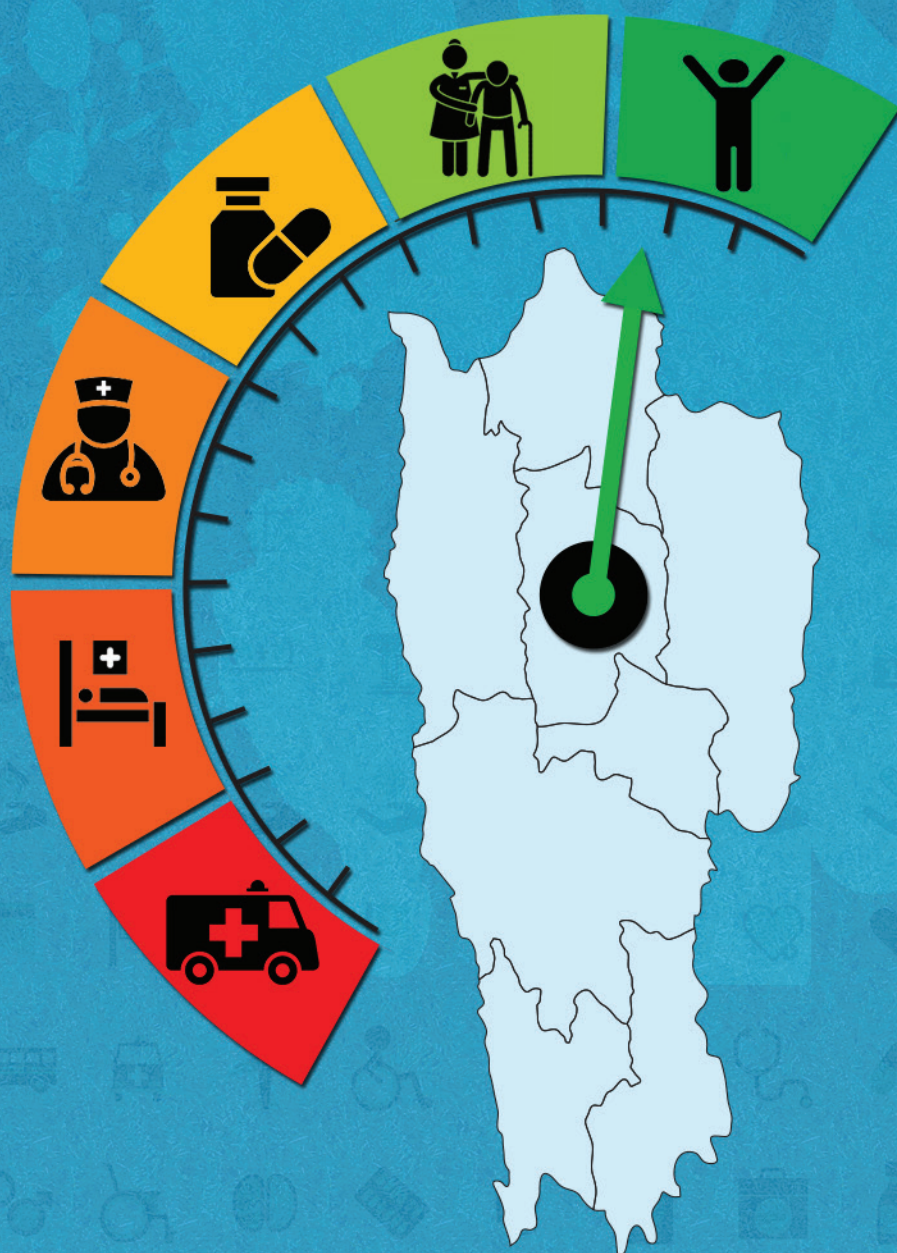


HEALTH DOSSIER 2021

Reflections on Key Health Indicators



MIZORAM

DISTRICTS VISITED IN COMMON REVIEW MISSIONS

CRM	Districts Visited	
2 nd	Kolasib	Serchhip
8 th	Aizwal	Lunglei
13 th	East Aizwal	Mamit
14 th	Mamit	Lawngtlai

MIZORAM

1. BACKGROUND

1.1 State Profile

Mizoram is the fifth largest^a North-Eastern State in India with a population of over 10.97 lakh. The state is divided into 9 districts as of 2021^b with an expected increase in population to 12.16 lakh by 2021^c. The literacy rate has increased from 88.8% in 2001 to 91.3% in 2011 with male & female literacy rates being 93.3% and 89.3% respectively. As per census 2011, the Scheduled Caste population is 0.012 lakh (0.11%) and the Scheduled Tribe (ST) population is 10 lakh (94.43%). Around 47.89% of the population reside in rural areas, while the rest constitute the urban population. Every district in the State has over 87% of its population constituted by the Scheduled Tribes (Figure 1 & Annexure 1, State Profile). Agriculture and allied sector are the major contributors to the State Gross Domestic Product. Around 65% of the workers in Mizoram are engaged as cultivators and agricultural laborers^d.

At present, two cities^e are covered under National Urban Health Mission with no metro & no million plus city in the state. The total length of roads^f in Mizoram is 11,012 km (0.22%^g), in which, the length of the national highways is 1382 km (1.2%^h) and state highways is 170 km (0.10%ⁱ).

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

^a Census 2011; RHS 2020; and among North-East States

^b RHS 2020

^c Census Population Projection Report 2019

^d Economic Survey 2019-20; <https://planning.mizoram.gov.in/uploads/attachments/4d6a424cb421f1fafef5c29cb0068b83/economic-survey-2019-20.pdf>

^e QPR NHM MIS Report as on 31 Dec 2020

^f Basic Road Statistics 2019, MoRTH

^g Percentage of total length of roads in State

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

ⁱ Percentage of total length of State Highways in the country

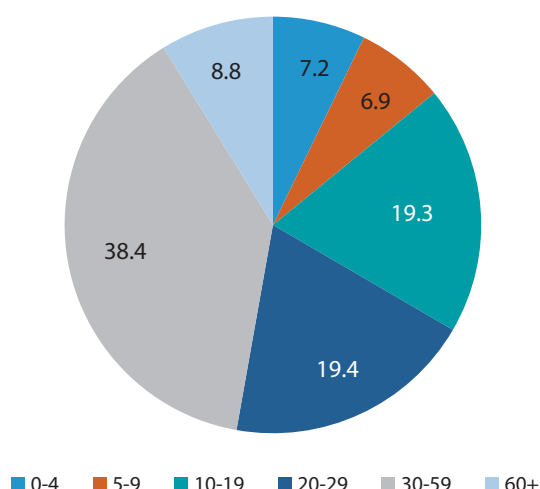
1.2 Demography

Overall, in North-Eastern States (excluding Assam), 19.3% of the total population is in 10-19 years' age group. 57.8% of the total population is between 20 to 59 years; while 8.8% are above 60 years of age. As per ESAG 2018 report, the Gross Enrollment Rate^k (GER) is 24.1% for higher education, 55.68% for senior secondary education (XI-XII), 109.02% for secondary education (IX-X), 126.56% for elementary education (I-VIII); and 122.99% for primary education (I-V).

1.3 Elderly

Population aging has profound social, economic, and political implications. Elderly people aged (60+) share 8.8% of the states' total population. In Mizoram, 49.0% of the elderly females and 16.0% elderly males living in rural areas are economically fully dependent on others, while 43% of the elderly females & 29% elderly males are economically totally dependent on others in urban areas. The illness (any deviation from the state of physical and mental well-being) perception among the elderly men and women is 11% each, which is much below the national average of 31% for both men and women (Elderly in India 2016).

Figure 1: North-East States (Excluding Assam) Distribution of estimated Population 2021 (%)



2. HEALTH STATUS AT A GLANCE

2.1 Maternal Health

Mizoram has been able to provide RMNCHA+N^l services with major focus on primary and secondary care services under the NHM. Indicators for Antenatal care (ANC)^m, institutional deliveries, C sections, distribution of IFAⁿ tablets, follow up of high-risk pregnancies, provision of postnatal and newborn care have shown improvement since 2005 (NFHS 4 & 5). In Mizoram, 57.1% of women received 4 ANC check-ups (Annexure 1.4). As per the NFHS 5 (Annexure 3) Lawngtlai, Saiha and Mamit districts reported the least ANC coverage, ranging between 33% - 52.5%. Whereas Champhai, Kolasib and Aizwal districts reported relatively better ANC coverage ranging between 66% - 68.5%. As reported in HMIS 2019-20, around 89.2% of the deliveries took place in institutions, out of which 79.8% took place in public health facilities. Total percentage of C-sections is (18.6%) is only slightly higher than the WHO's standard (10-15%); and out of the total reported C-sections, about 34.3% is reported to be conducted at the private facilities in the State. Around 15.5% of women received their first postpartum check-up between 48 hours and 14 days (Annexure 1.4). Prevalence of anemia in women aged 15-49 years increased from

^j Population projection 2021 for Manipur is not available

^k 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

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

^m Antenatal Check up

ⁿ Iron Folic Acid Tablets

24.8% (NFHS 4) to 34.8% (NFHS 5). Anemia in females of reproductive age group is twice than men of similar age group (Annexure 2, figure 3).

Refer Annexure 3 for detailed district wise comparison.

2.2 Newborn, Infant & Child Health

Since the inception of NHM in 2005, Mizoram has shown a significant decline in IMR from 20 (2005) to 3 (2019) (Annexure 2, Figure 1). As per the NFHS 5, the lowest SRB^o ranging between 726 to 860 are reported in Champhai, Mamit and Kolasib districts, while the highest ones, ranging between 1084 to 1131 are reported in Serchhip, Lawngtlai and Saiha districts.

Full vaccination^p coverage for children between 12 – 23 months of age has improved from 71.3% (NFHS 4) to 83.7% (NFHS 5). The percentage of under 6-months children exclusively breastfed has increased from 61.1% (NFHS 4) to 67.9% (NFHS 5). An increase in childhood anemia from 19.3% (NFHS 4) to 46.4% in children aged 6-59 months is reported in NFHS 5 (Annexure 2, Figure 3). As per the NFHS 5 report, low stunting rates which ranged from 25.3% to 26.5% are reported from Aizwal, Mamit and Lunglei districts. While higher stunting rates which ranged from 31.8% to 43.8% are reported from Serchhip, Lawngtlai and Saiha districts. For under-5 wasting – Aizwal, Mamit and Saiha districts reported a low burden, which ranged from 7.3% to 7.7%; while Kolasib, Champhai and Lawngtlai districts reported a relatively higher burden, which ranged from 11.3% to 16.2%.

2.3 Family Planning

As per the NFHS 5 report, the total unmet need in Mizoram is reported as 18.9%, while the unmet need for spacing is 12.8%. Champhai district reported the lowest total unmet need of 11.2%, while Saiha reported the highest (22.5%). Approximately 30.8% of married women reported to avail any modern method of family planning in the State (NFHS 5). The sterilization acceptance among females is 13%, while none of the males are opting for sterilization.

2.4 Communicable Diseases

Mizoram has 9 IDSP units functional^q. The proportion of communicable, maternal, neonatal, and nutritional diseases [CMNND] contribute to 34.18% of total disease burden (Annexure 1.4). Lower respiratory tract infections, HIV/AIDS, Other neonatal conditions and Neonatal Preterm birth are the leading causes of DALYs in Mizoram (Annexure 2, Figure 4). As per QPR reports, for TB, the annual total case notification rate is 201 and NSP^r success rate is 61; while the former is above the national average of 163, the latter is below the national average of 79. For NLEP^s, the reported prevalence rate of 0.04 per 10,000 population is less than the national average of 0.61. In FY 2019-20, 8 deaths due to Malaria, while none due to Dengue, or Kala Azar are reported.

^o Sex Ratio at Birth

^p NFHS 5 State Factsheet, based on information from vaccination card only

^q QPR NHM MIS Report (status as on 01.03.2020)

^r New Smear Positive

^s National Leprosy Eradication Programme

2.5 Non-Communicable Diseases (NCDs) & Injuries

It is reported that as high as 64.6% deaths are premature, while disability or morbidity accounts for 35.4%. COPD, other musculoskeletal conditions, lung cancer, stomach cancer and diabetes type 2 are the major causes of DALYs (Annexure 2, Figure 4). NCDs contribute to 57.37% of DALYs; while injuries contribute to 8.45% of DALYs^t. Mizoram is positioned 32nd in the country for the total number of fatal road accidents with respect to other States (Annexure 1.4). In NFHS 5, it is reported that as high as 61.6% of women and 72.9% of men used any kind of tobacco, while 0.9% of women and 23.8% of men consumed alcohol. Overall, smoking, ambient particulate matter pollution, high fasting plasma glucose, high systolic pressure, and high body mass index are the top five risk factors for all DALYs (Annexure 2, figure 5).

2.6 Health Care Financing

Mizoram's Net State Domestic Product (NSDP) for FY 2018-19 is ₹ 17,506 crores. The State is positioned 17th out of 32 states in terms of per capita^u of ₹ 1,47,602. As per NSS 2017-18, the OOPE for IPD care per hospitalized case in rural areas is estimated to be around ₹ 5,506 in public facilities, ₹ 13,096 in private facilities; whereas for urban areas, it is around ₹ 5,772 in public facilities and ₹ 14,422 in private facilities. For childbirth in rural areas, OOPE is estimated to be around ₹ 2,019 in public facilities & ₹ 1,800 in private facilities; whereas in urban areas - OOPE is estimated to be around ₹ 2,503 in public facilities and ₹ 6,464 in private facilities. In public health facilities, the share of expenditure on drugs as a proportion of inpatient medical expenditure is estimated as 46% in rural and 65% in urban areas; whereas for diagnostics, it is 10% in rural and 15% in urban areas (Annexure 1.6).

2.7 Health Infrastructure

As per the recent RHS data, the number of SCs, PHCs and CHCs have been increasing since 2005 (Annexure 2, Figure 6). There is no shortfall in SCs, PHCs or CHCs (Annexure 2, Figure 7). Currently, there are 311 SCs, 57 PHCs, and 9 CHCs in place, against the required 180 SCs, 27 PHCs and 6 CHCs in rural areas. The State has 9 DHs, 2 SDHs and 1 government medical college. In tribal catchments, there are 368 SCs, 65 PHCs and 9 CHCs in place, against the required 177 SCs, 26 PHCs and 6 CHCs.

Under Government of India flagship program of Ayushman Bharat, a total of 222 primary care facilities (159 SHCs, 55 PHC & 8 UPHC) have been upgraded and are currently operational as Health & Wellness Centres (HWCs) to deliver Comprehensive Primary Health Care (as on 22nd Dec 2021, Annexure 1.3).

In Mizoram, 9 districts are equipped with MMUs under the NRHM, while none under the NUHM. Mizoram has 100% of required ASHAs in position under both NRHM & NUHM. The doctor to staff nurse ratio in place is 1:2, with 16 public health providers (MO, specialists, staff nurse & ANM) per 10,000 populations (Annexure 1, Table 1.5).

Recent data (Annexure 1.3) reveals that out of 1000 population who availed services from public health facilities, 1362.9 availed (events) OPD services and 76 availed (events) IPD services. As per the NSSO data (2017-18), 86% of all OPD cases in rural areas and 53% in urban areas; and 90% of all IPD cases in rural areas & 69% in urban areas utilized public health facilities. The public health facility utilization in Mizoram is above the national average for rural & urban areas (Annexure 1.6).

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

^u Directorate of Economics & Statistics

ANNEXURE 1: KEY INDICATORS

1.1 State Profile^v

Indicator	Mizoram 2011 ¹	India
Total Population (In crore)	0.1	121.08
Rural (%)	47.89	68.85
Urban (%)	52.11	31.14
Scheduled Caste population (SC) (in crore)	0.00012 (0.11%)	20.14 (16.63%)
Scheduled Tribe population (ST) (in crore)	0.10 (94.43%)	10.45 (8.63%)
Total Literacy Rate (%)	91.3	72.99
Male Literacy Rate (%)	93.3	80.89
Female Literacy Rate (%)	89.3	64.64
Number of Districts in the Mizoram ²	9	
Number of districts per lakh population in Mizoram (Census 2011)	Population ¹	Districts ¹ (Numbers)
	<1 Lakhs	4
	≥ 1 Lakhs - <2 Lakhs	3
	≥2 Lakhs - <5 lakhs	1
	≥5 Lakhs	0
ST % share of the districts		
Champhai - 98.18%		
Serchhip - 96.84%		
Saiha - 96.58%		
Lawngtlai - 95.30%		
Lunglei - 95.10%		
Mamit - 95.03%		
Aizawl - 93.31%		
Kolasib - 87.67%		

1.2 Key Health Status & Impact Indicators

Indicators	Mizoram	India
Infant Mortality Rate (IMR) ³	3	30
Crude Death Rate (CDR) ³	4	6

^v Sources are mentioned at the end of Annexure 1

Crude Birth Rate (CBR) ³	14.5	19.7
Maternal Mortality Ratio (MMR) ³ (for other states including Mizoram)	85	113
Neo Natal Mortality Rate (NNMR) ⁴	N/A	23
Under Five Mortality Rate (U5MR) ⁴	N/A	36
Still Birth Rate ⁴	N/A	4
Total Fertility Rate (TFR) ⁴	N/A	2.2
Life expectancy at birth ⁵	N/A	69.4
Sex Ratio at Birth ⁴	N/A	899

1.3 Key Health Infrastructure Indicators^w

Indicators				Numbers (Total)
Number of District Hospitals ²				9
Number of Sub District Hospital ²				2
Number of Government (Central + State) Medical College ⁶				1
Number of Private (Society + Trust) Medical Colleges ⁶				0
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	159	113	215	283
PHC-HWC	55	57	57	57
UPHC-HWC	8	8	8	8
Total-HWC	222	178	280	348
Rural ²	Required (R)	In place (P)	Shortfall (S) (%)	
Number of Community Health Centres (CHC)	6	9	-50.00	
Number of Primary Health Centres (PHC)	27	57	-111.11	
Number of Sub Centres (SC)	180	311	-72.78	
Number of functional First Referral Units (FRUs)	DH	SDH	CHC	
	8	1	5	
Urban ²	Required (R)	In place (P)	Shortfall (S) (%)	
Number of PHC	13	8	38.46	
Tribal ²	Required (R)	In place (P)	Shortfall (S)%	
Number of CHC	6	9	-50.00	
Number of PHC	26	65	-150.00	
Number of SC	177	368	-107.91	

^w Sources are mentioned at the end of Annexure 1

Patient Service ⁹	Mizoram	India
IPD per 1000 population	76.0	62.6
OPD per 1000 population	1362.9	1337.1
Operation (surgeries) major (General and Spinal Anaesthesia) per 10000 population	119.0	36.4

1.4 Major Health Indicator^x

% Share of DALYs to Total Disease Burden (GBD 2019) ⁷	Mizoram	India
% DALY ^y accountable for CMNNDs ^z	34.18	27.46
% DALY accountable for NCDs	57.37	61.43
% DALY accountable for Injuries	8.45	11.11
Birth, Death Registration & Medical Certification of Cause of Death (MCCD) Indicator ⁸	Mizoram	India
Level of Birth Registration (%)	100	92.7
Level of Death Registration (%)	100	92
Percentage of medically certified deaths to total registered deaths (%)	51.9	20.7
RMNCHA+N		
Maternal Health ⁹	Mizoram	India
% 1st Trimester registration to Total ANC Registrations	75.2	71.9
% Pregnant Woman received 4 ANC check-ups to Total ANC Registrations	57.1	79.4
Total Reported Deliveries	20728	21410780
% Institutional deliveries to Total Reported Deliveries	89.2	94.5
% Deliveries conducted at Public Institutions to Total Institutional Deliveries	79.8	67.9
% Deliveries conducted at Private Institutions to Total Institutional Deliveries	20.2	32.1
% C-section deliveries (Public + Pvt.) to reported institutional (Public + Pvt.) deliveries	18.6	20.5
% C-sections conducted at public facilities to Deliveries conducted at public facilities	14.7	14.1
% C-sections conducted at Private facilities to Deliveries conducted at private facilities	34.3	34.2
% Women getting 1st Post-Partum Checkup between 48 hours and 14 days to Total Reported Deliveries	15.5	53.4
Neonatal ⁹	Mizoram	India
% live birth to Reported Birth	99.2	98.8
% Newborns having weight less than 2.5 kg to Newborns weighed at birth	5.1	12.4
% Newborns breast fed within 1 hour of birth to Total live birth	95.7	89.9

^x Sources are mentioned at the end of Annexure 1

^y Disability Adjusted Life Years

^z Communicable, Maternal, Neonatal, and Nutritional Diseases

New Born Care Units Established¹¹	Mizoram	India
Sick New Born Care Unit (SNCU)	5	895
New Born Stabilization Unit (NBSU)	1	2418
New Born Care Corner (NBCC)	124	20337
Child Health & Nutrition¹⁰	Mizoram (NFHS 5)	India (NFHS 5)
Prevalence of diarrhoea (reported) in the last 2 weeks preceding the survey (%)	4.3	7.3
Children with diarrhoea in the last 2 weeks who received oral rehydration salts (ORS) (%)	71.4	60.6
Children under 5 years who are underweight (weight-for-age) (%)	12.7	32.1
Child Immunization¹⁰	Mizoram (NFHS 5)	India (NFHS 5)
Children age 12-23 months fully vaccinated based on information from vaccination card only (%)	83.7	83.8
Children age 12-23 months who have received BCG (%)	83.4	95.2
Children age 12-23 months who have received first dose of measles containing vaccine (%)	80.9	87.9
Family Planning¹⁰	Mizoram (NFHS 5)	India (NFHS 5)
Unmet need for spacing (%)	12.8	4
Communicable Diseases		
Integrated Disease Surveillance Programme (IDSP)¹¹	Mizoram	India
Number of districts with functional IDSP unit	9	720
Revised National Tuberculosis Control Programme (RNTCP)¹¹	Mizoram	India
Annualized total case notification rate (%)	201	163
New Smear Positive (NSP) Success rate (in %)	61	79
National Leprosy Eradication Programme (NLEP)¹¹	Mizoram	India
Prevalence Rate/10,000 population	0.04	0.61
Number of new cases detected	5	1,14,359
Malaria, Kala Azar, Dengue¹¹	Mizoram	India
Deaths due to Malaria ¹¹	8	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	Mizoram (NFHS 5)	India (NFHS 5)
Women (age 15-49 years) who have comprehensive knowledge of Human Immunodeficiency Virus (HIV)/Acquired immunodeficiency syndrome (AIDS) (%) ¹⁰	64.1	21.6
Men (age 15-49 years) who have comprehensive knowledge of HIV/AIDS (%) ¹⁰	65.6	30.7

Non-Communicable Disease		
Diabeties and Hypertension ¹⁰	Mizoram (NFHS 5)	India (NFHS 5)
Women - Mildly elevated Blood Pressure (Systolic 140-159 mm of Hg and/or Diastolic 90-99 mm of Hg) (%)	10.7	12.4
Men - Mildly elevated Blood Pressure (Systolic 140-159 mm of Hg and/or Diastolic 90-99 mm of Hg) (%)	16.2	15.7
Women - Blood sugar level - high (141-160 mg/dl) (%)	6.9	6.1
Men - Blood sugar level - high (141-160 mg/dl) (%)	7.8	7.3
Tobacco Use and Alcohol Consumption among Adults (age 15 years & above) ¹⁰	Mizoram (NFHS 5)	India (NFHS 5)
Women who use any kind of tobacco (%)	61.6	8.9
Men who use any kind of tobacco (%)	72.9	38
Women who consume alcohol (%)	0.9	1.3
Men who consume alcohol (%)	23.8	18.8
Injuries		
Road Traffic Accident ¹²	Mizoram	India
Rank (Total number of fatal Road Accidents in State/UT wrt other States/UTs)	32	NA
Total number of fatal Road Accidents	46	1,37,689
Severity (Road accident deaths per 100 accidents) of Road Accidents	77.4	33.7
Number of persons killed in Road Accidents	48	115113

1.5 Access to Care^{aa}

Health Systems Strengthening		
Ambulances & Mobile Medical Units (MMU) ¹¹	Mizoram	India
Number of Districts equipped with MMU under NRHM	9	506
Number of Districts equipped with MMU/Health Units under NUHM	0	31
Number of ERS vehicles operational in the States/UTs Under NHM	Mizoram	India
102 Type	62	9955
104 Type	0	605
108 Type	0	10993
Others	3	5129
Number of Ambulances functioning in the State/UTs other than NHM (At PHC/CHC/SDH/DH)	9	11070

⁹⁹ Sources are mentioned at the end of Annexure 1

Key Domain Indicators			
ASHA ¹³	Mizoram	India	
Total number of ASHA targeted under NRHM	1091	946563	
Total number of ASHA in position under NRHM	1091	904211	
% of ASHA in position under NRHM	100	96	
Total number of ASHA targeted under NUHM	79	75597	
Total number of ASHA in position under NUHM	79	64272	
% of ASHA in position under NUHM	100	85	
Community Process ¹¹	Mizoram	India	
Number of Village Health Sanitation and Nutrition Committees (VHSNCs) constituted	830	554847	
Number of Mahila Arogya Samitis (MAS) formed	50	81134	
Number of Rogi Kalyan Samitis (RKS) registered (Total) ¹¹	Mizoram	India	
DH	9	796	
CHC	9	6036	
PHC	57	20273	
UCHC	0	126	
UPHC	8	3229	
Human Resource for Health ¹⁴			
HRH Governance		Mizoram	
Specialist Cadre Available in the state (Y/N)		No	
HR Policy available (Y/N)		No	
Implementation of HRIS (Y/N)		No	
HR Integration initiated (Y/N)		No	
Public Health Cadre available (Y/N)		No	
Overall Vacancies (Regular + contractual)	Specialists (%)	29	
	Dentists (%)	4	
	MO MBBS (%)	13	
	Nurse (%)	22	
	LT (%)	29	
	ANM (%)	20	
HRH Distribution		Sanctioned	In Place
Doctors (MO & specialists) to staff nurse ¹⁴		1:2	1:2
Availability of public healthcare providers (MO, specialists, staff nurse & ANM) in district healthcare system ¹⁴		20 per 10,000	16 per 10,000
Regular to contractual service delivery staff ratio ¹⁴		1:1	2:1

Ranking: Human Resource Index of Mizoram¹⁵

Category	Total (Regular + NHM)					Ranking: HR Gap Index
	Required (R)	Sanctioned (S)	In-Place (P)	Vacancy (V)	Actual Gap# (R-P)	
MPW ^{bb}	848	1142	942	200	0	75.33
Staff Nurse	1177	877	722	155	455	
Lab Technician	230	199	163	36	67	
Pharmacists	140	169	92	77	48	
MO MBBS ^{cc}	227	238	213	25	14	
Specialist ^{dd}	320	191	190	1	130	

1.6 Healthcare Financing^{ee}

National Health Accounts (NHA) (2017-18)	Mizoram		India	
Per Capita Government Health Expenditure (in ₹)	NA		1,753	
Government Health expenditure as % of Gross Domestic Product (GSDP)	NA		1.35	
Government Health Expenditure as % of General Government Expenditure (GGE)	NA		5.12	
OOPE as a Share of Total Health Expenditure (THE) %	NA		48.8	
National Sample Survey Office (NSSO) (2017-2018)	Mizoram		India	
	Rural	Urban	Rural	Urban
OPD - % of non-hospitalized cases using public facility	86	53	33	26
IPD - % of hospitalized cases using public facility	90	69	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	782	1082	472	486
OPD - Per non-hospitalized ailing person (in INR) in last 15 days - Private	956	1473	845	915
IPD - Per hospitalized case (in INR) - Public	5,506	5,772	5,729	5,939
IPD - Per hospitalized case (in INR) - Private	13,096	14,422	28,816	34,122
IPD - % of diagnostics expenditure as a proportion of inpatient medical expenditure in Public (NSSO)	10	15	18	17
IPD - % of drugs expenditure as a proportion of inpatient medical expenditure – Public (NSSO)	46	65	53	43

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

^{cc} MO MBBS (Full Time)

^{dd} Specialist (All Specialist)

^{ee} 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)	2,019	2,503	2,402	3,091
Childbirth - Average out of pocket expenditure per delivery in private health facility (₹)	1,800	6,464	20,692	26,701
State Health Expenditure	Mizoram		All India Average	
State Health Department expenditure as a share of total expenditure (%) (2017-18)**	6		5 ^{ff}	

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

^{ff} 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

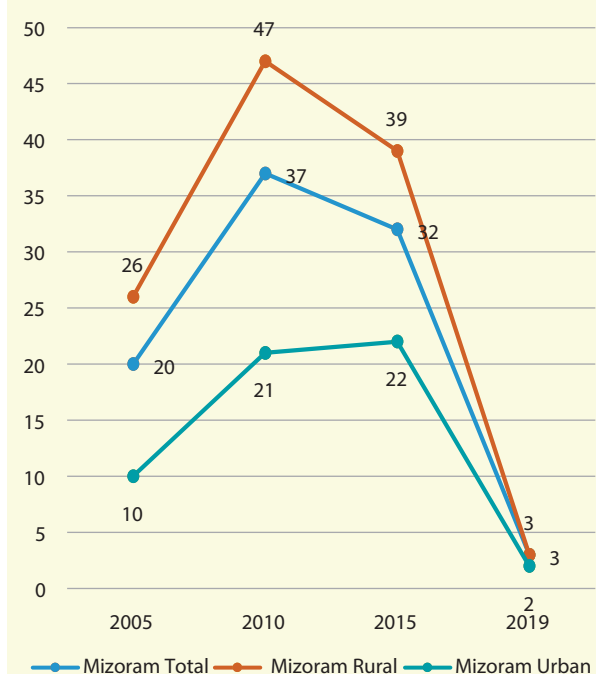


Figure 2: CBR & CDR Trend

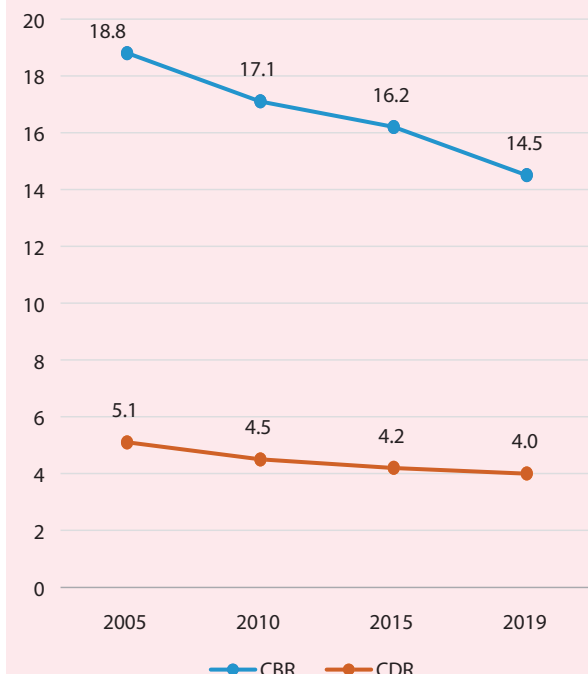


Figure 3: Comparison of Key NFHS 5 & 4 Indicators

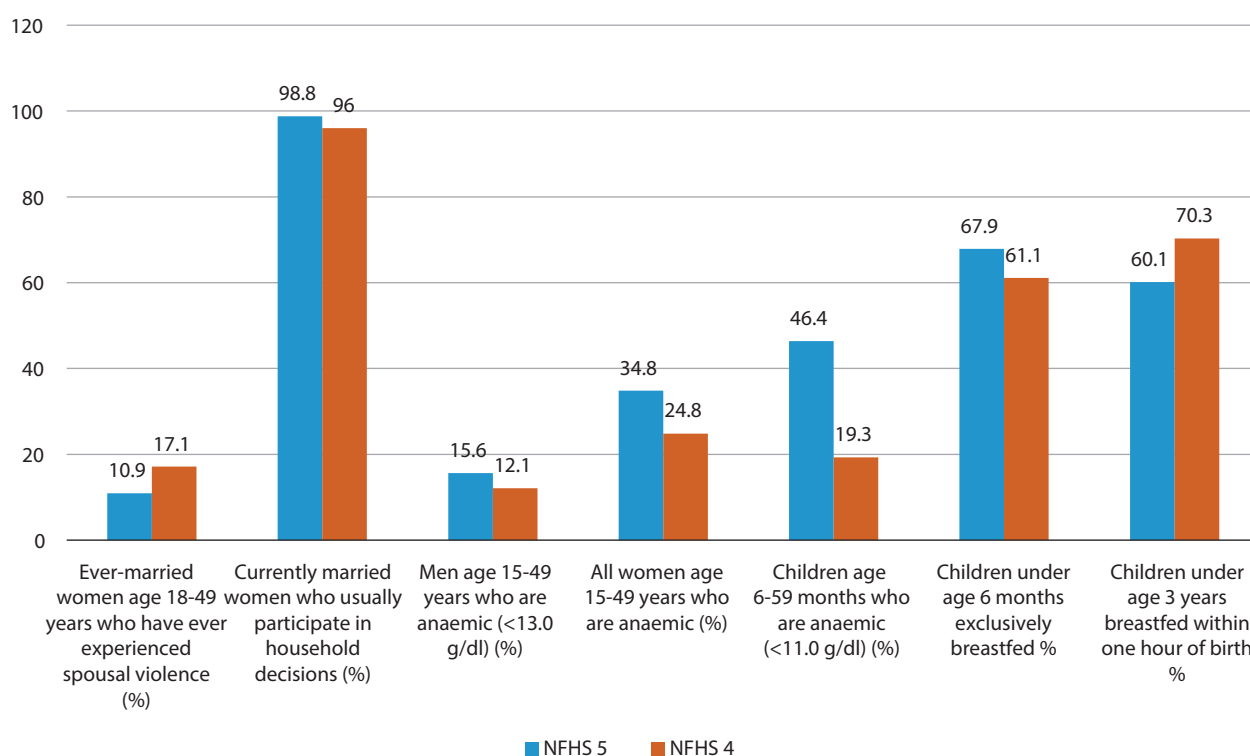


Figure 4: Top 15 causes of DALYs, 1990-2019

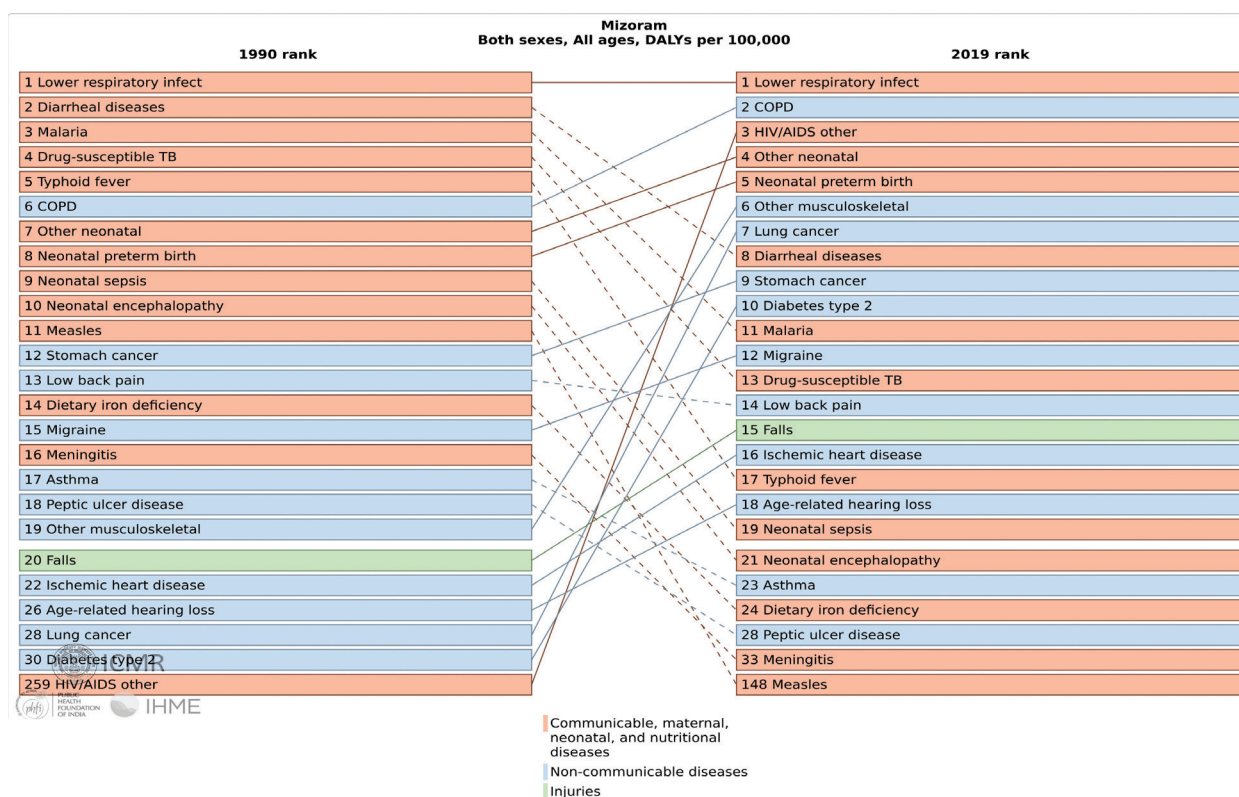


Figure 5: Top 15 risk of DALYs, 1990-2019

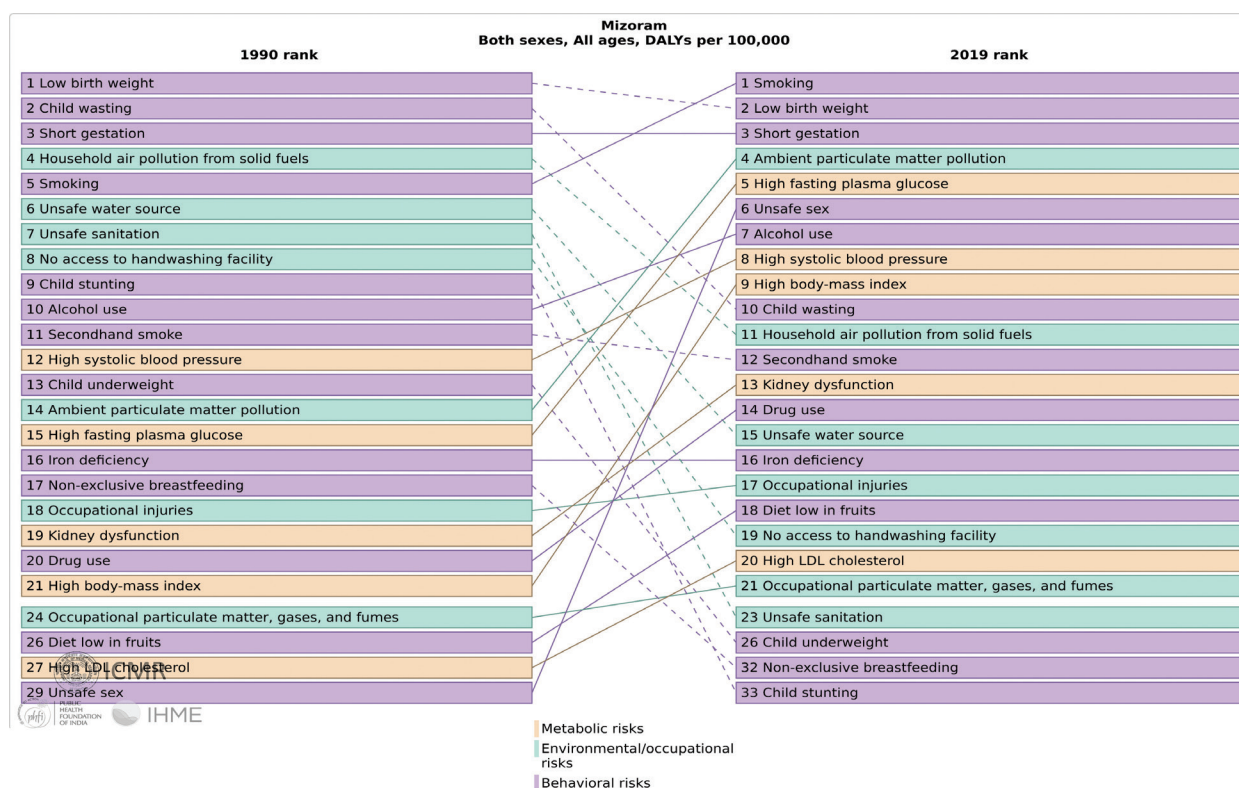


Figure 6: Year Wise Required/In Position Health Infrastructure Status in Rural Area (In numbers)

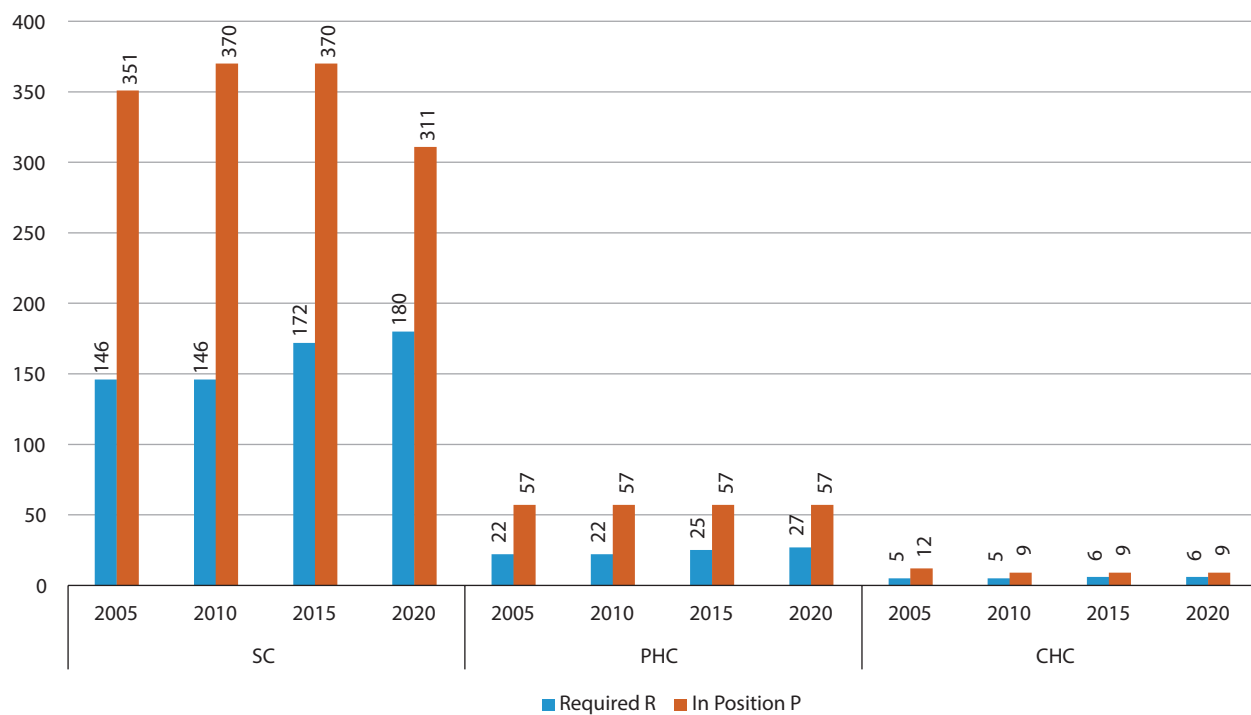


Figure 7: Year Wise Health Infrastructure Shortfall (%)

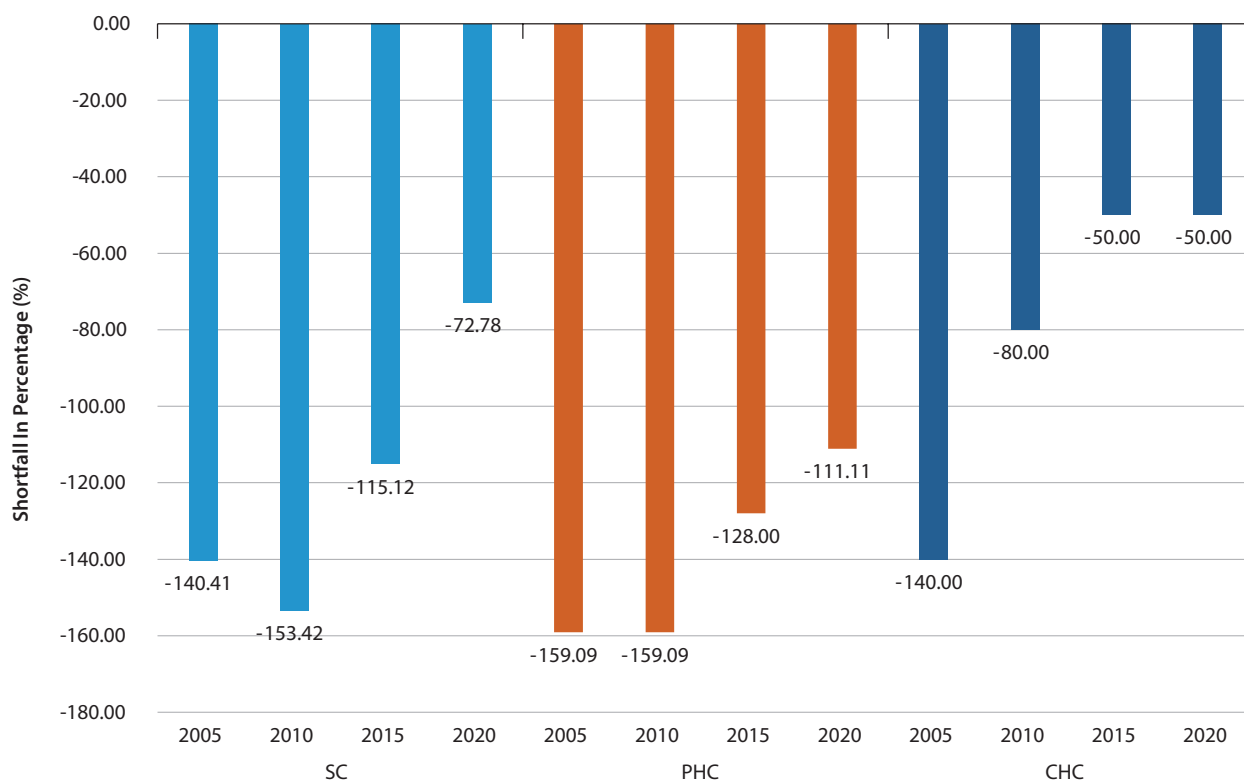
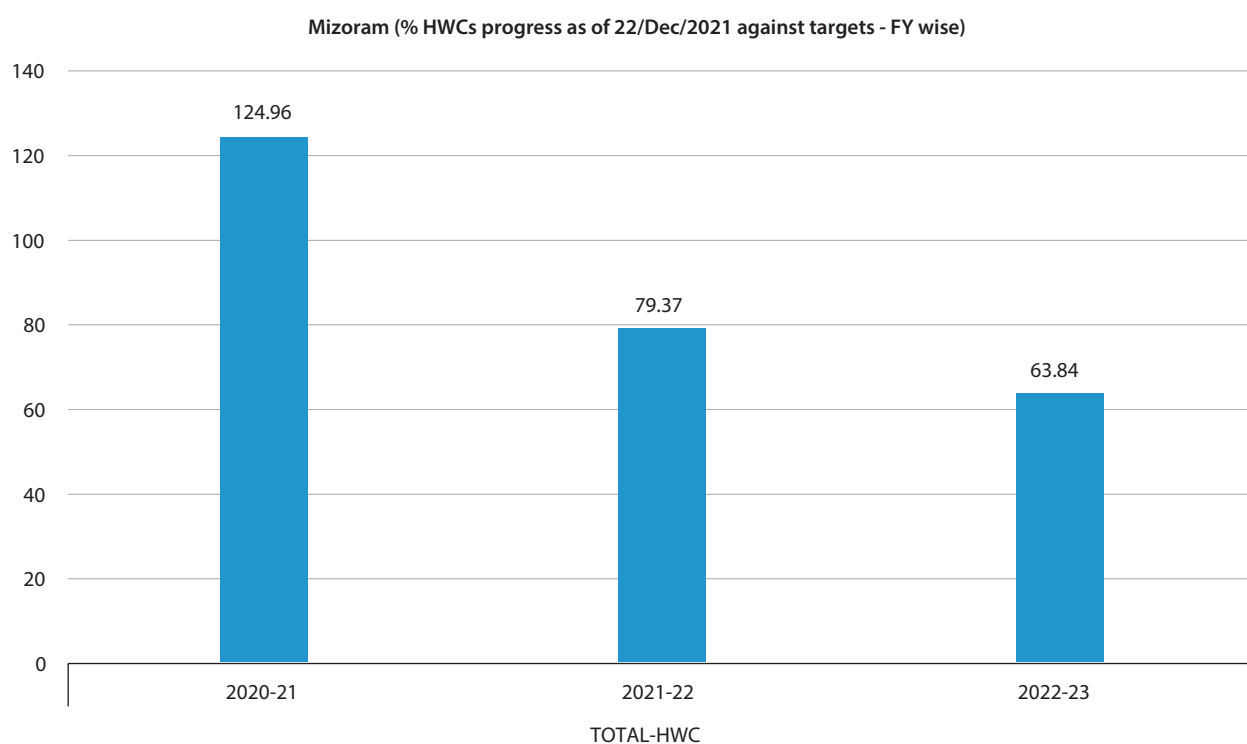


Figure 8: Percentage HWCs progress against target - FY wise (%)



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

S. No.	States/Districts	Data Source	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 (%)	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	Mizoram	NFHS 4 Total	949	45.8	N/A	10.9	35.3	3.4	1.3	20	61.4	79.7	71.3	14.5	28.1	6.1
2	Mizoram	NFHS 5 Urban	907	41.2	99.1	3.2	29.1	2.4	1.5	21.4	70.3	98.8	82.2	15.9	25.5	8.3
3	Mizoram	NFHS 5 Rural	1038	52.8	87.7	14	33.5	3.2	2.3	16.1	45	72.5	85.1	10.8	31.9	11.2
4	Mizoram	NFHS 5 Total	969	46.4	94.4	8	31.2	2.8	1.9	18.9	58	85.8	83.7	13.4	28.9	9.8
5	Aizawl	NFHS 5 Total	1042	37.5	98.9	3.2	21.6	2.8	1.6	24	68.5	97.4	76.3	17.9	25.3	7.3
6	Champhai	NFHS 5 Total	726	64.9	97.7	11	50	4.2	2.5	11.2	63.4	96.7	87	5.6	27.2	12.1
7	Kolasib	NFHS 5 Total	860	61.1	96.9	13.7	38.1	2.2	1.6	15.6	66	91.4	91.4	23.2	30.4	11.3
8	Lawngtlai	NFHS 5 Total	1131	31.3	76	16	29.7	1.6	2.8	17.3	33	53.7	91.7	9.2	32.7	16.2
9	Lunglei	NFHS 5 Total	876	46.5	91.6	4.8	33	1.7	2.3	15.4	56.7	82.7	84.1	9.4	26.5	9.5
10	Mamit	NFHS 5 Total	794	61.7	89.6	16.8	41.6	4	0.2	17	52.5	75	85.7	6.8	26.4	7.4
11	Saiha	NFHS 5 Total	1171	44.2	95.1	11.8	22.6	4.3	2.5	22.5	35.5	73.8	84.8	7.9	43.8	7.7
12	Serchhip	NFHS 5 Total	1084	58.8	99.7	7.2	40	2.6	1.8	15.9	60.3	96.2	93	12.1	31.8	8.4

* 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 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 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 three performing districts within the districts for a particular indicator

B. Red - Worst three 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

NOTES

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