



सत्यमेव जयते

Government of India

Ministry of Health and Family Welfare

# NAGALAND

DISTRICT LEVEL HOUSEHOLD AND FACILITY SURVEY (2012-13)



(स्थापना / Established in 1956)

बेहतर भविष्य के लिए क्षमता निर्माण  
Capacity Building for a Better Future

International Institute for Population Sciences  
(Deemed University)

Mumbai

# INTERNATIONAL INSTITUTE FOR POPULATION SCIENCES

**Vision:** “To position IIPS as a premier teaching and research institution in population sciences responsive to emerging national and global needs based on values of inclusion, sensitivity and rights protection.”

**Mission:** “The Institute will strive to be a centre of excellence on population, health and development issues through high quality education, teaching and research. This will be achieved by (a) creating competent professionals, (b) generating and disseminating scientific knowledge and evidence, (c) collaboration and exchange of knowledge, and (d) advocacy and awareness.”



सत्यमेव जयते

Government of India

Ministry of Health and Family Welfare,  
New Delhi-110 011

# District Level Household and Facility Survey 2012-13

# Nagaland



(स्थापना / Established in 1956)

बेहतर भविष्य के लिए क्षमता निर्माण  
Capacity Building for a Better Future

International Institute for Population Sciences  
(Deemed University)

Mumbai-400 088

2014

Suggested citation:- International Institute for Population Sciences (IIPS), 2014.  
*District Level Household and Facility Survey (DLHS-4), 2012-13:*  
*India. Nagaland: Mumbai: IIPS.*

For additional information, please contact:

**Director/Project Coordinator (DLHS-4)**  
**International Institute for Population Sciences**

Govandi Station Road, Deonar

Mumbai - 400 088 (India)

Telephone: 022-2556 3254/5/6, 022-4237 2465, 42372411

Fax: 022-25563257, 25555895

Email: rchpro@iips.net, director@iips.net

Website: <http://www.rchiips.org>  
<http://www.iipsindia.org>

**Additional Director General (Stat.)**  
**Ministry of Health and Family Welfare**

Government of India

Nirman Bhavan

New Delhi 110 011

Telephone: 011 - 23061334

Fax: 011 - 23061334

Email: adg-mohfw@nic.in

**Chief Director (Stat.)**  
**Ministry of Health and Family Welfare**

Government of India

Nirman Bhavan

New Delhi 110 011

Telephone: 011 - 23062699

Fax: 011 - 23062699

Email: cdstat@nic.in

Website: <http://www.mohfw.nic.in>

## **CONTRIBUTORS**

**L. Ladu Singh  
Chander Shekhar  
Junaid Khan  
Rati Parihar**



CONTENTS	PAGE
1. INTRODUCTION AND HOUSEHOLD CHARACTERISTICS .....	1
2. SURVEY DESIGN.....	2
3. SURVEY INSTRUMENTS .....	4
4. DEMOGRAPHIC BACKGROUND OF NAGALAND .....	6
5. CHARACTERISTICS OF WOMEN AND FERTILITY .....	9
6. MATERNAL HEALTH CARE .....	12
7. CHILD HEALTH AND IMMUNIZATION.....	16
8. FAMILY PLANNING AND CONTRACEPTIVE USE.....	19
9. REPRODUCTIVE HEALTH .....	23
10. PERSONAL HABITS.....	25
11. MORBIDITY STATUS .....	29
12. NUTRITION AND HEALTH .....	33
13. HEALTH FACILITIES .....	39
TABLES.....	43-180
<b>APPENDIX</b> .....	181-185

LIST OF TABLES		PAGE
----------------	--	------

Table 1.1	Basic demographic indicators.....	43
Table 1.2	Number of households, ever-married women .....	43
Table 1.3	Distance from the nearest educational facility.....	43
Table 1.4(a)	Distance from the nearest health facility .....	44
Table 1.4(b)	Programmes beneficiaries .....	44
Table 1.5	Reasons for dropping out of school.....	44
Table 1.6(a)	Housing characteristics and household assets .....	45
Table 1.6(b)	Housing characteristics by district.....	46
Table 1.7	Household characteristics.....	47
Table 1.8	Household population by age and sex .....	48
Table 1.9	Marital status of the household population.....	49
Table 1.10	Age at marriage .....	50
Table 1.11	Educational level of the household population.....	51
Table 1.12	Educational level of the household population.....	52
Table 1.13	Educational level of the household population.....	53
Table 1.14	Currently attending school .....	54
Table 1.15	Availability of facility and health personnel by district .....	54
Table 1.16	Birth registration .....	55
Table 1.17	Birth registration .....	55
Table 2.1	Background characteristics of ever married women .....	58
Table 2.2	Level of education of ever married women.....	59
Table 2.3	Birth order .....	60
Table 2.4	Birth order by districts.....	61
Table 2.5	Children ever born.....	62
Table 2.6	Outcomes of pregnancy .....	63
Table 2.7	Outcomes of pregnancy .....	64
Table 2.8	Fertility preferences.....	65
Table 3.1	Place of Antenatal Check-Up .....	68
Table 3.2	Antenatal Care by district.....	69
Table 3.3	Components of Antenatal Check-Up.....	70
Table 3.4	Women received advice during Antenatal care .....	71
Table 3.5(a)	Antenatal care: ANC visits and time of first ANC .....	72
Table 3.5(b)	Antenatal care: TT, IFA and ANC .....	73
Table 3.6	Antenatal care indicators and pregnancy complications.....	74
Table 3.7	Place of delivery and assistance .....	75
Table 3.8	Mode of transportation used for delivery and arrangement of transportation .....	76
Table 3.9	Place of delivery and assistance characteristics by district.....	77
Table 3.10	Reasons for not going to health institutions for delivery.....	78
Table 3.11	Delivery complications.....	79
Table 3.12	Post-delivery complications .....	80
Table 3.13	Any check-up after delivery .....	81
Table 3.14	Complications during pregnancy, delivery and post-delivery period .....	82
Table 3.15	Complications during pregnancy, delivery and post-delivery period.....	83
Table 3.16	Awareness of the danger signs of new born .....	84
Table 4.1	Timing and childhood check-ups .....	88
Table 4.2	Initiation of breastfeeding .....	89
Table 4.3	Breastfeeding and weaning status .....	90
Table 4.4	Exclusive breastfeeding.....	91
Table 4.5	Breastfeeding by districts .....	92
Table 4.6	Vaccination of children .....	93
Table 4.7	Status of childhood vaccination by districts .....	94
Table 4.8	Place of childhood vaccination.....	95



<b>LIST OF TABLES</b>		<b>PAGE</b>
Table 4.9	Vitamin-A and Hepatitis-B supplementation for children.....	96
Table 4.10	Awareness regarding diarrhoea management.....	97
Table 4.11	Treatment of diarrhoea.....	98
Table 4.12	Awareness and treatment of Acute Respiratory Infection (ARI).....	99
Table 4.13	Awareness of ors and Acute Respiratory Infection (ARI) by districts.....	100
Table 5.1	Awareness of contraceptive methods.....	103
Table 5.2	Awareness of contraceptive methods.....	104
Table 5.3	Awareness of contraceptive methods by district.....	105
Table 5.4	Ever use of contraceptive method.....	106
Table 5.5(a)	Current use of contraceptive methods.....	107
Table 5.5(b)	Duration of use of spacing methods.....	109
Table 5.6	Age at the time of sterilization.....	110
Table 5.7	Contraceptive prevalence rate by district.....	111
Table 5.8	Sources of modern contraceptive methods.....	112
Table 5.9	Cash benefits received after sterilization.....	113
Table 5.10	Health problems with current use of contraception and treatment received.....	114
Table 5.11	Reasons for discontinuation of contraception.....	115
Table 5.12	Future intention to use contraception.....	116
Table 5.13	Advice on contraceptive use.....	117
Table 5.14	Reasons for not using modern contraceptive methods among rhythm and withdrawal method users.....	118
Table 5.15	Unmet need for family planning services.....	119
Table 5.16	Unmet need for family planning services by district.....	120
Table 6.1	Menstruation related problems by background characteristics.....	123
Table 6.2	Source of knowledge about RTI/STI by background characteristics.....	125
Table 6.3	Knowledge of mode of transmission of RTI/STI by background characteristics.....	127
Table 6.4	Symptoms of RTI/STI by background characteristics.....	128
Table 6.5	Discussed about RTI/STI problems with husband and sought treatment by background characteristics.....	130
Table 6.6	RTI/STI indicators by districts.....	131
Table 6.7	Knowledge of HIV/AIDS.....	132
Table 6.8	Knowledge about mode of transmission of HIV/AIDS by background characteristics.....	134
Table 6.9	Knowledge of HIV prevention methods by background characteristics.....	135
Table 6.10	Misconception about transmission of HIV/AIDS by background characteristics.....	136
Table 6.11	Knowledge about the place where HIV/AIDS test can be done.....	137
Table 6.12	Undergone HIV/AIDS test.....	139
Table 6.13	HIV/AIDS indicators by districts.....	140
Table 7.1	Personal habits.....	143
Table 7.2	Personal habits-Men.....	144
Table 7.3	Personal habits-Women.....	145
Table 7.4	Personal habits.....	146
Table 7.5	Personal habits tobacco.....	146
Table 7.6	Personal habits smoke.....	146
Table 7.7	Personal habits drink alcohol.....	147
Table 7.8	Morbidity details.....	147
Table 7.9	Morbidity details.....	147
Table 7.10	Morbidity details.....	147
Table 7.11	Morbidity details.....	148
Table 7.12	Morbidity details.....	148
Table 7.13	Morbidity details.....	149
Table 7.14	Morbidity details.....	149
Table 7.15	Morbidity details.....	150

<b>LIST OF TABLES</b>		<b>PAGE</b>
Table 7.16	Tuberculosis .....	150
Table 8.1	Nutritional status of children .....	153
Table 8.2	Nutritional status of children by districts .....	154
Table 8.3	BMI (Body Mass Index) of women.....	155
Table 8.4	BMI (Body Mass Index) of women (new) .....	156
Table 8.5	Prevalence of anaemia among children .....	157
Table 8.6	Anaemia among school going/adolescent population .....	158
Table 8.7	Anaemia among population aged 20 years and above.....	159
Table 8.8	Anaemia among population children, adolescents aged 20 years and above .....	160
Table 8.9	Anaemia among pregnant women .....	161
Table 8.10	Prevalence of diabetes .....	162
Table 8.11	Prevalence of diabetes .....	163
Table 8.12	Prevalence of diabetes .....	164
Table 8.13	Prevalence of diabetes .....	165
Table 8.14	Blood pressure.....	166
Table 8.15	Blood pressure.....	167
Table 8.16	Blood pressure.....	168
Table 8.17	Blood pressure.....	169
Table 8.18	Presence of iodized salt in household.....	170
Table 8.19	Presence of iodized salt in household.....	171
Table 9.1	Average population covered by health facility by districts .....	174
Table 9.2	Status of infrastructure at Sub-Health Centre functioning in government building by districts..	174
Table 9.3	Percentage of Sub-Health Centres having different activities by districts .....	175
Table 9.4	Available human resources at Sub-Health Centres by districts .....	175
Table 9.5	Available human resources at Primary Health Centres by districts.....	176
Table 9.6	Available infrastructure at Primary Health Centres by districts .....	176
Table 9.7	Specific health facilities available at Primary Health Centres by districts .....	177
Table 9.8	Number of Primary Health Centres having different activities by districts.....	177
Table 9.9	Human resources available at Community Health Centres by districts.....	178
Table 9.10	Specific health care facilities available at Community Health Centres by districts .....	179
Table 9.11	Number of Community Health Centres having different activities by districts .....	179
Table 9.12	Human resources & other services available at District Hospitals by districts .....	180

<b>LIST OF FIGURES</b>		<b>PAGE</b>
Figure 1	Source of drinking water .....	7
Figure 2	Toilet facilities .....	7
Figure 3	Age-sex composition .....	8
Figure 4	School attendance by age and sex.....	8
Figure 5	Mean children ever born by districts .....	10
Figure 6	Desire for the additional child/next child.....	12
Figure 7	Any ANC by selected background characteristics.....	13
Figure 8	Progress in institutional delivery .....	15
Figure 9	Change in full immunization coverage of children.....	17
Figure 10	Percent of currently married women using contraceptive methods .....	20
Figure 11	Change in contraceptive prevalence rate .....	20
Figure 12	Change in unmet need for contraception .....	22
Figure 13	Contraceptive prevalence rate and unmet need by districts.....	23

<b>LIST OF MAPS</b>		<b>PAGE</b>
Map 1	Full ante-natal checkup by districts .....	14
Map 2	Institutional delivery by districts .....	15
Map 3	Full immunization coverage of children aged 12-23 months by districts .....	18
Map 4	Contraceptive prevalence rate for any method by districts.....	21

## ACRONYM

AFMC	Administrative and Financial Management Committee
AHS	Annual Health Survey
AIDS	Acquired Immuno Deficiency Syndrome
ANC	Antenatal Care
ANM	Auxiliary Nurse Midwife
ARI	Acute Respiratory Infection
ASHA	Accredited Social Health Activist
AWW	Anganwadi Worker
AYUSH	Ayurveda, Yoga and Naturopathy, Unani, Siddha and Homeopathy
BCG	Bacillus Calmette Guerin
BP	Blood Pressure
BPL	Below Poverty Line
CAB	Clinical Anthropometric Biochemical (Test)
CAPI	Computer Assisted Personnel Interviewing
CHC	Community Health Centre
CPR	Contraceptive Prevalence Rate
DBS	Dried Blood Spot
DH	District Hospital
DLHS	District Level Household and Facility Survey
DPT	Diphtheria, Pertussis and Tetanus
EAG	Empowered Action Group
ECG	Electrocardiogram
ECP	Emergency Contraceptive Pill
ELISA	Enzyme-linked Immunosorbent Assay
EPI	Expanded Programme on Immunization
FA	Field Agency
FBS	Fasting Blood Sugar
FHW	Female Health Worker
FRU	First Referral Unit
FOD	Field Operation Division
FP	Family Planning
FS	Female Sterilization
FSU	First Stage Unit
GPS	Global Positioning System
GoI	Government of India
HH	Household
HIV	Human Immuno Deficiency Virus
ICDS	Integrated Child Development Scheme
ICTC	Integrated Counseling and Testing Centre
IEC	Information, Education and Communication
IFA	Iron and Folic Acid
IIPS	International Institute for Population Sciences
IMNCI	Integrated Management of Neonatal and Childhood Illnesses
IMR	Infant Mortality Rate
IPHS	Indian Public Health Standards
IUD	Intra-uterine Device
JSY	Janani Suraksha Yojana
LMO	Lady Medical Officer
LPG	Liquefied Petroleum Gas
MCEB	Mean Children Ever Born
MDG	Millennium Development Goal
MMR	Maternal Mortality Ratio
MO	Medical Officer
MoHFW	Ministry of Health and Family Welfare
MoU	Memorandum of Understanding

## ACRONYM

MoA	Memorandum of Agreement
MTP	Medical Termination of Pregnancy
NC	Natal Care
NIC	National Informatics Centre
NIHFW	National Institute of Health and Family Welfare
NGO	Non-Governmental Organisation
NPP	National Population Policy
NRHM	National Rural Health Mission
NSSO	National Sample Survey Organization
NSV	Non-scalpel Vasectomy
OBC	Other Backward Class
OPD	Out-Patient Department
ORS	Oral Re-hydration Salt
ORT	Oral Re-hydration Therapy
OT	Operation Theatre
PHC	Primary Health Centre
PI	Partner Institute
PNC	Post Natal Care
PRC	Population Research Centre
PPS	Probability Proportional to Size
PSU	Primary Sampling Unit
RCH	Reproductive and Child Health
RKS	Rogi Kalyan Samiti
RTI	Reproductive Tract Infection
SDH	Sub-Divisional Hospital
SDRD	Survey Design and Research Division
SC	Scheduled Caste
SHC	Sub-Health Centre
ST	Scheduled Tribe
STI	Sexually Transmitted Infection
TBA	Trained Birth Attendant
TAC	Technical Advisory Committee
TOT	Training of Trainers
TT	Tetanus Toxoid
TV	Television
UFS	Urban Frame Survey
UFWC	Urban Family Welfare Centre
UHP	Urban Health Post
UIP	Universal Immunization Programme
UNFPA	United Nations Population Fund
UNICEF	United Nation Children's Fund
USU	Ultimate Stage Sampling Unit
UT	Union Territory
VCTC	Voluntary Counseling and Testing Centre
VHSNC	Village Health Sanitation and Nutrition Committee
WHO	World Health Organisation

## **Preface and Acknowledgements**

The District Level Household and Facility Survey-4 (DLHS-4) is a nationwide survey covering 640 districts from 36 States and Union Territories of India. This is the fourth round of the district level household survey which was conducted during 2012-13. The Survey was funded by Ministry of Health and Family Welfare, Government of India.

At the outset we acknowledge our sincere gratitude to the Ministry of Health & Family Welfare, Government of India for designating the International Institute for Population Sciences (IIPS) as the nodal agency for conducting District Level Household and Facility Survey-4 (DLHS-4). We would also like to take this opportunity to acknowledge Shri Bhanu Pratap Sharma, Secretary-Ministry of Health and Family Welfare (MoHFW), Government of India for his advice, suggestions and support. Our special thanks are due to Shri Lov Verma and Shri Keshav Desiraju former Secretaries, Ministry of Health and Family Welfare (MoHFW), Government of India, for providing overall guidance and support extended to the project. We gratefully acknowledge the active involvement, assistance, help, co-operation and suggestions received time to time from Shri C.R.K. Nair, Additional Director General, Dr. Rattan Chand, Chief Director and Shri Biswajit Das, Director-Statistics Division, Ministry of Health and Family Welfare, Government of India. We also extend our thanks to Smt. Madhu Bala, former Additional Director General and Shri Rajesh Bhatia, former Director-Statistics Division, Ministry of Health and Family Welfare, Government of India for their support from time to time.

We gratefully acknowledge the NIHF, New Delhi, especially Dr. M. M. Misro, Dr. T. G. Srivastava and Dr. Kalpna, for their immense help, assistance, support and coordination with all Partner Institutes to bring out quality DBS results/data. We also acknowledge our sincere gratitude to all Partner Institutes for providing training and support of CAB components and bringing out the quality DBS results.

We sincerely extend our appreciation to HLL Life Care Ltd., New Delhi, for procuring CAB equipments and consumables also supply chain to different states across the country.

Our special thanks are all the members of Technical Advisory Committee of DLHS-4, particularly Dr. N. S. Shastry, Chairman, Former DG & CEO (NSSO) for their constant involvement and technical inputs and support at various stages of the survey.

We also gratefully acknowledge all members of Sub-Committee on Sampling especially Shri G. C. Manna, Chairman, DDG, CSO, MoSPI for their technical support received from time to time.

Thanks are also due to Dr. Rajiv Mehta and Shri A. K. Mehra former Additional Director Generals at the National Sample Survey Organisations, Kolkata for providing UFS blocks.

We thank Dr. T. K. Roy, Former Director, IIPS, for reviewing the model report and his useful suggestions.

This acknowledgement cannot be concluded without expressing appreciation for the efforts and hard work put in by the field investigators, supervisors, health investigators in collecting data and timely transferring data to IIPS.

Last but not the least, we are grateful and appreciate the efforts of all the respondents who participated and spared their valuable time with us by providing the required information.

**DLHS-4 Coordinators**  
**International Institute for Population Sciences**



## 1. INTRODUCTION AND HOUSEHOLD CHARACTERISTICS

This state report for Nagaland pertains to the fourth round of District Level Household and Facility Survey (DLHS-4) 2012-13, following the preceding three rounds undertaken by the Ministry of Health and Family Welfare (MoHFW), Government of India (GoI) in the past (Round-I in 1998-99, Round-II in 2002-04, and Round-III in 2007-08) with the main objective to provide reproductive and child health related database at district level in India. The data from these surveys have been useful in setting the benchmarks and examining the progress the country has made after the implementation of RCH programme. In addition, the evidences generated by these surveys have been useful for the purpose of monitoring and evaluation of the ongoing programmes and the aspect of planning of suitable strategies by the central and state governments. In view of the completion of eight years of National Rural Health Mission (2005-12), that it was felt there was a need to focus on the achievements and improvements. The Ministry of Health and Family Welfare, Government of India, therefore initiated the process of conducting DLHS-4 and designated the International Institute for Population Sciences (IIPS) as the nodal agency to carry out the survey. MoHFW, provided funds for implementation of DLHS-4, guided by a duly constituted Technical Advisory Committee (TAC).

The main objective of District Level Household and Facility Survey-4 (DLHS-4) is to provide maternal and child care (MCH) indicators and prevalence of morbidity for a wide range of common, communicable, non-communicable and lifestyle diseases for the year 2012-13 covering the following aspects:

- Household basic amenities
- Prevalence of morbidity
- Coverage of ante-natal services and immunization services.
- Proportion of institutional/safe deliveries
- JSY Beneficiaries
- Economic burden of delivery
- Contraceptive prevalence rate
- ASHA's involvement
- Unmet need for family planning
- Awareness about RTI / STI and HIV / AIDS
- Infrastructure, manpower, equipments, drugs, services of public health facilities
- Linkage between health facility and MCH indicators

Bilingual questionnaires prepared in Nagamese and English language pertaining to Household, Clinical, Anthropometric and Bio-Chemical tests (CAB) and Ever Married Women (age 15-49) were used and canvassed using Computer Assisted Personal Interviewing (CAPI). It was for the first time in the country that large scale demographic and health survey at the district level was successfully carried out by using Computer Assisted Personal Interviewing (CAPI) in DLHS-4. The CAPI software was developed by using MMIC (Multi-Mode Interviewing Capability) tool. Mini laptops were also loaded with CAPI software and bilingual questionnaires and provided to the Field Agencies authorized to carry out the survey with the designated states. Each team was provided four CAPIs/Mini



laptops, one for each investigator. Supervisors were responsible for directly uploading the completed PSU's data to the IIPS, FTP server located in Mumbai on day-to-day basis. The use of CAPI optimized resources were required for transferring the filled questionnaires from field to the state office, data entries and received at IIPS. For the first time biomarkers were also used in DLHS-4. The village and health facility questionnaires were canvassed by using paper & pen method in DLHS-4. In the household questionnaire, information of all the members of the household and socio-economic characteristics of the household, possessed assets, number of marriages, morbidities and deaths in the household since January 2008, and also drinking water, toilet, drainage and kitchen facilities data were collected. The ever-married women questionnaire contained information on women's characteristics, maternal care, immunization and childcare, contraception and fertility preferences, reproductive health including knowledge about HIV/AIDS. The village questionnaire contained information on the availability of health, education and other facilities in the village, and whether the facilities are accessible throughout the year. The health facility questionnaire contained information on human resources, infrastructure, equipments, drugs and services. For the first time, a population-linked facility survey has been conducted in DLHS-4. At the district level, all Community Health Centres, Sub-Divisional Hospitals and District Hospitals were covered. Further, all Sub-Health Centres and Primary Health Centres which cater to the needs of the population of the selected PSUs were also covered. Fieldwork in Nagaland for all the 11 districts was conducted during January to July 2013, gathering information from 11,275 households and 6,347 ever married women (15 to 49 years). Table 1.2 provides breakup of PSUs and households by district and rural urban residence.

## **2. SURVEY DESIGN**

DLHS-4 is a district level survey and a multi-stage stratified designed adopted for selection of representative sample of each district in Nagaland. Rural and urban areas of a district are considered as natural strata. Wherever applicable, urban population in a district was further stratified into million class cities and non-million class cities. For the purpose of sampling of the urban samples, two-stage sampling was used where the primary sampling unit (PSU) is the NSSO urban frame survey (UFS) blocks and second stage sampling unit (SSU) is the household. The urban PSUs are selected by equal probability without replacement and USU selected by process of circular systematic sampling. Allocation of PSUs to million and non-million class cities was proportional to relative sizes. Distribution of PSUs of a district is proportional to projected urban population of the district. For districts with less than projected 30 percent urban population, urban PSUs are oversampled. The sampling frame used for urban sampling is the town and city wise list of NSSO UFS blocks for 2007-08 provided by the SRD Unit of National Sample Survey Organization (NSSO), Kolkata.

In rural area of each district, sampling design is two-stage sampling with census villages as PSU and household as the second stage sampling unit (SSU). The PSUs are selected by PPS with replacement and SSU are selected by circular systematic sampling. Large selected PSU with more than 300 households are divided into at least three segments in such a way that each segment has by and large the same number of households and two segments are then selected by PPS. List of villages in a district in Census 2001 are updated by removing

villages of 2001 which have been designated as urban in 2007-08 NSSO UFS block list and this serves as the sampling frame for sampling of rural PSUs from a district.

Selection of rural health facilities in DLHS-4 is linked with the sampled rural PSUs. Primary Health Centres (PHC) and Sub-Health Centres (SHC) catered to the health care needs of the sampled rural PSUs were included in the Facility Survey (FS) of DLHS-4. All Community Health Centres (CHC), Sub-Divisional Hospitals and District Hospitals are covered under the Facility Survey of DLHS-4.

## 2.1. Sampling Weight

In generating the district level demographic indicators, sample weight for household, women and children will be used. The weights for a particular district are based on three selection probabilities

$f_1^i$ ,  $f_2^i$  and  $f_3^i$  pertaining to  $i^{\text{th}}$  PSU of the district. These probabilities are defined as

$$f_1^i = \text{Probability of selection of } i^{\text{th}} \text{ PSU in a district} \\ = (n_r * H_i) / H,$$

Where  $n_r$  is the number of rural PSU to be selected in a district,  $H_i$  refers to the number of household in the  $i^{\text{th}}$  PSU and  $H = \sum H_i$ , total number of household in a district.

$$f_2^i = \text{Probability of selecting segment (s) from segmented PSU (in case the } i^{\text{th}} \text{ selected PSU is segmented)} = (\text{Number of segments selected after segmentation of PSU}) / (\text{number of segment created a PSU})$$

The value of  $f_2^i$  is to be equal to one for un-segmented PSUs.

$$f_3^i = \text{probability of selecting a household from the total listed households of a PSU or in segment(s) of a PSU} \\ = (25 * HR_i) / HL_i$$

Where  $HR_i$  is the household response rate of the  $i^{\text{th}}$  sampled PSU and  $HL_i$  is the number of households listed in  $i^{\text{th}}$  PSU in a district.

For urban PSU,  $f_1^i$  is computed either as the ratio of number of UFS blocks included in the sample to the total number of UFS blocks of the district.

The probability of selecting a household from the district works out to be

$$f^i = f_1^i * f_2^i * f_3^i$$

The non-normalized weight for the  $i^{\text{th}}$  PSU of the district is,  $w^i = 1/f^i$  while the normalized weight used in the generation of district indicators for the  $i^{\text{th}}$  district would be

$$= \frac{\sum_i n_i}{\sum_i n_i * w^i} * w^i$$

Where  $n_i$  is the number of households interviewed in the  $i^{\text{th}}$  PSU. The weight for women and children are computed in the similar manner considering corresponding response rate.

### 3. SURVEY INSTRUMENTS

The main instrument for collection of data in DLHS-4 was a set of structured questionnaires, namely, household, ever married woman, and village questionnaires as components of household survey. In the facility, separate questionnaires are used for Sub-Health Centre (SHC), Primary Health Centre (PHC), Community Health Centre (CHC), Sub-Divisional Hospital (SDH) and District Hospital (DH). Household and ever married women questionnaires are bilingual, with questions in both Nagamese and English languages.

**3.1 Household Questionnaire:-** The household questionnaire starts with listing of all usual residents in each sample household including visitors who had stayed the night before the interview. The listing of usual resident members is used for identification of eligible respondents for ever married women and CAB (Clinical, Anthropometric and Biochemical) tests. For individual household member information on age, sex and marital status, relationship to the head of the household and education were collected. Marriages and deaths to members of household were also recorded. Efforts were made to get information about maternal deaths. Information were also collected on the main source of drinking water, type of toilet facility, source of lighting, type of cooking fuel, religion and caste of household head and ownership of durable goods in the household.

An added feature to the household questionnaire of DLHS-4 was the collection of data on disability status, injury, acute and chronic illness for all members of the household.

Clinical, Anthropometric and Biochemical (CAB) tests: An important component of household questionnaire is the collection of biomarkers of eligible household members for the first time on a large scale demographic and health survey in the country at district level. This includes weight and height for all household members of age one month and above, Haemoglobin level for all household members aged 6 months and older, random blood sugar test and blood pressure measurements for all household members aged 18 years and above.

**3.2 Ever Married Woman's Questionnaire:-** The respondents for the ever married woman's questionnaire are ever married women in 15-49 years of age living in the sampled households. Details on age, age at marriage, place of birth, educational attainment, number of biological children ever born and surviving by sex were collected. Accounts of ante-natal checks, experience of pregnancy related complications, place of delivery, delivery attendant and post-partum care, together with history of contraceptive use, sex preference of children and fertility intentions were recorded. For the recent births, immunizations status of children was collected either from the immunization card or asking the mother about the status of immunization of the child. The other information collected includes knowledge and awareness about RTI/STI and HIV/AIDS by source and treatment seeking behavior of RTI/STI.

**3.3 Village Questionnaire:-**This questionnaire was designed to collect information on availability and accessibility of education, health, transport and communication facilities at village level. Functioning of village committees and utilization of fund were additionally collected from the sampled villages. Information relating to implementation and beneficiaries of various government programmes on girl child, maternal care, sanitation,

food security, employment generation, and women's empowerment were also gathered as part of village information.

**3.4 Facility Questionnaire:-** In the facility survey, the information collected at the SHC level were availability of the human resources, , physical infrastructure, equipments and essential drugs and MCH service provided in one month preceding the survey. From the PHC, status of availability for 24x7 facility and services for delivery and new born care were also collected. In addition the additional information collected at the PHC level were the availability of Lady Medical Officer, functional Labour Room, Operation Theater, sufficient number of beds, drug storage facilities, waiting room for OPD, availability of RCH related equipments, essential drugs and essential laboratory testing facilities. The Information that were collected for the Community Health Centre (CHC) included availability of 24X7 services for delivery and new born care, status of in-position clinical, supporting and Para-medical staff, availability of specialists trained for NSV (Non-Scalpel Vasectomy), emergency obstetric, MTP, new born care, treatment of RTI / STI, IMNCI, ECG etc. The physical infrastructure of the CHC was such that there was water supply, electricity, communication; waste disposal facilities, OT, Labour Room and availability of residential quarters for medical doctors were also recorded in terms of the facility survey. It was from the Sub-Divisional and District Hospitals that the status of the availability of essential laboratory and ambulance services, emergency obstetric care service, availability of specialists, nurses, paramedics and technicians either on regular or contractual basis were collected. In addition to the infrastructure, the provision for the bio-medical and waste disposal and availability of residential quarters for doctors, nurses and staff were also recorded. The mode of collection of information for health facilities was collated by the method of personal interaction with the concerned officials, physical inspection and recording from relevant registers.

### **3.5 Sample Implementation**

The field implementation initiated with the preparation of location and layout maps of sampled PSUs in rural areas and obtaining map of sampled NSSO UFS blocks in urban areas. This is followed by the preparation of list of households which served as the sampling frame for selection of representative households and it involved mapping and listing of structures and households for each sampled primary sampling unit (PSU) following the preparation of location and layout maps. The mapping and listing was carried out for each PSU by a team comprising of a mapper, a lister and a supervisor. A PSU in rural area is a village or part of a village or a group of small villages and it is NSSO UFS block in an urban area.

From the sampling frame of households prepared by mapping and listing, a sample of 28 households was selected by circular systematic sampling. Household and ever married women's questionnaires were canvassed by a team of 3 female and one male investigator, one supervisor and two health investigators were assigned for collection of CAB information. For quality assurance, field teams were monitored constantly by Project Officers, Officials of PRC, MoHFW, and Partner Institutes who facilitates DBS testing.

Time to time DLHS-4 Project Coordinators of IIPS who made field visits to check and provide support to field teams.

#### **4. DEMOGRAPHIC BACKGROUND OF NAGALAND**

The basic demographic indicators of the State of Nagaland and its districts as of Census 2011 are shown in Table 1.1. The population of the state in the Census 2011 is enumerated as 1,979 (in thousands). The decadal growth rate of the state during 2001-2011 Census is -0.58 percent and the decadal growth rate were recorded negative in the districts of Mon, Tuensang, Mokokchung, Phek and Kiphire. It was observed that the Phek district has lowest decadal growth rate (-58.48) while Wokha district has highest. The sex ratio of the state is 931 females per 1000 males, is the lowest (898) in Mon and highest (981) in Darjeeling. The overall literacy rate is 79.6 percent and gender gap in literacy rate is 82.8 percent for males and 76.1 percent for females.

##### **4.1 Sample Coverage**

DLHS-4 surveyed a total of 413 primary sampling units (PSUs) covering 11,275 households with 91.5 percent response rate and 6,347 ever married women in reproductive age 15-49 years with 96.8 percent response rate. Table 1.2 shows the number of PSUs, households and ever married women interviewed and corresponding response rates by districts. Household response rate in the district varies from 85.1 percent in Longleng district to 99.2 percents in Kiphire district, while that for the ever married women varied from 92.2 percent Longleng district to 99.8 percent in Phek district.

##### **4.2 Village Facilities**

Total number of PSUs surveyed in Nagaland is 413 out of this 309 are rural PSUs. Most villages (97%) have a primary school in the village (Table 1.3). In 42.1 percent of the villages, there is Sub-Health Centre (SHC) (Table 1.4a). Out of 309 villages, 63.8percent have beneficiaries of ICDS, while 46 percent have JSY beneficiaries, but just 20.7 percent villages have beneficiaries of JSSK (Table 1.4b). As can be seen from Table 1.15 almost all sampled villages (98.1%) have Anganwadi centre, 61.5 percent have access to any government health facility but just about 17.2 percent of the sampled villages have Primary Health Centre (PHC) and 37.9 percent of the villages have Village Health Nutrition and Sanitation Committee (VHNSC).

##### **4.3 Household Amenities and Characteristics**

As regards the housing condition as can be noted from Table 1.6 (a), 14 percent of the surveyed households live in pucca house, 54 percent in kachha house and 32 percent in semi-pucca houses. As many as 97 percent of households have electricity connection, 79 percent of households use woods for cooking, while 19.6 percent use LPG, 86 percent of households have mobile phone, 54 percent owned television, 4 percent owned bicycle while 12.4 percent owned motor cycle/ scooter and 10.9 percent owned car/jeep.

The sources of drinking water are shown in figure 1 and it is noted that 10.7 percent of households are using tube well or borehole water for drinking and 20.2 percent of households are using piped water in to dwelling/yard/plot. As can be seen from figure 2,

households which do not have access to improved clean toilet constitute 17 percent of the total surveyed households and 66 percent of the households have access to improved flush/septic/pit toilets.

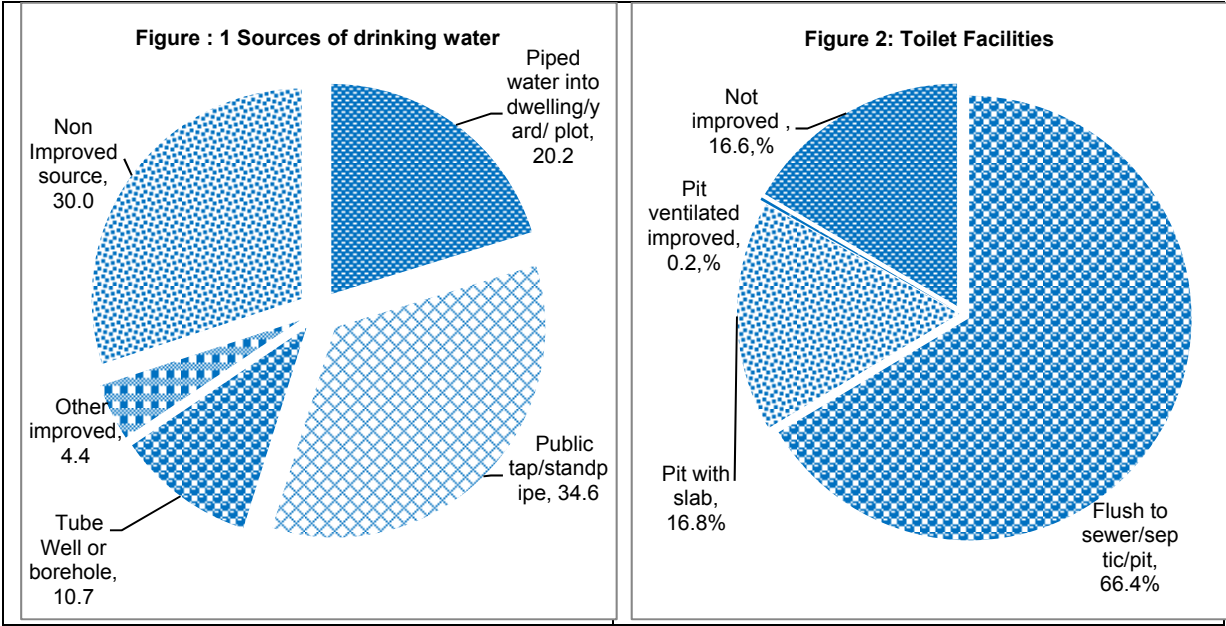


Table 1.6 (b) provides household access to electricity, drinking water, toilet and cooking gas and type of house by districts. The mean household size of the state is 3.5 while it is 3.4 in rural and 3.6 in urban areas (Table 1.7). One member households constitute 9.5 percent of all surveyed households, 90 percent household heads are males; median age of the head of the households is 48 years. Christians are majority among many households (95.7%) and significant shares (97%) of the household heads are scheduled tribes (ST).

The age-sex composition of the population of Nagaland is depicted in the population pyramid shown in figure 3. The pyramid is characterized by a shrinking base indicating declining trend in fertility, more females than males in 15-49 years and at older ages.

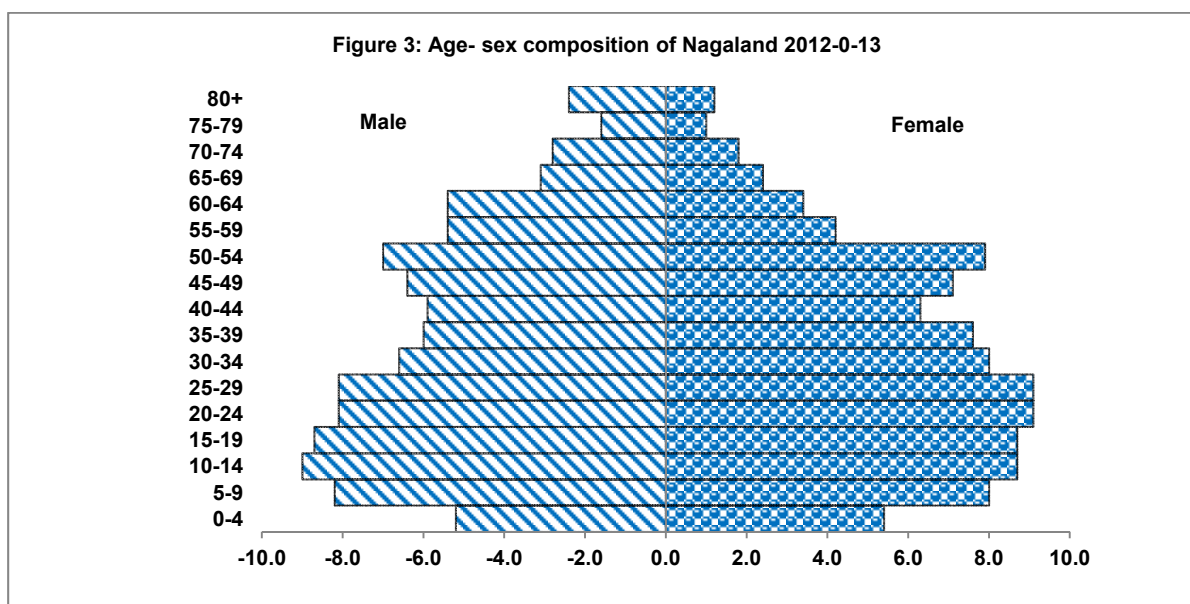


Table 1.8 provides differential in age-sex structures of rural and urban population of the state. As evident from Table 1.9 there is sizeable proportion of unmarried males and females in 20-29 years and another distinct feature is that there are more widowed/divorced/separated among females than males. The mean age at marriage for girls is 24.6 years while it is 27 years among boys. The mean age marriage for girls and boys by districts are shown in Table 1.10. Only 2.6 percent of the marriage among girls is below the legal age of 18 years and 6.0 percent of the boys got married below the legal age of 21 years. Tables 1.11 through 1.13 provide details about years of schooling of sampled household members by age, sex, caste and religion by rural-urban residence. Among females from the age group of 7 years and older, 1.3 percent was non-literate and the corresponding figure among males was 1.3 percent. It was observed that among females, 28.2 percent have 11 or more years of schooling as compared to 27.9 percent among males. Regardless of sex individuals about 30 percent of the literate population has less than five years of schooling. The non-literate individuals are less in urban than in the rural and more persons have 11 or more years of schooling than among rural residents. Table 1.14 provides rate of current school attendance by age, residence, religion and castes.

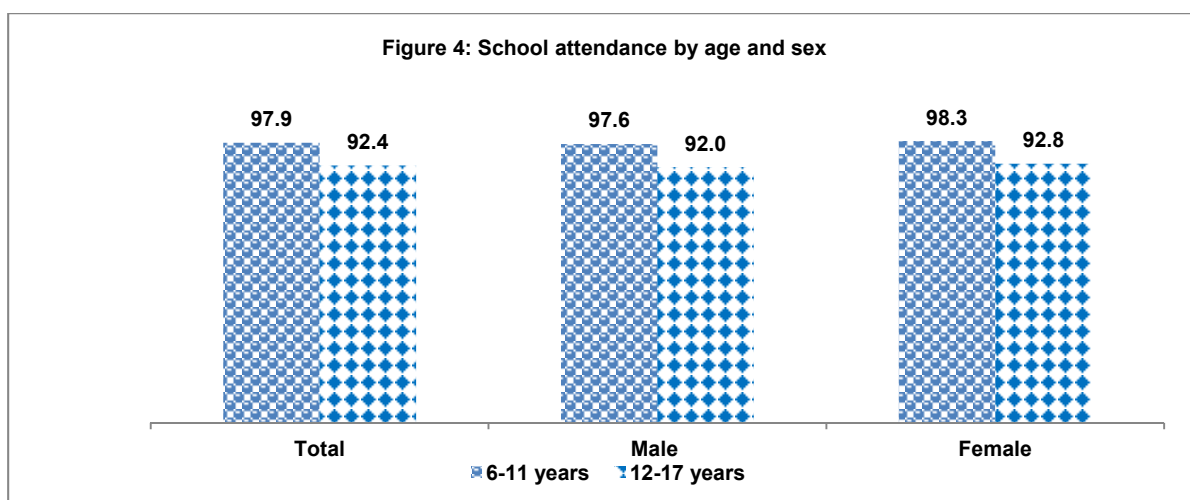


Figure 4 shows the school attendance by age, 6-11 years and 12-17 years, the stage of primary and secondary education respectively and sex. The state achieved 97.9 percent school attendance among 6-11 years children and 92.4 percent among 12-17 years suggesting the existence of dropout at the secondary level. There is no evidence of sex differential in school attendance among 6-11 years but for 12-17.

## **5. CHARACTERISTICS OF WOMEN AND FERTILITY**

The age at consummation of marriage is below 18 years for 16.7 percent of ever-married sampled women between 15-49 years irrespective of the residence background. In the rural population, 15.4 percent of surveyed women reported their age at consummation of marriage below 18 years. In the urban areas, 19.4 percent of surveyed women reported that they had started living with their spouse before attaining at the age 18 years as reflected in (Table 2.1). It was also observed that there were more non-literate women in rural areas (16.4%) than in the urban areas (13.9%), whereas non-literate husbands were less by 3 percentage points compared to non-literate wives/women in the rural areas. Around sixteen percent of women are non-literate whereas 24.3 percent of women are educated at least for 10 years. The proportion of husbands with 10 years or more schooling is 36.5 percent. Nearly half of the ever-married women (48%) were married for 15 years or more and the distribution of ever-married women in the categories of less than 5 years (18.9 percent), 5-9 years (15 percent) and 10-14 years (17.7%) marital duration was almost uniform, with less than 20 percent in each category. The proportion of women belonging to Christian has been highest and found to be 93.8 percent followed by 4.3 percent Hindu. The proportion of Hindu women is 15 times higher in urban area (12%) as compared to rural (0.8%). The percent distribution of women by castes/tribes is skewed towards Scheduled Tribes' (92%) followed by women belonging to others castes (4.4%) and Scheduled caste (3.2%). The percent of women who belong to Scheduled tribes is higher (97.3%) in rural than in the urban (80.5%).

Table 2.2 shows the distribution of years of schooling among sampled women by background characteristics. The percentage of women who had 11 years or more schooling in the age groups 20-24 (13%) and 25-29 (17%) is relatively higher than the other age groups. It was observed that less the urban women had 3 times higher percentage (19.9%) in education in the 11 more years of schooling as compared to rural women (6.3%). It was assessed that at least 14 percent of women with 0-5 years of schooling and 11.2 percent of 6-8 years respectively of schooling reported that their husband being a non-literate. The percentage of women possessing beyond 11 years of schooling was the lowest among the Muslims (5.4%). This proportion remains around 16.5 percent for women from other religion. Similarly, the proportion of the women educated beyond 11 years of schooling was also found to be dismal among the schedule castes (9.5%) and scheduled tribes (10.7%) even in the state of Nagaland.

### **5.1 Birth Order**

Out of the total births recorded from January 1, 2008 to ever-married women, around 70 percent births come from rural area and the rest of 30 percent comprise from the urban area. Almost 34 percent of them belong to women in the age group of 25-29, followed by 25 percent from women in the age group 20-24 as enumerated in Table 2.3. The distribution of

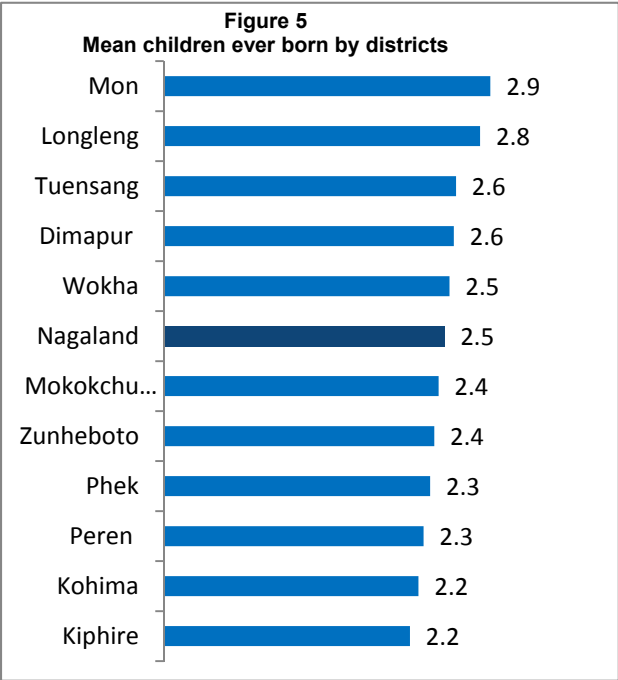


these births by religion shows that around 90 percent belong to the Christian Community followed by 5.6 percent to Hindu and rest belong to other religions. The distribution of births by castes/tribes indicates that births from the scheduled tribes contribute maximum of 88.7 percent, followed by scheduled castes (5.9%). Out of the total births since January 1, 2008 to ever-married women, 64.2 percent were of second or higher order births and the corresponding figures are 81.6 percent and 78.9 percent respectively for non-literate and women with less than 5 years of schooling (Table 2.3).

The births of second and higher order are more in proportion among ever-married women aged between 15-49 years of age who are from the rural area (65.8%) followed by the Muslim (81.5%), belonging to the scheduled cast (64.3%), and among 40-45 years or older women (90.7%), compared to ever-married women educated at least up to 10 years (49.3%). It was observed that those belonging (32.1%) to other backward classes as enumerated in (Table 2.3). Table 2.4 shows that the proportion of second and higher order births is the highest in Tuensang district (78.2%) and the lowest in district Zunheboto (20%). The proportion of first order birth has achieved the mark of 80 percent in Zunheboto. Over all percentage distribution of births is highest in district Tuensang (23%) followed by Dimapur district (21.3%).

**5.2 Mean Children Ever Born**

Mean children ever born (CEB) to ever-married women aged 15-49 years is 2.5 with marginal difference by residence, while it is 2.5 for non-literate and 2 to women with at least 10 years of education. The completed fertility measured in terms of average children ever born to ever-married women aged 40-49 years was nearly 3.1. Mean children ever born to ever married women (15-49 years of age) is highest among the other backward classes (3.1) and lowest in the others caste group (1.7).The differential by religion have shown marginal difference in this fertility indicator. The state level estimates for mean children ever born by the sex of children are also shown. It indicates that on average an excess of 0.2 male children to per female children ever born to ever-married women aged between 15-49 years in the state as a whole. The sex differentials in mean children ever born to ever-married women aged between 15-49 years is found to be higher for scheduled tribes, less than 5 years of education and older women (age 40 years and above). In case of women between 40-49 years, the sex differential in mean children ever born is measured as 0.26. In this age group of women, the gap between male and female mean children ever born to scheduled tribes (0.28), other castes (0.26), and less than 5 years educated women (0.46) is found to be much above than the state average (Table 2.5).



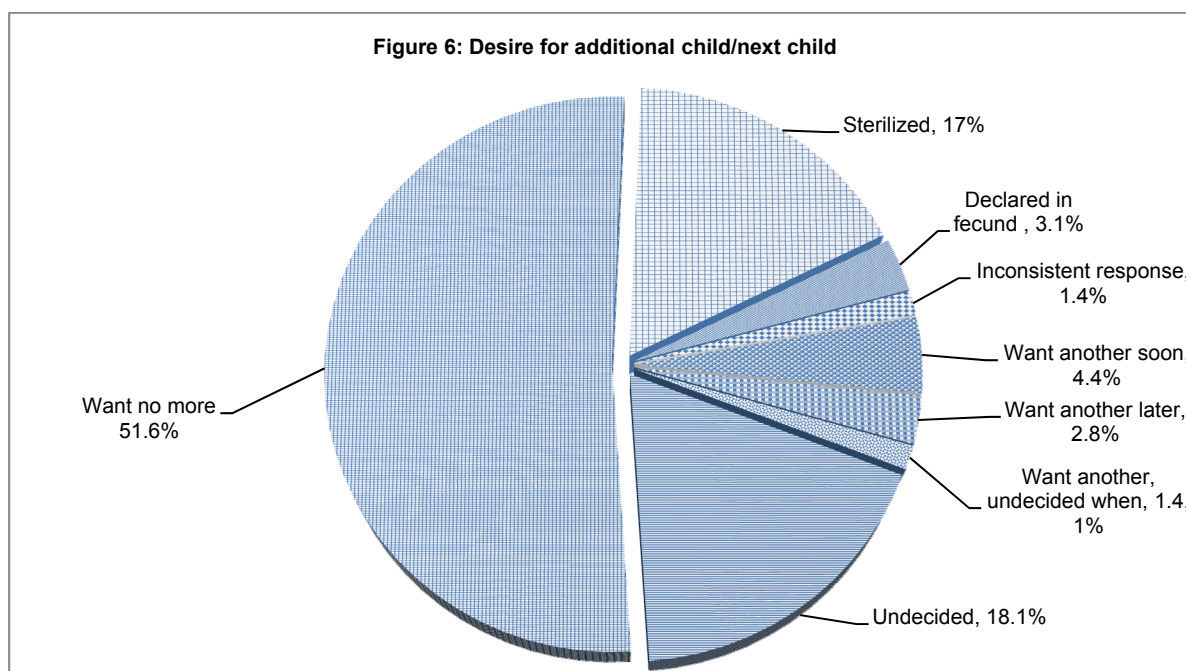
The mean children ever born to the ever-married women by district is shown in Figure.5, it varies from 2.9 children in the Mon district to that of 2.2 children in Kiphre district, while the state average is 2.5 children.

In Nagaland, most of the outcomes (96.9%) of pregnancies which occurred since January 1, 2008 to currently married women aged between 15-49 years, turned to be live birth. Only 1.1 percent of the pregnancies outcomes were reported as spontaneous abortion. The percentage of pregnancies that resulted in induced abortion was 1.2 percent for the state as a whole. Interestingly, the age of the women and the sex composition of the children depict a large variation in terms of the percentage of pregnancies resulted as induced abortion. For example, the women aged above 30-34 years (2.1%), less than five years of education (2.7%) and belong rural areas (1.7%) have a relative higher spontaneous abortion rate than their younger counterparts (Table 2.6). The percentage of pregnancies resulted into spontaneous abortions varies from nil in all the districts except Dimapur (3.6%) and Peren district (2.7%) The induced abortion rate (5.1 percent) are found to be highest in the district of Zunheboto while still birth is in peren district. As a result only 97 percent of the pregnancies since January 1, 2008, are the lowest in the state, are reported as live births (Table 2.7).

### **5.3 Fertility Intention and Sex Preferences for Additional Child**

Fertility preferences of currently married women in terms of the desire to have an additional child, and the timing to have preferred sex of the desired additional child by number of living children are given in Table 2.8. It was observed that among those with no living children, nearly sixteen percent of the women wanted a child soon (within the next two years) and 2.7 percent wanted a child two or more years later. Among the currently married women aged 15-49 with one living child, 11.1 percent of them wanted an additional child soon i.e. within two years. Most of the currently married women with two living children are either undecided (30%) or do not wish for more children (44.8%). In addition, not more than 5 percent of women desired another child once they attain two or more surviving children.

Figure 6 depicts the fertility preference of all currently married women regardless of the number of the living children. Forty two percent of the currently married women wanted to not opt for more children, six percent desired additional child soon thereafter and , twenty four percent was undecided about the option of having an additional child and 7 percent had undergone sterilization. Six percent of currently women wanting to have an additional child, but they have not taken any decision about timings when to have it.



Among the currently married women having no living children but want an additional child, 55 percent reported that sex of the child did not matter, 34.5 percent said that it is up to God, while 5.9 and 4.6 percent want to have an additional child as a boy and a girl respectively. Among those who had at least one living child and wanted to have another child, the percentage of women who were able to tell about preferred sex of additional child is quite low (12.1% with the preference of a male child and 12.6% preferring a female). With the increasing number of living children, longing for an additional male child becomes more and more magnified from 12.1 percent among the currently married women with one child to 32.9 percent among currently married women with four and above living children. It is interesting to note that the percentage of women with four and above living children reported about the preferred sex of an additional child further decrease in the response categories of "doesn't matter" and "up to God" (Table 2.8).

## 6. MATERNAL HEALTH CARE

Maternal Health Care package of RCH components focused more on ANC under the NRHM/NHM programme. The Maternal health care activities are implemented to strengthen and fulfill the RCH goals. ANC services provided by medical and paramedical professionals comprises of the regular physical checks with weight, height and blood pressure measure, Haemoglobin level test, consumption of IFA, Tetanus (TT) injection and the growth status and position of foetus. These primary services are made compulsory to be provided during the ANC check up from the health facility. At least four checkups are made compulsory to complete the full ANC course in order to prevent and protect women from pregnancy related complication faced during the pregnancy and till the delivery. Janani Suraksha Yojna (JSY) is a scheme which is implemented in the health facilities under the aegis of NRHM/NHM to promote Institutional Delivery and post natal care to prevent from maternal deaths.

## 6.1 ANC by Selected Background Characteristics

In Nagaland 41.8 percent of the women had received at least one antenatal care (ANC) service during the pregnancy of their last birth and in the last three years period preceding the survey. The utilization of the government health facility for ANC care was more than 68 percent as compared to that of private health facility (33.5%) and community based services (0.8 %)( (Table 3.1).

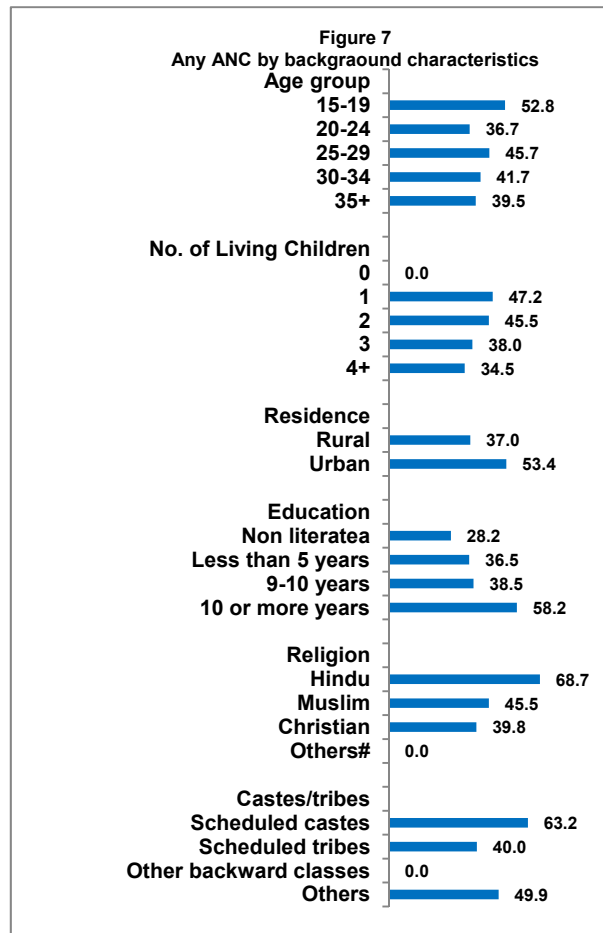
It was observed that any ANC coverage by the selected background characteristics are illustrated in Figure 7. The ANC received among the non-literate are 28 percent as against 66 percent among the women educated for 10 or more years. There was significant rural and urban gap of 16.4 percentage point in availing any ANC, with 53.4 percent among urban residents and 37 percent among rural residents. The Women who had received ANC with one living child was 47.2 percent whereas women with 4 and above living children were 34.5 percent.

The coverage of any ANC was the highest in the District of Mokokchung with (74.2%) and lowest in the District of Kiphire (14.3%). Majority of the women from Mon, Longleng, Mokokchung and Paren districts are availed ANC care from the government health facilities (97.3 to 80.5%), while in Dimapur district, the women are availing ANC from private health facility (53.7%) which was the highest in the state.

The lowest ANC coverage in government health facilities was in Dimapur District (47%). The DLHS-4 data reveals that more women availed from government health facilities for ANC as compared to the private health facilities.

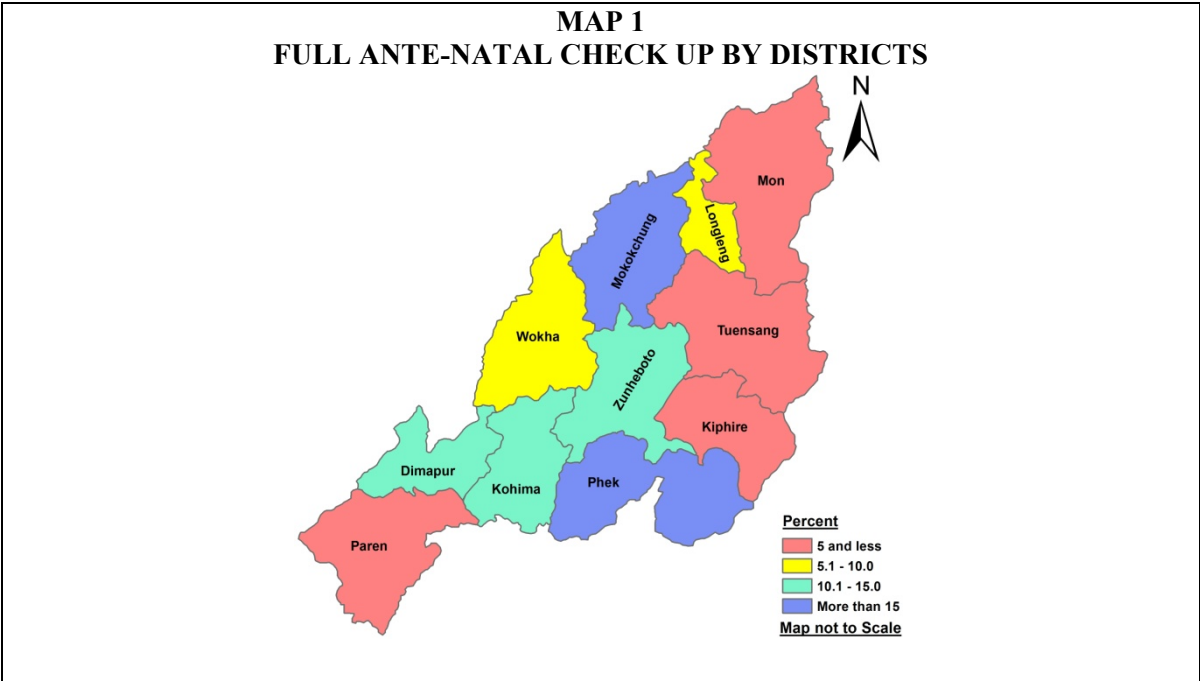
The specific components of ANC checkup which are supposed to be received by the women during the pregnancy were asked to response. The proportion of women who received weight, height and blood pressure

measurement, blood and urine tested, abdomen examined and sonography/ ultrasound test done are 31.7, 12, 31.9, 16.7, 25.9, 18.3 & 14.1 percent respectively, (Table no. 3.3). One important features of ANC check up in Nagaland in case of ultrasound test done is high among women who are having one children than four or more living children (20.5% and 7.5% respectively), having ten years of education (27.4%), in rural-urban residence (23% and 10.4% respectively), and Hindu religion (31.4%). The women from others caste were the highest (24.1%) as compared to all other castes. The detail is shown in Table.3.3.



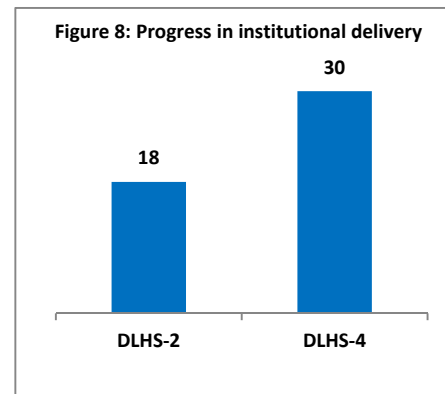
The proportion of women who had received at least three ANC (26.5 %) and the women who had received first ANC in the first trimester of the pregnancy (23.7 %) (Table 3.5 A). The proportion of women who had three ANC are highest among women who have no living children 33.2%), having 10 years and above education (39.5%), urban residence (40.7%), Hindu religion (52%), others caste (43.3%) and age groups between 15 - 19 years (42%). The women who had full ANC (i.e. at least 3 ANC visits with 100+ IFA tablets/ Syrups consumed at least 1 TT) in Nagaland is 9.8 percent. About 31.3 percent of the women had 2 TT+ injections against 11.9 percent who had consumed 100+ IFA tablets/Syrups. The proportion of women who had received full ANC was the highest in Mokokchung (21.3%) district and lowest was 2.8 percent in the Parem District (Table 3.6).

District wise variation in coverage of full ANC was as shown in Map 1. Accordingly the proportion of women who had consumed 100 IFA tablets/syrup and also had received at least one TT injections was 11.9 percent and 39.3 percent respectively in Nagaland during DLHS-4 (Table 3.6).

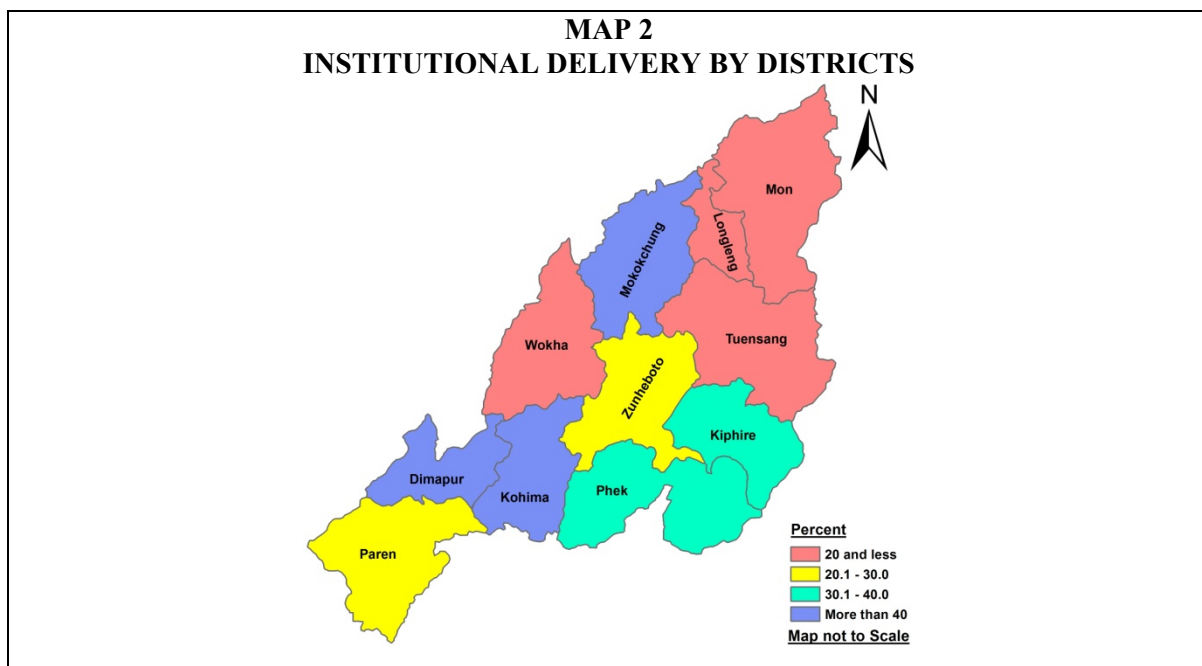


## 6.2 Institutional Delivery

In Nagaland, the institutional delivery increased from 18 percent in DLHS-2 (2002-04) to 30 percent in DLHS-4 (2012-13). The institutional delivery in Nagaland is presented in Figure 8.



About thirty five percent of the deliveries in the three years period preceding the survey which results either in still or live births were in both government and private health facilities, (Table 3.7). The proportion of the women having background of ten years or more education (46%) and having one living child (42%) were going for institutional delivery. The percentage of institutional delivery ranges from 52 percent in Dimapur and 11 percent in Tuensang (Table 3.9). Around 48 percent of the Skilled Birth Attendant (SBA) delivery shows that safe delivery is practiced low down in Nagaland. In home delivery cases (66%) are assisted by skilled persons is only 18 percent. The mean delivery cost in Nagaland ranges from a maximum of Rs.13, 861 in Mokokchung district and minimum is Rs.3017 in Mon District. In Nagaland, out of the 11 Districts, only one district is having the institutional delivery 50 percent and above and in 10 Districts the percentage is varies from 11 to 44 percent which is showing low institutional delivery. District wise variation in institutional delivery is presented in the [Map 2](#).



In Nagaland, 1.3 percent of institutional delivery made use of the ambulance and 20.5 percent via jeep or car/van for transportation of delivery with an average cost of Rs.1,132. The use of ambulance and jeep or car for transportation for institutional delivery was low among women from those coming from the background of having 4 or more children (11.6%), less than five years of education (6.6%) Muslim (14.1%) and Scheduled tribes

(20.1%) women. The mean delivery cost is Rs.6,504 in government health facilities and Rs.15,348 in private health facilities. There is a large variation of institutional delivery cost compares to that of government and private health facilities.

The JSY financial assistance for institutional delivery had benefitted to 39 percent and Home delivery 7.5 percent (Table 3.8). The highest benefitted women for institutional delivery and home delivery are those in the age group of 20-24 years (42.8%), rural residence (47%), having 2 living children (44.6%), Hindu (45.4%) and scheduled tribes 40%.

### **6.3 Complications during Pregnancy, Delivery and Post-delivery Period**

The women who either do not take ANC or take an incomplete course of ANC are exposed to the risk of maternal death. In Nagaland, as much as 33.1 percent women who had still/live births in the three years preceding of the survey had some complications during pregnancy (Table 3.6). Out of the 11 districts, in 5 districts women faced pregnancy complication percentage ranging from 34.4 percent in Kohima to 69.7 percent in Mon. The remaining 6 districts' women faced pregnancy complication ranging from 13 percent in Longleng to 27.7 percent in Mokokchung. Nearly one third of women who had reported complication during pregnancy had sought treatment for the problem in Nagaland (Table 3.15).

Around 19.3 percent of women in Nagaland had faced at least one delivery complication. The main type of delivery complications experienced by women ranged from still or live births in the three years period preceding the survey are mainly obstructed labour (34.4%), premature labour (17.1 %), and prolonged labour (64.7%), excessive bleeding (17.4 %) and convulsion or high Blood pressure (11.9%). The delivery complication was higher among those who had undergone by the method of caesarean (43.2%) compared to that of normal delivery (18.3%) (Table 3.11). In all the districts of Nagaland, Mon district was highest proportion of women who had a delivery complication (44.9 percent) and lowest in Zunheboto (Table 3.15).

The women in Nagaland have low post-delivery complications (13.1%). The major problem during post delivery period was lower abdominal pain (53.3%), high fever (40.2%) followed by excessive bleeding 21.5 percent (Table 3.12). Among the women who had post-delivery complications 32.8 percent had sought treatment (Table 3.15). In all the districts of Nagaland, women sought treatment for post delivery complication with highest in Zunheboto (100 Percent) and lowest in Mon, Kiphire and Longleng (0.0 percent).

## **7. CHILD HEALTH AND IMMUNIZATION**

To promote child survival and prevent infant mortality, NHM/NRHM envisages new born care, breastfeeding initiation, infant food supplementation at the right time and a complete package of routine immunization for children. About 17 percent of newborns during the three year proceedings the survey were examined within 24 hours of birth (Table 4.1). More women of urban residence (24%) educated up to 10 or more years (26%) belonging to Hindu (36%) and Other castes (37%) had received new born care within 24 hours. In Nagaland, who had availed of newborn care from the government health facility constituted 66 percent as compared to 33 percent from private and others (1.5%). There was too much variation in the rural areas in government health facilities (70%) and private health facilities (30%). In

urban areas also found the variation in the government health facilities (62%) and private health facilities (36%). Majority of the women from the Scheduled Tribes has check-up in government health facilities (68%) than in the private health facilities (32%).

Around 59.3 % of children under 3 years of age, (born after January 1, 2008) were fed with colostrums. Highest proportion of children from rural area (61.7%), those who were Christian (61%) and belongs to other caste (63.5%) received colostrum or Khees than their counterparts (Table 4.2).

The Mokokchung district is the highest of children being fed with colostrum (89.8%) and lowest in the Longleng districts (24.8%) (Table 4.5).

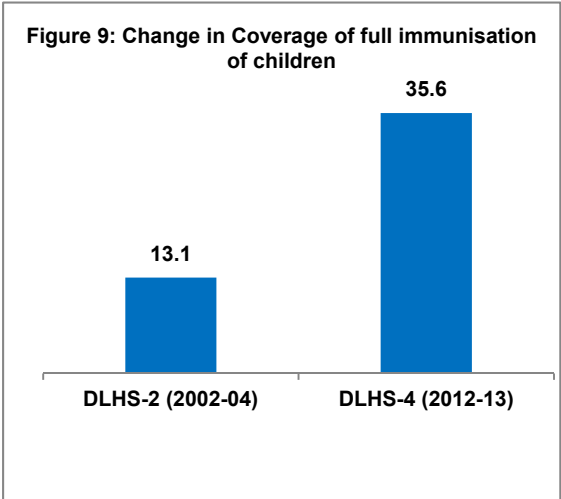
In the state of Nagaland 43 percent of women had initiated breastfeeding within one hour of the birth of the child. Among the women in Mon district is the least practiced of the initiation of breastfeeding within one hour of birth (22%) and most widely practiced in Longleng (80.4%). However, 89 percent of women in Nagaland initiated breastfeeding within 24 hours of birth of their child ranging from 76.6 percent in Dimapur district to 100%in Lonleng (Table 4.5). It was observed that the Longleng district was highest in initiation of breastfeeding within 1 hour and within 24 hours of birth. The proportion of women who initiated breastfeeding within one hour, within 24 hours and after 24 hours of birth to children born in the three year period preceding the survey were 43.2, 88.4 and 7.1 percent respectively.

The duration of exclusive breast feeding practiced was high (among infant under 2 to 5 months old) and ranged from 34.5 to 38.4 percent and it declines as the age increases in Nagaland. The introduction of food supplementation with semi-solid and solid food started between the ages 4 to 5 months along with breastfeeding. As the age increases the percentage of the breast feeding declines and 1.4 percent of children under 24 to 35 months were breast fed along with other fluids, semi solid and solid foods (Table 4.3).

**7.1 Immunization Coverage of Children (aged 12-23 Months)**

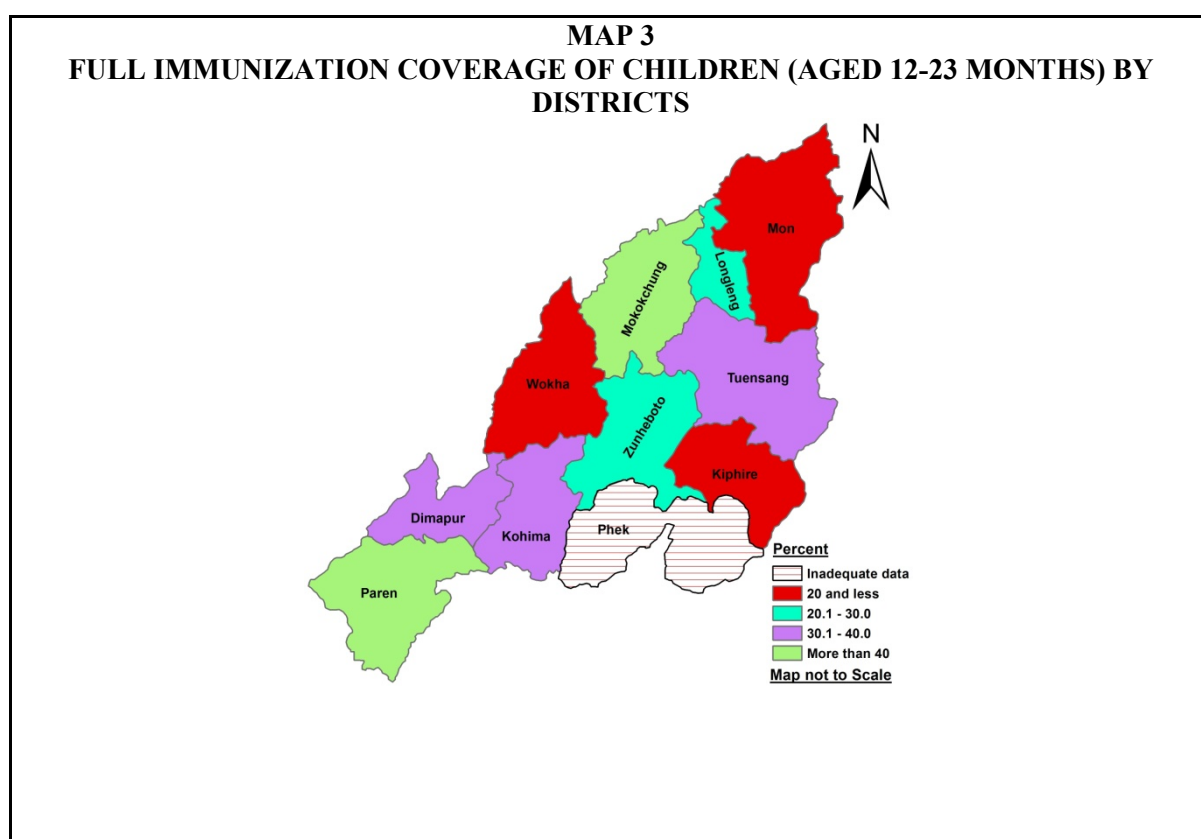
The immunization coverage of children (aged 12-23 months) was recorded either from vaccination card or by asking the mother in case the card was not available. Thirty nine percent of children's immunization was recorded from the cards (Table 4.7). The full immunization coverage was 35.6 percent among children (aged 12-23 months). The full immunization comprises of BCG, three doses of DPT & Polio and measles (Table 4.6). In Nagaland, the coverage of BCG and measles were 61 percent and 49 percent respectively. About 19 percent of children have not received any immunization.

In the districts of Nagaland, the highest coverage of full immunization was in Mokokchung district with 60.6 percent and lowest in Wokha district with 13 percent. Out





of the 11 districts of Nagaland, 4 districts recorded full immunization coverage less than 35 percent whereas 4 districts had more than 35 percent coverage and for the remaining 3 districts coverage could not be imputed because of less number of children aged between 12-23 months (Table 4.7). The coverage of BCG ranges from 41.3 percent in Wokha district to 90 percent in Mokokchung district. The coverage of DPT-3 and Polio-3, except in Wokha district it was (37.3% & 35.3%). In case of measles the coverage fluctuated from 22 percent in Wokha district to 78 percent in the Mokokchung district. The key to improvement in full immunization coverage is to monitor drop out at any stage of vaccination before completion of full course of immunization. Higher proportion of children (38.3%) of women educated up to 10 years and above received full immunization. Non-literate women's children received full immunization by 26.8 percent (Table 4.6). One significant feature in the State of Nagaland was that full immunization coverage of children (aged 12-23 months) in urban areas (35.5%) and in rural areas (35.6%) are almost equal.



With regard to the location of vaccination of children, it was reported that Sub-Health Centre (13%) Primary Health Centre (12.8%), Anganwadi Centre (1.3%) and other government health facility (62.1%) (Table 4.8). District wise variation in the coverage of full Immunization is depicted spatially in Map 3.

It was found that children aged between 9-35 months who received at least one dose of Vitamin-A was 37.6 percent in the State (Table no. 4.9). In Mokokchung district, 79.3 percent of children received at least one dose of Vitamin-A, while in Tuensang, only 18.7 percent children had received Vitamin-A (Table 4.7). Coverage of Vitamin-A in Paren, and

Zunheboto districts are 51 and 79 percent respectively. The remaining districts where coverage of Vitamin-A was below 50 percent.

About 35 percent of children in Nagaland had received Hepatitis-B vaccination. The Children from urban areas (42.2%) was more likely to receive Hepatitis-B vaccination compare to children from rural areas (32.1%).

## **7.2 Management of Diarrhoea and Acute Respiratory Infection (ARI)**

The information on knowledge of diarrhoea and ARI management was collected from women respondents as part of assessment of child care knowledge. Majorities (73%) of women have knowledge of diarrhoea management (Table 4.10) and more than 66 percent of the women were aware of danger signs of ARI (Table 4.12).

The most common practice followed by women for treatment of children who had diarrhoea was to give salt and sugar solution (49.4%), ORS (45.3%), plenty of fluids (30.2%), continue normal food (15.5 %) and continue breastfeeding (7.1%) (Table 4.10). In Nagaland, 44.5 percent children who suffered from diarrhoea were treated by ORS, while 20 percent of them were given some treatment or the other (Table 4.11). Children who had suffered from diarrhoea are almost equally treated in a private health facility (44.3) and in a government health facility (43.1%) (Table 4.11).

In Nagaland, 66.4 percent of women were aware of danger signs of ARI. Among them, 47 percent of women were aware of difficulty in breathing, 33.6 percent knew pain in chest and productive cough 21.6 percent knew wheezing/whistling, 20.7 percent were aware of rapid breathing and 23.6 percent had knowledge of others signs of ARI (Table 4.12).

About five percent children had suffered from ARI in the last two weeks prior to the survey. Out of total children suffering from ARI, 34.6 percent had sought advice/treatment. Majority (54.6%) of children had treatment at private health facility and only 45.4 percent (Table 4.12) went to government health facility.

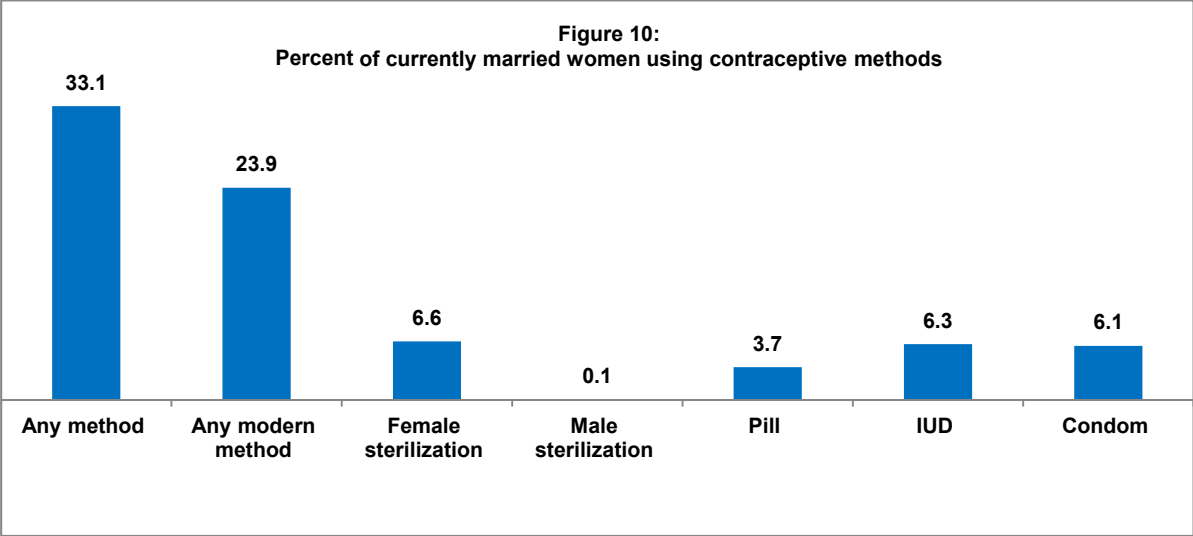
The prevalence of ARI among children varied from 0 percent in Zunheboto, Kiphire and Longleng districts to 8.9 percent in Dimapur district. The treatment seeking for ARI or fever was below 50 percent in majority of the districts except Mon district (Table 4.13).

## **8. FAMILY PLANNING AND CONTRACEPTIVE USE**

Family planning program in India has undergone sea changes in terms of strategies, focus and objectives. Post ICPD 1996 program oriented has evolved itself into a human right framework keeping in mind the central point to reduce the unmet need for family planning. Strategies under NRHM were to create demand for family planning through enhancing child survival and improving maternal health.

There is awareness to the extent of 94 percent about sterilization, but male sterilization to just 7 percent and Condom, known to more than 55 percent of women. More than 27 percent of the women were aware of IUD but the knowledge of Pills was 28 percent. The knowledge of traditional method is more than 45 percent. However new methods on menu of Indian

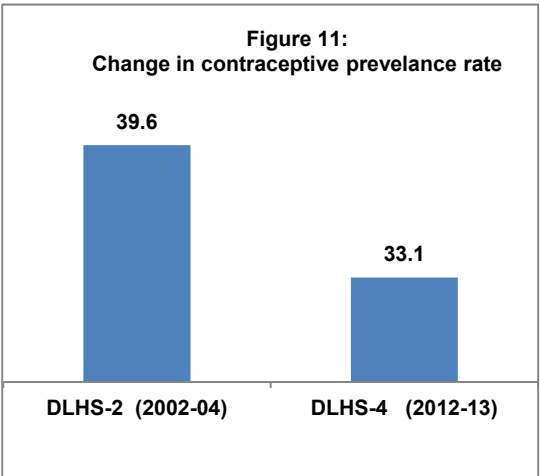
program/or in market like female condom is least known among women with 8 percent. The Female sterilization method is not the predominant limiting method being used by 6.5



percent of currently married women in 15-49 years and popular male oriented spacing or temporary method is Condom having being used by 15 percent of husbands of currently married women. The use of Oral pills and IUD being ever used by 7 and 8 percents of women respectively. Among the currently married women the proportion ever using any modern method is 36 percent, while around half of the currently women ever used either modern or traditional methods. There is no substantial rural-urban difference in the ever use of any modern contraceptive use which is respectively 36 and 38 percent. However, female sterilization among rural women is 6 percent which among urban women with corresponding figures is 9 percent.

The status of current contraceptive use among currently married women or their husband shows that 24 percent of them were using one or other modern method mostly female sterilization (6.6%) at the time of the survey. Use of Condom was only by 6 percent by the currently married women’s husbands. The female sterilizations was less among rural women (5.6%) as compared to urban women (8.7%), non-literate women (5.7%) and 7 percent 10 years or more years of schooling (7%) in Nagaland.

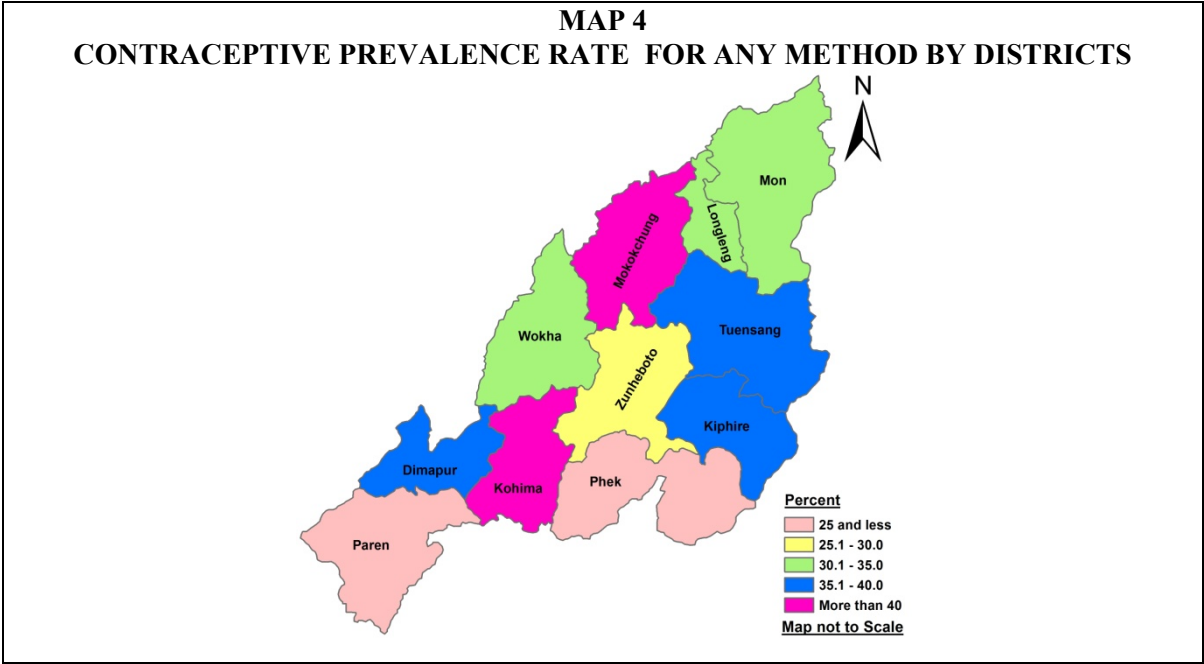
Female sterilization regardless family size was more among currently married women who have one or more living sons compared to those with no living son. Less than one percent of women in 20-24 years, nearly 2.4 percent of women in 25-29 years and about 7.2 percent of women in 30-34 years have been found to have undergone female sterilization at the time of survey. The mean age at the time sterilization is 34 years. Among the currently married women, proportion continuing IUD use for less than 2, 2-3 and more than 3 years was 14, 10.4 and 36 percents respectively. The Oral pill users continuing for more than 6 months



constituted 36 percent of the total pill users and around 20 percent of condom users were continuing for longer periods than 6 months. It must be noted that the use of traditional methods has drastically declined in Nagaland; probably being replaced by more effective method of contraception.

Contraceptive prevalence rate (CPR) for any modern method is above 24 percent in Nagaland, in four districts the average of used of modern methods is below the state average, Zunheboto (19%), Phek (11%), Longleng (22%), Paren (9%). The prevalence of female sterilization in 7 out of 11 districts is less than 6.4 percent.

The use of condom is the least in Mon district (0.7%) and highest in Longleng district (18.4%). The contrast in the source of terminal and temporary methods of contraceptive is that 55 percent of sterilization has been done in government health facility and 24 percent have availed government health facility service for spacing methods. Nearly 16 percent of sterilized women and wives of sterilized men got monetary compensation for sterilization, with variation of no cash benefits in Tuensang district to 32 percent in Mokokchung district of Nagaland. As many as in more than 58 percent of sterilization cases monetary compensation is given at the time of discharge.



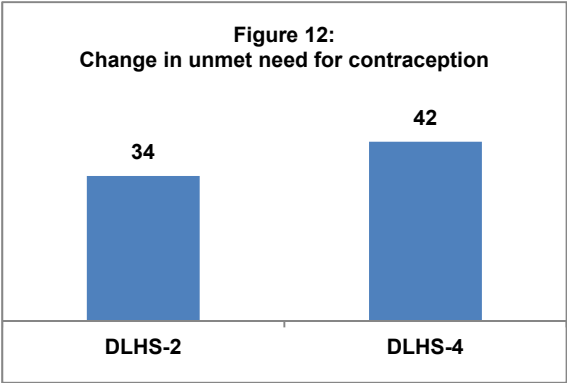
Nearly 12 percent of sterilized women, 24 and 39 percent, users of IUD and Pills were informed about the side effects before the adoption and 10, 4 and 5 percents of women using the aforesaid methods have experienced side effect to their health leading to health issues. Among the currently married women who have discontinued contraception the main reason cited was related to fertility (20.2%) while 21 percent mentioned side effects and 59 percent for various other reasons. For the younger women in the age bracket between 15-29 years the reasons for discontinuation of contraception was primarily fertility related as also one of the reason for women with no or one living children.

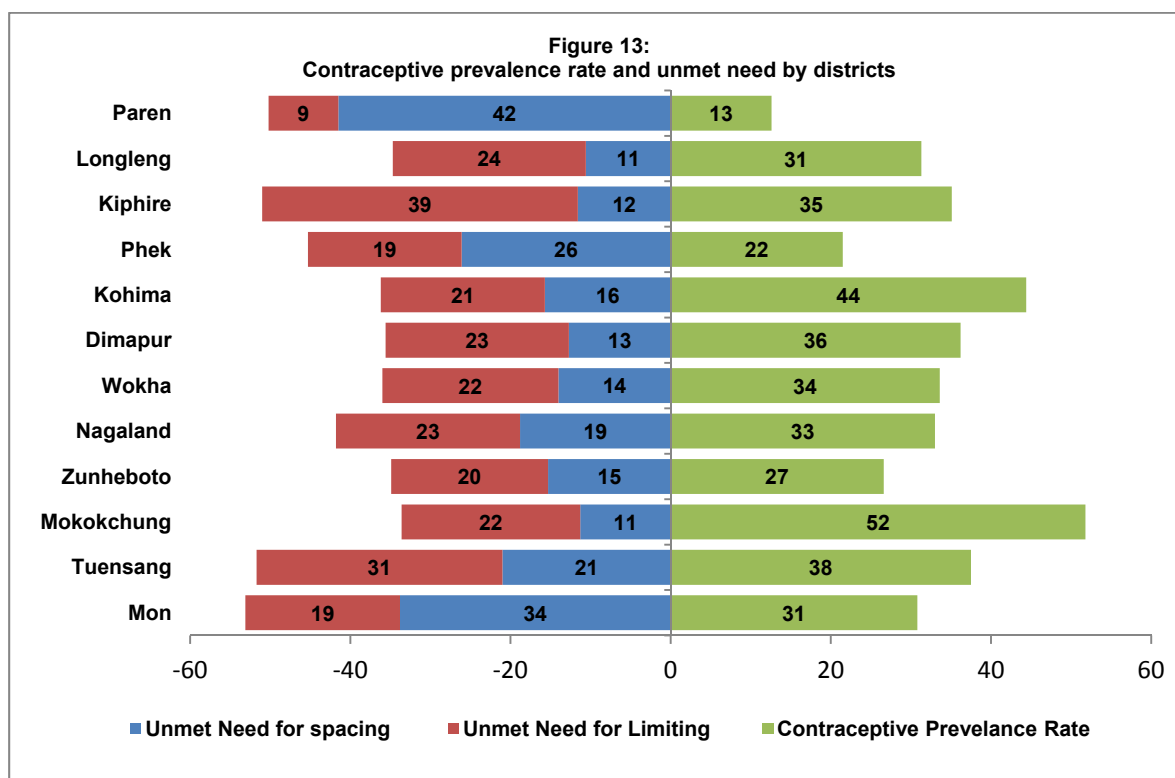
It was observed that about one percent of currently married women aged between 15-49 years, were not using any contraception intended to adopt limiting method and 1.9 percent spacing method in future. Those who intended to adopt either limiting or spacing methods in future within 12 months, after 12 months were still undecided about the timing constitute 15, 29 and 56 percents respectively.

The unmet need for spacing included the proportion of currently married women who are neither in menopause nor had hysterectomy nor currently pregnant and who want more children after two years or later and currently not using any family planning method. The women who are not sure about whether and when to have next child were also included in unmet need for spacing. In Nagaland 19 percent of currently married women have unmet need for spacing. Unmet need for spacing is 29 percent for women with one living child and 43, 41, 29 percents for women aged 15-19, 20-24 and 25-29. On the other hand, currently married women who are still have physiologically potential for conceiving and want no more children are categorized as having unmet need for limiting. The unmet need of contraceptive for limiting is about 23 percent in the state.

Currently married women with unmet need for spacing is highest in Parem (41.5%) and lowest is in Longleng (10.6%). On the other hand unmet need for limiting is highest in Kiphire district (39.4 %) and lowest is in Parem district (8.7%) of Nagaland.

The total unmet need of contraceptive has been increased. It was 34 percent in 2002-04 and in 2012-13 unmet need has increased to 42 percent. District wise contraceptive prevalence rate and unmet need are presented in figure 13.





## 9. REPRODUCTIVE HEALTH

Reproductive health addresses the issues of reproductive processes encompassing, the functions and system at all stages of life. The reproductive health is the ability for the people to have a responsible, satisfying and safe sex life and have the capability to reproduce and the freedom to decide if when and how often to do so. This means that the right of men and women alike are to be informed of and to have access to safe, effective, affordable and acceptable methods of fertility regulation of their choice, and the right of access to appropriate health care services that will enable women to go safely through pregnancy and childbirth and provide couples with the best chance of having a healthy infant. The burden of diseases among women is due to reproductive function and system. The five main causes of the disease burden among women in developing countries are maternal, Sexually transmitted disease, tuberculosis, HIV infection, Depressive disorders. DLHS-4 has obtained information on awareness and prevalence of RTI/STI, HIV/AIDS, information and ways to avoid AIDS.

### 9.1 Menstruation Related Problems

The women reported to have menstruation related problems and have specific symptoms during three months preceding the survey by background characteristics is given in Table 6.1. Menstrual problems are experienced by 4 percent of women in Nagaland. The problems range from painful periods (44%) and irregular period (34%) are the main menstrual problems experienced by women. The other problems reported are frequent or short periods (20%), prolonged bleeding (5.5%) and scanty bleeding (4.4%), absences of periods (6.4%) and blood clots/excessive bleeding (5%). The differentials in menstruation related problems are found by age, place of residences and education of both husband and the women. Women who had consummated their marriage below 18 years of age have had more

menstruation related problems (6%). The menstrual related problems also increased with duration of marriage. Around 5 percent of women had reported to have menstrual problems whose marital duration was 10-14 years and was more than 15 years. The menstrual related problems also differ by religion and caste.

## **9.2 Awareness of RTI/STI**

The awareness of RTI/STI was obtained from ever married women. The women who are aware about RTI/STI were further asked on the modes of transmission and symptoms of the disease. Table 6.2 shows the percentage of women who have heard of RTI/STI by background characteristics. Around fifteen percent of women in Nagaland had heard of RTI/STI. The proportion of women who were aware of RTI/STI was comparatively higher in urban areas (19.5%) than in rural areas (13.1%). Awareness of RTI/STI was lower among old women, women with low age at consummation of marriage, non-literate women, women from Other backward classes and Hindu women. Awareness of RTI/STI increased with education of women. Around twenty nine percent of women who had completed ten or more years of schooling were aware about RTI/STI.

A community leader meeting was the important source of information of RTI/STI for 37 percent of the women in Nagaland. Thirty percent of women reported TV as a source of knowledge of RTI/STI. The other sources of information through which more than half of women were aware of RTI/STI from the print media and health personal, cinema (29%), and school/adult education programs (18%). The sources of knowledge about RTI/STI differed by education of women and husband.

## **9.3 Knowledge Regarding Mode of Transmission of RTI/STI**

The knowledge regarding mode of transmission of RTI/STI was acquired from women who had heard of RTI/STI (Table 6.3). Around 41 percent of women reported unsafe delivery, unsafe abortion (39%), unsafe sex with persons who have multiple partners (58%) and unsafe sex with sex workers (54.5%) as a mode of transmission of RTI/STI. Around one fourth (24%) women reported unsafe IUD insertion and unsafe sex with homosexuals (20%) who were also reported by women as mode of the transmission of RTI/STI. The knowledge varies by residence, age at consummation, education of the women and education of the husband.

Table 6.4 shows the common symptoms of reproductive tract infections/sexually transmitted infections among women. About 12.5 percent of ever married women have reported having symptoms related RTIs/STIs and 2.3 percent of women have experienced abnormal vaginal discharge. The women reported itching or irritation over vulva (2%), pain in lower abdomen not related to menses (3%). About forty five percent of women discussed the RTI/STI related problems with their husband or partner (Table 6.5). The women mostly sought treatment for RTI/STI (52%) from private health facility.

The women who have heard about RTI/STI varies from 4 percent in Peren district to 25.2 percent in Dimapur district. The women reporting any abnormal vaginal discharge varied from one percent in Zunheboto district to 3.8 percent in Dimapur district. More than 25% of

the women in Dimapur and 23.2 percent in Mokokchung had Sought treatment for any RTI/STI including abnormal discharge.

#### **9.4 Awareness of HIV/AIDS**

The awareness on HIV/AIDS was enquired from ever-married women between the aged between 15-49 years. Around 76 percent of the women had heard about HIV/AIDS. The source of knowledge on HIV/AIDS was mainly via community leaders meetings by 59 percent of women, followed by health personnel (41%), print media (37%), school adult education programs (28%), cinema (24%) and radio (14%). Around 15 percent of women reported the source of knowledge from husband, relative/friends and others (Table 6.7). Around thirty nine percent of the women reported unsafe sex with person having many partners, unsafe sex with sex workers (44%), and transfusion of infected blood (56%) as mode of transmission of HIV/AIDS (Table 6.8). The reported modes of transmission of HIV/AIDS differed by residence, education of women and husband.

Table 6.9 shows Knowledge of HIV preventing methods. Around sixty seven percent of women were of the view that HIV/AIDS can be prevented by avoiding risks of getting infected through blood. About twenty nine percent of the women were of the opinion that by using condom correctly during each sexual intercourse and having sex with one uninfected partner (27.4%) can prevent HIV/AIDS. The differences in the preventing HIV/AIDSs were found by residence, age at consummation of marriage, education of women and husband. The misconception about transmission of HIV/AIDS from mosquito, flea or bedbug reported was reported by 21 percent of women. The other misconception was sharing food (3%), stepping on someone's urine/stool (5%), sharing clothes (3%), hugging (1%) and shaking hand (2%) respectively.

The women who had heard about HIV/AIDS were asked the place to test the HIV/AIDS (Table 6.11). Nearly forty one percent of the women know the place where the HIV/AIDS could be tested. The differences in the place of test were found by residence, age at consummation of marriage, education of women and husband. Thirty six percent of women reported to the government hospital/dispensary and twenty eight percent reported private hospital/clinic as a place where people can go to test HIV/AIDS. The women who have heard about HIV/AIDS were asked if they had gone for the test. Twenty percent of women had undergone for HIV/AIDS test. Twenty four percent of the women who had undergone test before a year (Table 6.12). Comparison with district figures Kohima highest (41%) and Longleng (8%) has lowest number of women tested for HIV/AIDS.

#### **10. PERSONAL HABITS**

Personal habits of adults (age 15 and above) such as consumption or abuse of tobacco and alcohol, and eating unhealthy foods are usually viewed from the lens of risk-taking behaviour due to their adverse health outcomes. The emerging morbidity pattern from the personal habits is a crucial predictor of current as well as future health status of a population. It has become increasingly important to understand and examine the impact; these habits have on overall health status in India in the context of the epidemiologic and demographic transitions. Besides, the treatment seeking behaviours for these illnesses reflects the



availability, accessibility, as well as quality of health care services. Studies have shown evidences of correlation between the shift towards non-communicable diseases (NCD) and increasing risk-taking behaviours among adult individuals. For instance, excessive drinking is linked to acute and chronic physical health problems, particularly those related to the heart, blood circulation, respiratory, diabetes, mental health, cancer, crime and disorder, domestic violence, unprotected sex, unintended pregnancy, etc (Room, Baboor, and Rehm, (2005). Alcohol consumption contributes to many diseases and is now the fifth leading risk-factor for the global disease (Lim, Vos, Flaxman, et al, 2012). Also, the economic burden of these NCD is equally serious - i.e., a 10 percent rise in NCDs is found associated with 1 percent lower rates of annual economic growth. However, programmes to combat NCDs were tremendously underfunded, and a low priority policy, as it is not part of the millennium development goals (MDG).

The WHO has recently stated that NCD such as cancer, diabetes, and hypertension are largest causes of death, and by 2020 cardiovascular diseases will be the largest cause of death and disability, including developing countries like India (WHO 2010). In 2012, the UN conference on sustainable development (Rio+20), referred to non-communicable diseases as “one of the major challenges for sustainable development in the 21<sup>st</sup> century”, emphasizing the fundamental link between health and development. In the same year, the World Health Assembly endorsed an important new health goal: to reduce avoidable mortality from non-communicable diseases (NCDs) by 25% by 2025 (the 25 by 25 goal). The future threat to health is from NCDs, as the world also urbanizes faster than before.

Since 1990s India’s overall health status has shown tremendous improvement, which signals a change and shift in pattern of morbidity and causes of death to non-communicable diseases (NCD), despite still substantial contribution of communicable diseases. The NCD accounted for 42 percent of all deaths in India (56% in urban areas and 40% in rural areas), as compared to communicable diseases with 38 percent (RGI, 2003). Estimated prevalence of diabetes, hypertension, ischemic heart diseases (IHD) and stroke is 62.5, 159.5, 37.0 and 1.54 per 1000 respectively. In the National Health Policy (NHP), the Government of India (GOI) has committed to eradicating infectious illnesses and reducing the mortality associated with such illness (MOHFW, 2002). One of the goals of the NHP 2002 is a 50 percent reduction of deaths from TB, malaria, and other vector and water borne diseases by the year 2010.

This chapter presents findings on the personal risk-taking habits, acute and chronic (infectious and non-communicable) diseases, and their treatment-seeking behaviours.

### **10.1 Tobacco and Alcohol Use in India**

Tobacco and alcohol use have been associated with a wide range of major diseases, including several types of cancers and heart and lung diseases. Studies have shown that in addition to sharing the same health risks as men, women who use tobacco or alcohol also experience difficulty in becoming pregnant, are at an increased risk of infertility, pregnancy complications, premature births, low-birth-weight infants, stillbirths, and infant deaths (USDHHS, 2004).

In India, information about tobacco and alcohol use among adults has been collected by various household surveys such as the National Sample Survey (NSSO) (50th round, 1998), NFHS (1992-93, 1998-99, and 2005-06), DLHS (2007-08), the Global Adult Tobacco Survey-India (GATS-India, 2009-10), etc., each survey with specific objectives and methodology. According to GATS India, 35 percent of adults in India age 15 and over use tobacco in some form or the other, with higher use among adults in most North eastern region (39-67%), east (36-50%), and central (40-53%) (IIPS & MoH&FW, 2010).

In India, there are varieties of tobacco products and its use is also very diverse. The most common ways of tobacco use are the smoking and oral (smokeless) variety. Dominant among the smoking form include cigarettes and bidis, while in case of the oral use of smokeless tobacco, chewing or applying to the teeth or gums (scented/unscented, with paan) are the popular forms, which has also become very popular in most parts of the country. The DLHS-4 also collects information related to tobacco and alcohol usage directly from among the eligible adults (women age 15-49 and men age 15-54).

In case of alcohol consumption, household surveys in India show that alcohol use among adults, both men and women, is not uncommon, but the use is found much lesser than tobacco use. Alcohol consumption is higher among men than females. Study in India indicated the prevalence of current use of alcohol ranged from about 7 percent in Gujarat (state officially under prohibition) to a very high 75 percent in Arunachal Pradesh, and its consumption among women exceeded 5 percent only in the Northeastern region. DLHS-4 information on alcohol use by adult men and women comes from a substantial number of respondents (24,311 men and 33,252 women).

## **10.2 Tobacco Use in Nagaland**

As shown in Table 7.1, overall 51 percent of adults in Nagaland use any kind of tobacco in one way or the other. However, tobacco use varies across the state by age, residence, education, region, etc. The survey clearly indicates that tobacco use is highest and more likely among men (68%), older persons age 25 plus (over 60%), people with higher education (58%), rural residents (52%), and among schedule tribe (52%), etc.

In Nagaland, the adults are using more of the oral form (smokeless variety) of tobacco (49%) as compared to the smoking form (18%). Use of smoke tobacco is higher among men (35%) as compared with females (1%), in rural areas (19%) and also more likely to be higher among the adults age 25 and above (over 20%), and those with higher education, and also among the castes (20%).

In general, it is observed that in Nagaland use of tobacco among adults increases with age and educational status. The pattern of using tobacco among adults also differs hugely and shows an interesting scenario across the districts in Nagaland. Of the 11 districts in the state, two districts, namely Kohima and Kiphire stand out as lower use of tobacco in the state (Table 7.4). Reporting of use of oral or smokeless form is highest in Tuensang (62%), followed by Longleng (58%). In case of smoking form of tobacco the use among adults ranges from 13 percent in Kohima district to 32 percent in Mon district. Other districts in

which at least one-fifth of adults are likely to smoke are Tuensang, Kiphire, Longleng, and Paren.

The use of tobacco (all forms) among men is substantially high in Nagaland – 64 percent for oral or smokeless and 35 percent for smoking. It is interesting to note that both forms of tobacco use is the lowest among teenagers (40% for smokeless & 11% for smoking), but increases sharply from age 20 onwards (among the youth) to older ages. Tobacco use is more common among men in rural areas (66% for smokeless & 36% for smoking) than urban males (60% for smokeless & 32% for smoking), although the urban-rural gap is not so wide. Among men also, age and education do not emerge as important factors. Among men, age and education do not emerge as important factors. Among males aged less than 20 years, a substantial proportion uses tobacco products (40% for smokeless & 11% for smoking). For all other age groups also the use of tobacco in both forms is substantially high. Similarly, as education level increases use of tobacco in any form is more likely to increase among men. The more educated males are more likely to use tobacco than their counterparts who are illiterate. In case of smoking, there is not much difference observed with increase in the education level of men (Table 7.2).

In Nagaland, about 34 percent of adult men use tobacco with paan, and 6 percent with guthka/paan masala and another 24 percent use others form of tobacco. Use of paan with tobacco among men is higher in rural areas (35%), while use of guthka/paan masala with tobacco is higher in urban areas (Table 7.5). In the case of smokers, more of rural men (12%) use this form, higher by about 2 percent, than those in urban areas (10%). About 11 percent of men are usual smokers (smoke at least once a day) in Nagaland. The proportion of occasional smokers is 25 percent in rural areas as compared with 23 percent in urban areas (Table 7.6).

Generally, use of tobacco is found to be very less among women, more so when compared with men. However, in Nagaland (Table 7.1), a substantial proportion of adult women (more than one-third) reported using any kind of tobacco (35%). Among the women tobacco users, while only about one percent smoke, a substantial proportion of them (35%) use the oral form or chew tobacco (Table 7.3).

The pattern of tobacco use observed among women is similar to that found among men. For instance, majority of women tobacco users prefer the non-smoke form As presented in Tables 7.3, women tobacco users are mostly to be over age 20 and those with higher education. Clearly, age and education do not play an important role in influencing such personal habits in Nagaland. Among those women who use non-smoke form/chew tobacco, about 17 percent use it with betel nut or paan, while 15 percent use other forms of tobacco (Table 7.5). Among women who smoke, just one percent are usual smokers (smoke at least once a day) (Table 7.6).

### **10.3 Use of Alcohol in Nagaland**

Household surveys in India show that alcohol use among adults, both men and women, is not uncommon, but the use is found much lesser than tobacco use. Alcohol consumption is higher among men than women. Study in India indicated the prevalence of current use of

alcohol ranged from about 7 percent in Gujarat (state officially under prohibition) to a very high 75 percent in Arunachal Pradesh, and its consumption among women exceeded 5 percent only in the Northeastern region. DLHS-4 information on alcohol use by adult men and women comes from a substantial number of respondents (11,144 men and 11,145 women).

As presented in Table 7.1, in Nagaland 22 percent of adults consume alcohol. In the state, the level of consumption is found much higher among males (40%), adults age above 25 (more than 25%), people with 10 or more years of education (28%), and highest among scheduled tribe (22%). Like use of tobacco, education does not make much impact as an important factor on alcohol. It was observed that use of alcohol was higher among people with 10 or more years of education. The level of alcohol consumption by religious affiliation shows that the least consumption is among 'Others' (12%) and highest among Hindus (23%).

In Nagaland, alcohol consumption across the districts shows that of the 11 districts, only in 3 districts the level is less than 20 percent (Table 7.4). The prevalence of alcohol use across the state ranges from 11 percent in Mokokchung to about 40 percent in Mon district. Consumption of alcohol is found high in districts such as Zunheboto (25%), Phek (28%), Longleng (26%) and Paren (28%).

In Nagaland, consumption of alcohol is found more concentrated among males (40%), about ten times higher than among females (Table 7.2). Men who are more likely to consume alcohol are those in the ages between 25 and 44 years (above 50%), with higher education (44%), who follow Hinduism (43%) and scheduled tribes (40%). The reporting of consumption of alcohol is seen among the teenagers (15%). Interestingly, very small difference is observed in consumption of alcohol among men by residence.

Only about 5 percent of adult females reported consuming alcohol in Nagaland (Table 7.3). The consumption of alcohol increases by age and education among women in Nagaland.

## **11. MORBIDITY STATUS**

In DLHS-4, for the first time, information on morbidity status of the household members was collected from the household respondent. The main objective is to get a somewhat fair idea about the prevalence of both acute illnesses (suffered for a week) and chronic illnesses (for a month or more), including disability (current) and injury (in last one year), suffered by any household member prior to the survey. Respondents were asked about occurrences of such illnesses among the household members, and to name the illness, including those diagnosed. Further, in case of occurrence of any disability, injury or illness, respondents were also asked about the nature of care sought, the type and place of health facility where treatment was done.

Depending on the nature and duration, all the illnesses or diseases are classified as (a) acute, and (b) chronic. Acute illness refers to those that occur suddenly with severe symptoms for short period during the last 15 days prior to the survey. Example includes diarrhoea, dysentery, acute respiratory tract infection (ARI), jaundice with fever, fever with chill/rigors/malaria, fever with rash, reproductive tract infections (RTI), etc. In case of

chronic illness, those symptoms that persist for longer than one month in the past one year prior to the survey. The list provided includes both symptoms and associated diseases categories.

### **11.1 Disability and Injury**

From each of the selected household, DLHS-4 collected information from the head of the household or adult respondent on any injury and on five specific disabilities that household members may have suffered from such as mental, visual, hearing, speech, and locomotor. As it is difficult to capture the type of injury and its severity from lay reporting, assessment is made indirectly from the type and duration of hospitalization required for the injury.

As presented in Table 7.8, in Nagaland about 3 percent of the sample population reported suffering from any injury. The prevalence of any injury is a little higher in the rural areas (4%) compared to urban areas (2%). The prevalence of any injury shows little variation between males and females in the state.

About 2 percent of the injuries reported were treated in intensive care. However, 6 percent of injuries were treated as in-patient with stay for less than a week, and 4 percent reported they treated as in-patient with stay for more than 2 weeks. Interestingly, in Nagaland, about 86 percent of injuries were treated using other form of treatments, i.e. other than intensive care or staying/in-patient, such as out-patient, traditional healers, or home remedies. More of females go for other treatments (90%) as compared with males, while men are more likely to be treated in intensive care or as in-patient with stay more than 2 weeks. Rural residents have accessed more (88%) the 'Other' treatments than urban residents (80%) for the treatment of any injury.

In Nagaland, among the five disabilities, the prevalence of hearing disability is a little higher (1.4%) as compared to other disabilities. Reporting of hearing disability is also found higher in males (1.6%) than females (1.1%), and in rural areas (1.6%) than in urban areas (0.7%). Mental, visual and speech disabilities are the other disabilities reported in Nagaland (0.1%, 1.1% & 0.1% respectively). The prevalence of all disabilities is higher in rural areas (Table 7.9).

### **11.2 Reported Illnesses: Acute and Chronic**

In order to assess the prevalence of illnesses from the selected household level in DLHS-4, the household respondents were first asked if any member of their households had suffered from any illness in the past one month or year. If reported that someone had suffered, more detail of the illness recorded, including main source of treatment. As mentioned earlier, all the illnesses are classified into (a) acute and (b) chronic, based on the nature and duration, and the information is collected from head or any adult member of the household.

#### **Acute Illnesses**

The prevalence of acute illness at the household level in Nagaland is 7.1 percent. The differential in the prevalence of acute illness by residence show marginal variation.

About 7 percent of household members reported suffering from any acute illness in Nagaland, and more of women (7.5%) than men (6.8%) reported to have suffered from any acute illness. Among the prevailing acute illnesses, fever (other than those with rash or jaundice) is reported by nearly 35 percent, followed by fever with rash and diarrhea/dysentery (around 13% each) and malaria (9%). Prevalence of acute illnesses is also found higher in rural areas, barring ARI and fever (other type of fever).

Nearly 86 percent of those who had suffered from any acute illness sought treatment. Among those who had sought treatment, 26 percent preferred treatment at government facility, mainly in hospital (12%). About 23 percent of those who had acute illnesses got treated in a private facility, mainly in a hospital (12%), followed by a dispensary/clinic (10%). Interestingly, about 37 percent with any acute illnesses were treated at DOTS centre or at home. In Nagaland, use of 'Other' facilities for treatment of acute illness was quite common even in rural areas (40%), and more or less equally accessed by both males and females.

### **Chronic Illnesses**

Survey results of chronic illnesses described pertain to prevalence, type, and source of treatment by sex and residence. In Nagaland about 2 percent of the households reported a member suffering from chronic illnesses that lasted for over a month in the past one year prior to the survey (Table 7.8). The prevalence of chronic illnesses is higher in urban areas than rural areas and shows no variation between males and females. As shown in Table 7.13, reporting by symptoms of chronic illnesses suffered by household members is highest for diseases of the gastrointestinal system (13%), followed by diseases of respiratory system (11%), eye problem (8%) and musculoskeletal system (7%). Interestingly, reporting of symptoms of chronic diseases other than the nine identified diseases account for 34 percent.

In Nagaland, not much differences observed in the reporting of symptoms of chronic diseases between males and females, except in case of some diseases. For instance, more males reported symptoms related to skin diseases (5% against 4% among females) and eye problem (9% against 7% among females). In contrast, females reported more of symptoms related to disease of gastrointestinal system (15% compared to 10% among males) and genitourinary system (5% against about 4% among males).

Interestingly, most of the chronic illnesses show higher prevalence in urban areas. However, some of these chronic illnesses show slightly higher prevalence in rural areas. For instance, rural residents reported more about skin diseases (6%), eye problem (10%) and mouth and dental problem (7%) than urban residents. In case of rural areas, much higher reporting related to diseases of musculoskeletal system (14%), gastrointestinal system (11%), and skin (5%) is observed.

Household respondents were also asked about the nature and source of treatment for chronic illnesses suffered by any of their household member. In Nagaland, only 51 percent of those who suffered from chronic illnesses have details of the diagnosis or treatment. About 18 percent have no details of the diagnosis or treatment, and about 31 percent have not sought treatment at all. The statistics for not seeking treatment (38%) is more in the rural areas as

compared to urban areas (20%), while proportion with no details of treatment (20%) is higher in urban areas. Overall, 45 percent of rural residents and 60 percent of the urban residents have details of diagnosis or treatment for the chronic illnesses. The proportion having details of treatment is higher among females than males (Table 7.13).

Interestingly, in Nagaland most people who suffered from chronic illnesses sought treatment at private facility (64%), even among rural residents (55%), and the proportion is 75 percent among urban residents. About 34 percent were treated at government facility (42% in rural areas and 24% in urban areas), while one percent reported being treated at home, and less than one percent sought other form of treatment.

Persons who sought treatment for chronic illnesses were also asked about the details of the diagnoses at the facility. In Nagaland, diabetes and asthma or chronic respiratory failure (around 5% each) are the most commonly diagnosed chronic illnesses, followed by hypertension and diseases related to heart (around 4% each). Goitre accounts for about one percent of the diagnosed chronic illnesses, and about 3 percent with tuberculosis (TB). As expected, the proportion diagnosed with these chronic illnesses is much higher in urban areas, particularly hypertension, diabetes, and tuberculosis. The results show that more females suffered from asthma or chronic respiratory failure (5% against 4% among males), while men are more suffered from diseases related to heart (5% against 3% among females).

Contrast to situation in the general population, among the older persons age 60 and above the prevalence of most chronic illnesses is little higher. For instance, about 5 percent of older persons were diagnosed with hypertension, 6 percent with diseases related to heart, and about 7 percent each with diabetes and asthma or chronic respiratory failure (Table 7.15). The prevalence of some of these chronic illnesses indicates that higher proportion of older persons in urban areas suffered from hypertension (8% as compared with 4% in rural areas), diabetes (16% against 3% in rural areas) and tuberculosis (7% against 2% in rural areas). Similar to the situation in the general population, among the older persons also it is found that more females are diagnosed with diabetes (9% as compared with 5% among males). More of male older persons are diagnosed with asthma or chronic respiratory failure, TB, and stroke, which are found to be similar in both urban and rural areas.

### **11.3 Tuberculosis (TB)**

Tuberculosis has re-emerged as a major public health problem in many parts of the world, often as a concomitant illness to HIV/AIDS. Tuberculosis, once known as the ‘White Plague’, is contagious and spreads through droplets that can travel through the air when a person with the infection coughs, talks, or sneezes. Today, TB is a leading cause of death among people who are HIV-positive. Worldwide, an estimated one-third of the nearly 40 million people living with HIV/AIDS are co-infected with TB. In most developing countries, TB would continue to be a serious health threat even in the absence of HIV/AIDS due to the public health challenges posed by poverty, high illiteracy, and poor sanitation. The GOI has stated that ‘In 2005, a total of 97 percent population was covered under the Revised National Tuberculosis Programme.’ The government allocated Rs. 680 crores for the National Tuberculosis Control Programme (NTCP) in the 10th Plan (DGHS and WHO, 2005).

In Nagaland, about 3 percent of the household population diagnosed with TB, which is found higher among males and in rural areas.

## 12. NUTRITION AND HEALTH

The DLHS-4 collected data on the nutritional status of children by measuring the height and weight of all children under age five in the selected households. The nutritional status assessment helps to identify sub groups of child population that face increase risk of faltered growth and potential health risks and vulnerabilities. The nutritional status of children in the survey population is compared with WHO child growth standards, which are based on an international sample of ethnically, culturally and genetically diverse healthy children living under optimum condition that are conducive to achieving a Child's full genetic growth potential (WHO, 2006)<sup>1</sup>. These standards can therefore be used to assess nutritional status of children all over the world, regardless of ethnicity, social and economic influence and child feeding practices. Accordingly, three standard indices of physical growth that describes the nutritional status of children are height-for-age (stunting), weight-for-height (wasting) and weight -for-age (underweight). Each of these indices provides different information about growth and body composition that can be used to assess nutritional status.

In DLHS-4, all children listed in the household, who were born in year 2008 or later were eligible for measurement of their height and weight. Thus, height and weight measurements were collected even from those children whose mothers may not have been interviewed in the survey. For this purpose, all the survey team carried with them two scales and two height boards, which were standardized in all aspects and calibrated for accuracy. Recumbent length was recorded for children under age two years. Standing height was measured for all other children. Table 8.1 represents percentage of children below age five classified as malnourished according to three anthropometric indices of nutritional status (height for age, weight for height and weight for age) by some selected background characteristics. The analysis is based on information collected from 2088 children from Nagaland for whom complete and erodible anthropometric and age data are available.

### 12.1 Height-for-Age (Stunting)

Height-for age measures linear growth. A child who is more than two standard deviations below the median (-2SD) of the WHO reference population in terms of height-for-age is considered short for his or her age are stunted. This condition reflects the cumulative effect of chronic malnutrition. If a child is below three standard deviations (-3SD) from the reference median, he or his is considered to be severely stunted. In Nagaland, 40 percent children under age five are stunted and 20 percent are severely stunted. Variation in the prevalence of stunting by age group shows that stunting is highest (65%) in children age 19-24 months, followed by those in age 25-35 months and above 36 months (49 and 42% respectively) and the lowest (4%) in children below age 6 months. Prevalence of sever stunting shows a similar pattern, with the height proportion of sever stunting in children age 19-24 months (48%), followed by among those age 25-35 months (26%). Sex differential in

---

<sup>1</sup> World Health Organization (WHO) Multicentre Growth Reference Study Group. 2006. *WHO Child Growth Standards: Length/Height-for-Age, Weight-for-Length, Weight-for-Height and Body Mass Index-for-Age: Methods and Development*. Geneva, Switzerland: WHO.



the prevalence of stunting is pronounced as male children are less likely to be stunted (36%) than female children (44%).

The sex differential remains by and large the same even in case of severe stunting. Children under age five belongs to Muslim family and coming from scheduled tribes and other caste families are more likely to be stunted than others. The prevalence of stunting is not uniform across different districts in Nagaland. Stunting is the lowest in Phek district (15%) followed by Mokokchung (27%). While, the prevalence of stunting is the highest in Tuensang, Kiphire (50% each) followed by Wokha (45%). Severe stunting is the lowest in Phek (4%), on the other hand, Kiphire (29%) portrays the highest prevalence even in case of severe stunting.

### **12.2 Weight-for-Height (Wasting)**

Weight-for-height describes the current nutritional status. A child who is more than two standard deviations below (-2SD) the reference median for weight-for-height is considered to be too thin for his or her height, or wasted. This condition reflects acute or recent nutritional deficit. As with stunting, wasting is considered severe if the child is more than three standard deviations below the reference median. Overall 11 percent children in Nagaland are wasted and 5 percent are severely wasted. Analysis by age group shows that wasting ranges from a minimum 6 percent in children age 13-18 months to the maximum 25 percentage in age 0-6 months. Wasting is not so much pronounced by sex differential. Children from other caste are more likely to be wasted (23%) than their counterpart. Variations by district portray that wasting in children ranges from 3 percent in Mokokchung to 34 percent in Mon.

### **12.3 Weight-for-Age (Underweight)**

Weight-for-age is a composite index of weight-for height and height-for-age. Thus, it does not distinguish between acute malnutrition (wasting) and chronic malnutrition (stunting). A child can be underweight for his age because he or she is stunted, because he or she is wasted, or both.

Table 8.1 reveals that 26 percent of children under age 5 are underweight and 8 percent are severely underweight. The proportion of underweight children is the highest (39%) among children age 19-24 months and the lowest (4%) among children under age 6 months. The proportion of underweight among children varies by sex of child and residential difference. Rural children are little bit more likely to be underweight (26%) than the urban children (23%). Children from scheduled caste are relatively more likely to be underweight than other caste/tribes. By districts, underweight in children ranges from 47 percent in Longleng to 10 percent in Phek.

### **12.4 Body Mass Index of Women**

In many countries, chronic energy deficiency characterized by BMI of less than 18.5 among adults remains the predominant problem, leading to low productivity and reduced resistance to illness. Prevalence of overweight among women is also growing problem in developing countries. Overweight individuals are predisposed to a wide range of health problem

including diabetes and heart diseases and also poor birth outcomes for pregnant women. The BMI is used to measure thinness or obesity. It is defined as weight in kilograms divided by height in meters squared (Kg/m<sup>2</sup>). A BMI of less than 18.5 is used to define thinness or acute under nutrition. A BMI of 25 or above usually indicates overweight and a BMI of 30 or above indicates obesity.

In DLHS -4, height and weight measurements in Nagaland were obtained for 4679 women age 15-49 who were present in the sample households at the time of survey. Table 8.3 presents percentage of women age 15-49 by their BMI. The mean BMI is 22.4, which falls in the normal BMI classification. Over seven-tenths (76%) of women age 15-49 have a normal BMI, 13 percent are undernourished or thin (BMI less than 18.5) and 11 percent are overweight or obese (BMI 25 or higher). It is evident from the table that there is profound variation in BMI by some selected background characteristics of women. Women age 15-19 are more likely to be thin or undernourished (28%) than women in other age cohorts. There is no variation has been found to be thin or undernourished by place of residence, whereas urban women are about twice likely to be overweight or obese as compared to rural women (8 and 15% respectively). Educational attainment doesn't show any uniform relation with the proportion of thin or undernourished women. It ranges from minimum 10 percent to maximum 14 percent. Among women who are non literate, nearly one-eighth of them (13%) are thin or underweight. The pattern gets changed in case of proportion of women who are overweight or obese (Table 8.3). Women from others tribe/caste households, having larger potential to have food insecurity, are much more likely to be thin in comparison to those from households from other caste-groups. Proportion of women who are thin or underweight is not uniform across districts of Nagaland. It ranges from the minimum of 6 percent in Paren to 22 percent in Mokokchung and Kiphire. On the other hand, proportion of women who are overweight or obese is the highest in Dimapur (21%) and lowest in Kiphire (0.5%).

### **12.5 Prevalence of Anemia**

Anemia, characterized by a low level of hemoglobin in the blood, is major health problem in developing countries, especially among young children and pregnant women. Anemia among pregnant women may be an underlying cause of maternal mortality, spontaneous abortion, premature births, and low birth weight. The most common cause of anemia is inadequate dietary intake of nutrients necessary for synthesis of hemoglobin, such as iron, folic acid, and vitamin B12. Anemia also results from sickle cell disease, malaria, and parasitic infections (Benoist et al. 2008)<sup>2</sup>. It is against this background, a number of interventions have been put in place to address anemia in children in developing countries. These include expanded distribution of iron supplements and deworming medication to children age 1-5 every six months.

In DLHS-4, all the usual residents of the selected households including children age 6-59 months were included in the anemia testing, where blood drops were collected using dried

---

<sup>2</sup> Benoist, B. D., E. McLean, I. Egli, I., and M. Cogswell (eds.). 2008. *Worldwide Prevalence of Anaemia 1993–2005: WHO Global Database on Anaemia*. Geneva, Switzerland: World Health Organization

blood spot (DBS) method and tested in designated laboratories. The process of blood collection consists of obtaining blood droplets by pricking in the middle or ring finger with a retractable and non-reusable lancet. Before pricking, the finger was cleaned with a swab containing 70 percent isopropyl alcohol and allowed to dry. In case of those children where blood droplets were not possible from middle or ring finger, heel pricking was practiced and DBS were prepared.

Table 8.5 shows the anemia status of children age 6-59 months by some selected background characteristics. Over three-fifth (61%) of children age 6-59 months suffer from some level of anemia (Hb <11.0g/dl), 21 percent of children have mild anemia and 37 percent have moderate anemia (Hb 7.0-9.9g/dl). Over 4 percent of children age 6-59 months have severe anemia (Hb <7.0 g/dl). The prevalence of any anemia does not vary significantly by place of residence and sex of the child. Children belong to Christian religion are less likely to suffer from anemia than other religious group. Of course, scheduled castes' children are comparatively more likely to suffer from any anemia than those from other caste-groups (79%).

In Nagaland prevalence of any anemia among school going population age 6-19 years is around 48 percent. The proportions of school going population age 6-19 years who suffer from mild and moderate anemia are 20 and 25 percent respectively. The pattern is decline in any anemia with increasing age is linear in nature with the maximum (52%) among those in the age-group 6 to 10 years and minimum (44%) in those age 17-19 years. Female children and those living in rural areas are more likely to be anemic (Table 8.6).The prevalence in anemia also declining linearly with increasing years of schooling, from 57 percent among non literate to 43 percent among those having 10 or more years of schooling. Even school going population age 6-19 years from scheduled castes family are also more likely to be anemic.

Prevalence of anemia declines further in case of adult population age 20 years and above. It is evident from Table 8.7 that about two-fifth (44%) of adult age 20 years and above are anemic in Nagaland. Adult women are 1.3 times more likely to be anemic than their male counterparts. On contrary to the school age population (age 6-19 years) adult's population portrays an increasing prevalence of anemia with increasing age groups. The pattern in increasing in prevalence of anemia remains the same among adult men but not for women. Rural adults (age 20 years and above) are slightly less likely to be anemic than their urban counterparts. Increasing years of schooling shows linear decline in the prevalence of anemia for men and women both. Scheduled castes portrays a distinct pattern with relatively higher prevalence of anemia even among adult age 20 years and above, which may have definite implication for the food security scheme in the state.

It was observed that the Prevalence of anemia among pregnant women poses much sever health consequences and may be an underlying course of maternal mortality, spontaneous abortion, premature births and low birth weight, Table 8.9 presents the percent of pregnant of women age 15-49 classified as having iron-deficiency (anemia) by degree of anemia and some selected background characteristics.

In Nagaland, it is also evident from the table that almost half (54%) of pregnant women are anemic. About one-six of them have mild anemia (18%), 30 percent have moderate anemia and 7 percent have severe anemia. Pregnant women in Nagaland who are younger in age (specifically age 15-19), those living in urban areas and coming from scheduled castes households are more likely to be anemic.

## 12.6 Prevalence of Diabetes

Diabetes has serious consequences for individuals and poses a large burden on health services, especially in developing countries. According to the International Diabetes Federation (IDF), diabetes poses a daunting challenge to the sustainable development of the nation, as almost every tenth adult in India is estimated to be affected by either diabetes or pre-diabetes (IDF 2011). The latest global figures on diabetes, released by the International Diabetes Federation (IDF), has raised a serious alarm for India by saying that nearly 52% of Indians aren't aware that they are suffering from high blood sugar (IDF, 2011)<sup>3</sup>. In DLHS-4, women and men age 18 and older in the selected households were eligible to have their blood glucose level tested. The blood glucose was measured using portable glucometer namely SD code free, where blood droplets were obtained by pricking in the middle or ring finger with a retractable and non-reusable lancet. Before pricking, the finger was cleaned with a swab containing 70 percent isopropyl alcohol and allowed to dry. In the process, the first two drops of blood were wiped away and third drop was drawn into the glucose strips.

Table 8.10 and 8.12 present data on random blood glucose values for men and women age 18 and above from the sample households included in 2012-13 DLHS-4. Data shows that 5 percent of men age 18 and above and 4 percent of women age 18 and above in Nagaland suffer from diabetics as the level of blood glucose among those have been 160mg/dL or higher. Another 7 percent of men and women age 18 and above in Nagaland are pre-diabetic. However, over four-fifth of men as well as women have normal level or even lower level of blood glucose.

Prevalence of diabetes increases linearly with increasing age among men as well as among women age 18 years and above. Men aged 60 and above are over 4 times more likely to suffer with diabetes as compared to those in the age-group 18-29 years. The pattern remains by and large same even among women age 18 years and above, one percent in the age group 18-29 years and 10 percent in age 60 years & above (Table 8.12). There is no differential has been found to be diabetic by place of residence. Non-literate men and women are more likely to suffer from diabetes than those who have ever attended schools. The level of diabetes prevalence cuts across religion group, which may have implication for the differences in life style and food habits. Adult men and women in Hindu, religion are more likely to suffer from diabetes than their counterpart. Though cast differentials in prevalence of diabetes is not profound. Tables (8.11 & 8.13) present variation in the prevalence of diabetes among adult men and women age 18 years and above across different districts of Nagaland. Among districts, men in Mokokchung and Phek have the highest prevalence of diabetes ( 8% each ) followed by Kohima (7%). On the other hand, men in Tuensang (0.8%)

---

<sup>3</sup> International Diabetes Federation (IDF). 2011. *Diabetes Atlas, 5th edition*. Brussels, Belgium: IDF

have relatively lower prevalence of diabetes among different districts of Nagaland. The pattern remains by and large the same even if we analyze the prevalence of diabetes among adult women in different districts of Nagaland. The prevalence is the highest among adult women in Paren district (7%) followed by Mokokchung and Wokha districts, (6 % each) and lowest in Tuensang (1.4%).

### **12.7 Prevalence of Hypertension**

Blood pressure rises and falls throughout the day. When blood pressure stays elevated over time. It is called high blood pressure. The medical term for high blood pressure is hypertension. Raised or high blood pressure acts as one of the contributing and intermediate risk factors for developing coronary heart disease, stroke, and kidney disease. The measurements taken for blood pressure in DLHS-4 were not intended to provide a medical diagnosis of the disease but rather to provide a cross-sectional assessment of the prevalence of high blood pressure in the population at the time of the survey. Although the results of the blood pressure measurements are regarded only as a statistical description of the survey population, they provide insight into the size and characteristics of the population at risk for hypertension. The DLHS-4 is used Ross Max AW150 blood pressure monitor model; the automatic device included separate cuffs for measuring blood pressure in respondents with small, medium and large arm circumferences. Interviewers were adequately trained to use this device according to the recommended protocol. Two health investigators were included in each team for data collection.

Two measurements of both systolic and diastolic blood pressure were taken during the survey at approximately ten minutes interval and the average measurement was used to report respondent's blood pressure values. Tables 8.14 and 8.16 present the information on blood pressure values for men and women age 18 years and above by some selected background characteristics. In the table the blood pressure level has been defined into six categories depending upon various combinations of systolic blood pressure (SBP) and diastolic blood pressure (DBP). The value of SBP greater than 140 mmHg or DBP greater than 90 mmHg is defined as hypertensive with elevated blood pressure, which may have implications for need for medication on a priority basis (AHA, 2003)<sup>4</sup>. In DLHS-4 we have taken SBP 130-139 or DBP 85-89 as the pre-hypertension.

It is evident from Tables 8.14 and 8.16 that 15 percent of men and 12 percent of women age 18 years and above in Nagaland are in the stage of pre-hypertension, while 40 percent men and 32 percent of women age 18 years and above are in the stage of hypertension and require medical attention on a priority basis. A relatively larger proportion of men as well as women age 18 years and above living in rural areas are found to be hypertensive (40% and 33%) than those living in urban areas (39% and 30% respectively). The prevalence of the pre-hypertension is same in rural as well as urban area.

The pattern in prevalence of pre-hypertension and hypertension across different districts of Nagaland are not uniform. Among men age 18 years and above, prevalence of pre-hypertension ranges from a minimum in Tuensang (9%) to the maximum in Kiphire (19%). In case of hypertension, the prevalence ranges from a minimum in Dimapur (25%) to the maximum in Paren (49%). In case of women age 18 years and above, the prevalence of pre-

---

<sup>4</sup> American Heart Association. <http://www.heart.org/HEARTORG/>.

hypertension is the lowest in Mokokchung and Dimapur (8% each) among the 11 districts of Nagaland. On the other hand, Kiphire and Longleng (16% each), Zunheboto (15%) are some of the leading districts having higher prevalence of pre-hypertension among women age 18 years and above. District wise variation in the proportion of women age 18 years and above suffering with hypertension (SBP $\geq$  140 or DBP $\geq$ 90) also portrays the same pattern with the lowest proportion of women in Dimapur and Tuensang (18% and 20% respectively) and the highest proportion in Phek (45%) and Paren (42%).

### **12.8 Use of Iodized Salt**

Salt used in the household is the most common vehicle for iodine fortification to prevent the public health concerns of iodine deficiency disorders. The compound used for fortification of salt is potassium iodate (KIO<sub>3</sub>). According to the World Health Organization, a country's salt iodization program is considered to be on a good track to eliminate iodine deficiency when 90 percent of households use iodized salt. The 2012-13 DLHS-4 made an effort to assess household iodized salt consumption by testing iodine contents in the salt being used by the household. Table 8.18 shows the proportion of households using iodized salt according to some selected background characteristics. Over all, salt was tested for iodine contain in 98 percent of household in Nagaland and 50 percent households were found to use salt with adequate iodine contain. Another 45 percent households were found to use salt with iodine but the proportion of iodine contain was not adequate. There is little variation in use of iodized salts by place of residence as urban household (53%) are more likely to use salt than rural household (49%). Analyzing the variation in proportion of household using iodized salt by districts, it is evident from Table 8.19 that it ranges from a maximum in Dimapur (64%) to the minimum in Tuensang (28%).

## **13. HEALTH FACILITIES**

The basic objective of the population linked facility survey conducted in DLHS-4 is to collect data on health personnel, availability of drugs/medicines, equipments, basic RCH care amenities, communication means and infrastructure at the level of, PHC and CHC, in order to assess the adequacy of RCH services in rural areas.

In DLHS-4 facility survey, at the district level, all Community Health Centres (CHCs), Sub-Divisional Hospital (SDH) and the District Hospitals (DH) were covered. All Sub-Health Centres (SHCs) and Primary Health Centres (PHCs) which were expected to serve the sampled population of selected rural PSU were also covered.

In Nagaland, the average sampled rural population served per Sub-Health Centre, PHC and CHC are 2,180; 6,327 and 38,312 respectively (Table 9.1). In total 413 villages were surveyed in DLHS-4 and the RCH services of these sampled villages were catered by 150 Sub-Health Centres, 88 PHCs and 21 CHCs.

All the 150 sampled Sub-Health Centres are functioning in government building and 43 percent have regular electricity. In 24 percent of these Sub-Health Centres are having labor rooms and out of this, 55 percent of the labor rooms are currently in use. Toilet facility is available in 85 percent of the sampled Sub-Health Centres and around 66 percent of these Sub-Health Centres have provision for water (Table 9.2).

Citizen's charter is displayed in 83 percent of the sampled Sub-Health Centres. The proportion of sampled Sub-Health Centre facilitated by Village Health Sanitation & Nutrition Committee (VHSNC) and those that received untied funds is 93 percent and 94 percent respectively (Table 9.3).

Ninety nine percent of the sampled Sub-Health Centers in all the districts have adequate Auxiliary Nurse Mid Wife (ANM) and 77 percent of SHCs are having Additional ANM in position. Less than 10 percent of SHCs in Mon, Mokochung, Kiphire and Longleng districts are having Male Health Worker (MHW). Maximum (60%) SHCs in Dimapur district are having MHW in position.

In Nagaland total 88 sampled PHCs have surveyed, out of this 82 percent of the PHCs are having MOs, 14 percent are having LMOs, 13 percent are having AYUSH Doctors and 88 of PHCs are having Pharmacists. In all the districts, more than 50 percent of PHCs are having required Medical Officers (MOs) except for Mokochung (40%). This percentage touched the 100 percent in five districts i.e. Mon, Dimapur, Kohima , Longleng and Paren (Table 9.5).

Out of total 88 sampled PHCs 62.5 percent of PHCs are having residential quarters for MOs, 53 percent are functioning on a 24 hour basis, 77 percent of PHCs catering to the sample villages have at least four beds. About 46 percent of the PHCs have regular power supply and 57 percent have functional vehicles (Table 9.6).

Newborn care services are available in 84 percent of the sampled PHCs, 19 percent of PHCs have provide referral services for delivery case and 2 percent have conducted at least 10 deliveries (Table 9.7).

Ninety two percent of PHCs have received untied fund and 99 percent have utilized, 85 percent of sampled PHCs have constituted Rogi Kalyan Samiti (RKS) and 90 percent have displayed the Citizen's Charter (Table 9.8).

In Nagaland total 21 CHCs have surveyed in 11 districts, out this only one CHC in Mockchung district have Obstetric Gynecologist, 2 CHCs are having Anesthetist and Public Health Manager respectively (Table 9.9).

Out of the 21 CHCs in Nagaland 12 CHCs are having functional OT, only one CHC have blood storage facility and 17 CHCs are designated as FRU and also have new born care services (Table 9.10).

Nineteen CHCs have displayed citizen's charter, 20 CHCs have constituted RKS and monitor regularly and 19 CHCs have utilized untied fund received.

In Nagaland total 11 District Hospitals (DHs) have surveyed. Out of this 5 DHs are having Pediatricians, 2 DHs are having Radiographers. Ultra Sound facility is available in 8 DHs, 2D Echo facility is available in 2 DHs and 6 DHs have three phase connection. Critical care area is available only in 2 DHs and Suggestion and Complaint boxes are available in 9 DHs.





## **BACKGROUND CHARACTERISTICS**

**TABLE 1.1 BASIC DEMOGRAPHIC INDICATORS**

Basic demographic indicators of Nagaland and its districts, Census 2011.

State/Districts	Population (in thousands)	Percentage urban	Percentage decadal growth rate <sup>1</sup>	Sex ratio <sup>2</sup>	Percentage literate 7+		
					Male	Female	Total
Mon	250.3	13.9	-3.99	898	60.9	52.6	57.0
Tuensang	194.6	28.8	-16.14	930	92.2	91.0	91.6
Mokokchung	140.8	19.6	-8.95	927	87.9	82.6	85.3
Zunheboto	166.3	21.0	+3.18	981	90.8	84.5	87.7
Wokha	378.8	51.9	+22.92	969	87.5	81.8	84.8
Dimapur	163.4	15.1	+10.27	916	83.7	72.2	78.1
Kohima	196.6	18.7	+5.70	927	76.3	69.6	73.1
Phek	50.5	15.0	-58.48	951	74.5	69.6	72.2
Kiphire	74.0	22.3	-30.57	961	74.9	64.0	69.5
Longleng	268.0	45.6	+21.72	903	88.7	81.5	85.2
Peren	95.2	15.6	+4.91	917	82.8	72.6	77.9
<b>Nagaland</b>	<b>1978.5</b>	<b>29.0</b>	<b>-0.58</b>	<b>931</b>	<b>82.8</b>	<b>76.1</b>	<b>79.6</b>

Source: Primary Census Abstract, Series 20, Census of India, 2011, <sup>1</sup> 2001-2011, <sup>2</sup> Female per 1,000 males.**TABLE 1.2 NUMBER OF HOUSEHOLDS, EVER-MARRIED WOMEN**

Number of households and ever-married women interviewed by district, Nagaland, 2012-13.

State/Districts	No of PSU		Number of households interviewed				Number of ever-married women interviewed			
	Rural	Urban	Total	Rural	Urban	HH response rate	Total	Rural	Urban	EW response rate
Mon	34	06	1,090	939	151	97.3	676	580	96	99.3
Tuensang	33	07	1,036	854	182	92.5	583	479	104	99.0
Mokokchung	28	09	1,034	782	252	92.3	538	411	127	98.0
Zunheboto	29	08	1,025	801	224	91.5	704	556	148	99.2
Wokha	29	08	1,019	800	219	91.0	492	362	130	94.4
Dimapur	19	21	1,044	494	550	93.2	753	358	395	94.8
Kohima	19	18	1,018	523	495	90.9	535	245	290	98.0
Phek	29	06	977	809	168	87.2	486	427	59	99.8
Kiphire	31	09	1,111	859	252	99.2	552	416	136	97.2
Longleng	29	06	953	799	154	85.1	507	427	80	92.2
Peren	29	06	968	804	164	86.4	521	428	93	93.0
<b>Nagaland</b>	<b>309</b>	<b>104</b>	<b>11,275</b>	<b>8,464</b>	<b>2,811</b>	<b>91.5</b>	<b>6,347</b>	<b>4,689</b>	<b>1,658</b>	<b>96.8</b>

Note: Table based on unweighted cases.

**Table 1.3 DISTANCE FROM THE NEAREST EDUCATIONAL FACILITY**

Percent distribution of sampled villages by distance from the nearest educational facility, Nagaland, 2012-13

Educational facility	Within village	Distance from the village			Total
		< 5 km	5-9 km	10+ km	
Primary school	97.4	1.6	0.0	1.0	100.0
Middle school	81.2	7.2	1.8	9.8	100.0
Secondary school	31.3	8.5	9.0	51.2	100.0
Higher secondary school	6.7	5.2	8.8	73.9	100.0
College	3.2	4.7	5.3	86.8	100.0
Madrassa	3.6	7.1	3.6	85.7	100.0

Note: Distance from the village is calculated for only those villages which do not have the facility within the village, Note: Table is based on unweighted cases.

<b>TABLE 1.4(a) DISTANCE FROM THE NEAREST HEALTH FACILITY</b>					
Percent distribution of sampled villages by distance from the nearest health facility, Nagaland, 2012-13.					
Health facility	Within village	Distance from the village <sup>1</sup>			More than 10km
		Within 3km	Within 5km	Within 10km	
Sub Health Centre	42.1	79.0	80.6	56.6	14.6
Primary Health Centre	17.2	65.8	69.4	76.9	23.8
Community Health Centre	5.2	64.9	66.2	72.1	29.2
District/Govt. Hospital	1.3	45.6	46.3	50.2	50.2
Government Dispensary	5.2	70.9	72.2	76.4	23.9
Private Clinic	7.8	55.0	56.3	62.1	38.8
Private Hospital	1.0	50.2	50.8	54.7	45.6
AYUSH Health Facility <sup>2</sup>	2.6	72.2	72.5	75.1	25.6

Note: <sup>1</sup> Including facilities within village.  
<sup>2</sup> AYUSH-Ayurveda, Yoga and Naturopathy, Unani, Siddha and Homeopathy

<b>TABLE 1.4(b) PROGRAMMES BENEFICIARIES</b>		
Percentage villages having any beneficiaries from selected programs , Nagaland, 2012-13.		
Programmes	Percentage of villages	Number of villages
Janani Suraksha Yojana (JSY)	46.0	142
Janani Shishu Suraksha Karyakram (JSSK)	20.7	64
Integrated Child Development Scheme (ICDS)	63.8	197
Total number of villages		309

<b>TABLE 1.5 REASONS FOR DROPPING OUT OF SCHOOL</b>									
Percentage of household population aged 6 to 17 years who dropped out of school by main reasons, Nagaland, 2012-13.									
Reason	Total			Rural			Urban		
	Male	Female	Total	Male	Female	Total	Male	Female	Total
School too far	3.0	8.5	5.5	3.4	9.3	6.3	2.0	5.8	3.5
Further education not necessary	3.2	3.2	3.2	2.3	4.1	3.2	5.3	0.0	3.2
Required for work in household activities/ farm family/business	10.8	8.9	9.9	11.0	10.3	10.6	10.6	4.1	8.0
Required for outside work	4.2	1.2	2.8	2.5	0.7	1.6	7.9	2.9	5.9
Not interested in studies	45.4	42.5	44.1	53.2	43.2	48.3	27.7	40.2	32.6
Cost too much	7.3	6.2	6.8	6.4	4.7	5.6	9.3	11.3	10.1
Repeated failures	9.7	10.5	10.1	10.0	10.5	10.2	9.2	10.5	9.7
Got married	0.0	3.8	1.7	0.0	1.9	1.0	0.0	9.8	3.9
Others	16.4	15.3	15.9	11.2	15.3	13.2	28.0	15.4	23.0
Total percent	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Number of persons**	219	196	415	161	157	318	58	39	97

Note: \*\*Unweighted cases.

**TABLE 1.6(a) HOUSING CHARACTERISTICS AND HOUSEHOLD ASSETS**

Percent of households by housing characteristics and household assets goods, by residence, Nagaland 2012-13.

Housing characteristics	Total	Residence	
		Rural	Urban
<b>Electricity</b>			
Having electricity	97.0	96.0	99.6
<b>Source of drinking water</b>			
<b>Improved source<sup>1</sup></b>	70.0	66.8	77.7
Piped water into dwelling/yard/plot	20.2	17.8	26.2
Public tap/standpipe	34.6	39.0	23.8
Tube Well or borehole	10.7	6.7	20.8
Other improved	4.4	3.4	6.9
<b>Non Improved source</b>	30.0	33.2	22.3
<b>Sanitation facility</b>			
<b>Improved sanitation</b>	83.4	78.3	95.8
Flush to sewer/septic/pit	66.4	58.8	85.1
Pit with slab	16.8	19.4	10.5
Pit ventilated improved	0.2	0.1	0.2
Other	0.0	0.0	0.0
<b>Not improved</b>	16.6	21.7	4.2
Flush not to sewer/septic/pit/twin pit	4.1	5.4	1.0
Pit without slab	10.3	13.2	3.2
Twin pit/ Compositing toilet	0.1	0.2	0.0
Dry toilet	0.0	0.0	0.1
No toilet/open space	2.0	2.9	0.0
<b>Fuel used for cooking</b>			
Liquefied Petroleum Gas (LPG)	19.6	7.3	50.1
Electricity	1.1	0.6	2.4
Kerosene	0.3	0.1	0.9
Wood	78.9	91.9	46.5
Others	0.0	0.0	0.0
<b>Type of house</b>			
Kachha	54.0	64.2	28.8
Semi - pucca	32.0	28.2	41.4
Pucca	14.0	7.6	29.8
<b>Number of rooms</b>			
1	5.7	4.6	8.5
2	20.6	20.6	20.5
3+	73.7	74.8	71.0
<b>Household assets</b>			
Radio/transistor	18.7	21.4	11.8
Television	54.2	44.3	78.4
Computer/ laptops without internet	4.7	2.3	10.4
Computer/ laptops with internet	3.6	1.4	9.1
Telephone only	1.3	0.8	2.4
Mobile only	86.1	83.2	93.1
Washing Machine	4.0	1.5	10.2
Refrigerator	13.8	7.5	29.1
Sewing machine	17.5	14.8	24.2
Watch/ clock	76.0	74.1	80.4
Bicycle	4.2	3.4	6.0
Motor cycle/ scooter	12.4	11.6	14.3
Car / Jeep/van	10.9	8.0	17.8
Tractor	0.0	0.0	0.1
Water pump/tube well	1.8	0.9	3.9
Cart driven by animal	0.2	0.2	0.0
Cart driven by Machine	0.0	0.0	0.1
Other cart	0.0	0.0	0.0
Cooler/AC	0.3	0.1	0.7
<b>Number of households**</b>	11,275	8,464	2,811

<sup>1</sup> Includes piped into dwelling piped to yard/plot, public tap/stand pipe/hand pump,/tube well/ bore well/well covered/spring tanker, cart with small tank and bottled water. \*\*Unweighted cases.

**TABLE 1.6(b) HOUSING CHARACTERISTICS BY DISTRICT**

Percentage of households with selected characteristics by district, Nagaland, 2012-13.

<b>Districts</b>	With electricity	Improved source of drinking water <sup>1</sup>	Improved access to Sanitation <sup>2</sup>	Using Liquefied Petroleum Gas	Living in <i>pucca</i> house	Having BPL card
Mon	96.8	64.7	75.2	6.1	8.6	12.8
Tuensang	99.6	80.1	79.4	6.3	4.1	19.1
Mokokchung	100.0	73.8	95.2	28.1	13.6	29.8
Zunheboto	100.0	57.9	82.7	13.4	11.0	26.8
Wokha	94.5	56.6	79.6	12.6	11.8	19.5
Dimapur	97.6	73.6	90.7	58.0	36.3	8.3
Kohima	99.3	79.7	91.3	38.6	27.7	28.6
Phek	99.9	84.2	87.6	17.3	9.4	28.9
Kiphire	99.4	86.0	82.8	2.8	6.8	51.0
Longleng	81.7	32.3	66.8	2.1	7.0	42.2
Peren	95.6	73.1	77.3	12.0	7.6	31.9
<b>DLHS-4</b>	97.0	70.0	83.4	19.6	14.0	26.7

<sup>1</sup> Includes piped into dwelling piped to yard/plot, public tap/stand pipe/hand pump,/tube well/ bore well/well covered/spring tanker, cart with small tank and bottled water. <sup>2</sup> Household having access to toilet facility = improved source of sanitation + flush not to sewer/septic/pit/twin pit + pit without slab + dry toilet.

**TABLE 1.7 HOUSEHOLD CHARACTERISTICS**

Percentage of the households by selected characteristics of the household head, household size and residence, Nagaland, 2012-13.

Characteristics	Total	Residence	
		Rural	Urban
<b>Sex</b>			
Male	89.9	90.7	87.5
Female	10.0	9.2	12.5
<b>Age</b>			
< 30	7.5	6.5	10.9
30-44	27.8	26.5	31.5
45-59	35.3	34.9	36.5
60+	29.5	32.0	21.1
<b>Median age</b>	48.0	51.0	53.0
<b>Religion</b>			
Hindu	2.9	0.6	10.1
Muslim	1.2	0.5	3.5
Christian	95.7	98.9	86.1
Others	0.1	0.1	0.3
<b>Caste/Tribe</b>			
Scheduled castes	2.7	0.9	8.4
Scheduled tribes	96.9	98.8	90.7
Other backward classes	0.2	0.2	0.2
Others	0.2	0.1	0.7
<b>Number of usual members</b>			
1	9.5	9.5	9.5
2	22.1	22.8	19.8
3	24.7	24.6	25.1
4	20.4	20.9	19.1
5	11.7	11.7	11.9
6	6.2	5.7	7.4
7	3.1	2.9	3.9
8	1.3	1.1	1.9
9+	1.0	0.8	1.5
<b>Total percent</b>	100.0	100.0	100.0
<b>Mean household size</b>	3.5	3.4	3.6
<b>Number of households**</b>	11,275	8,464	2,811

Total figure may not add to 100 percent due to 'do not know' or 'missing cases', Note: \*\*Unweighted cases.

<b>TABLE 1.8 HOUSEHOLD POPULATION BY AGE AND SEX</b>									
Percent distribution of the household population by age, residence and sex, Nagaland, 2012-13.									
Age group	Total			Rural			Urban		
	Total	Male	Female	Total	Male	Female	Total	Male	Female
<1	0.8	0.8	0.9	0.8	0.7	0.9	1.0	0.9	1.0
1-4	4.5	4.4	4.5	4.7	4.8	4.6	3.9	3.5	4.2
5-9	8.1	8.2	8.0	8.2	8.2	8.1	7.8	8.1	7.6
10-14	8.9	9.0	8.7	8.4	8.4	8.4	10.0	10.5	9.4
15-19	8.7	8.7	8.7	8.0	8.1	7.8	10.3	10.0	10.7
20-24	8.6	8.1	9.1	8.0	7.4	8.6	9.9	9.8	10.1
25-29	8.6	8.1	9.1	8.2	7.5	8.8	9.6	9.3	9.8
30-34	7.3	6.6	8.0	7.1	6.6	7.7	7.6	6.6	8.6
35-39	6.8	6.0	7.6	6.8	6.0	7.7	6.8	6.2	7.4
40-44	6.1	5.9	6.3	5.9	5.7	6.0	6.5	6.2	6.9
45-49	6.8	6.4	7.1	6.8	6.3	7.3	6.7	6.7	6.7
50-54	7.5	7.0	7.9	7.7	7.1	8.3	6.9	6.8	7.0
55-59	4.8	5.4	4.2	5.0	5.6	4.3	4.4	4.8	3.9
60-64	4.5	5.4	3.4	4.9	5.7	3.9	3.5	4.6	2.4
65-69	2.8	3.1	2.4	3.2	3.6	2.8	1.9	2.0	1.7
70-74	2.3	2.8	1.8	2.6	3.2	2.0	1.6	2.0	1.2
75-79	1.3	1.6	1.0	1.6	2.0	1.2	0.7	0.8	0.6
80+	1.8	2.4	1.2	2.2	2.9	1.4	0.9	1.1	0.7
<b>Total percent</b>	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
<b>Number of Persons**</b>	39,298	20,212	19,065	29,080	15,033	14,032	10,218	5,179	5,033
<b>Sex ratio at birth<sup>1</sup></b>	104.7	na	na	103.7	na	na	108.2	na	na
<b>Sex ratio 0-4<sup>1</sup></b>	104.9	na	na	108.6	na	na	92.3	na	na

Table is based on the *de facto* population, i.e. persons who stayed in the household the night before the interview (including both usual residents and visitors), na = Not applicable<sup>1</sup> Females per 1000 males.

<b>TABLE 1.9 MARITAL STATUS OF THE HOUSEHOLD POPULATION</b>						
Percent distribution of the household population (age 10 years and above) by marital status, age and sex, Nagaland, 2012-13.						
Age group	Marital status				Total percent	Number of persons**
	Never married	Married, <i>gauna</i> not performed	Currently Married	Widowed/ divorced/ separated		
Total						
10-14	97.0	0.1	1.1	0.0	100.0	3,453
15-19	95.0	0.5	3.3	0.0	100.0	3,343
20-24	79.0	2.5	16.8	0.3	100.0	3,302
25-29	50.9	6.1	40.9	0.9	100.0	3,331
30-44	15.5	9.5	71.2	3.2	100.0	7,872
45-49	4.3	10.7	79.2	5.8	100.0	2,649
50-54	2.2	10.3	79.9	7.4	100.0	2,926
55-59	2.3	10.9	78.0	8.6	100.0	1,892
60+	2.3	12.6	64.3	20.6	100.0	5,099
Total	36.9	7.3	49.6	5.5	100.0	33,867
Male						
10-14	96.8	0.2	1.0	0.0	100.0	1,811
15-19	97.2	0.4	1.8	0.0	100.0	1,721
20-24	89.6	1.1	7.7	0.1	100.0	1,604
25-29	62.1	5.2	30.7	0.4	100.0	1,602
30-44	19.0	9.3	68.7	2.2	100.0	3,726
45-49	5.3	10.3	80.7	3.8	100.0	1,292
50-54	2.2	10.5	81.7	5.5	100.0	1,405
55-59	1.8	10.7	81.1	6.2	100.0	1,093
60+	2.3	12.6	69.1	15.8	100.0	3,166
Total	39.2	7.1	48.5	4.4	100.0	17,420
Female						
10-14	97.2	0.1	1.2	0.0	100.0	1,642
15-19	92.8	0.6	5.0	0.1	100.0	1,621
20-24	68.9	3.9	25.4	0.5	100.0	1,697
25-29	40.4	6.9	50.5	1.4	100.0	1,728
30-44	12.4	9.6	73.5	4.1	100.0	4,146
45-49	3.4	11.1	77.8	7.7	100.0	1,356
50-54	2.2	10.1	78.2	9.2	100.0	1,521
55-59	3.0	11.1	73.9	11.8	100.0	797
60+	2.3	12.8	56.5	28.3	100.0	1,929
Total	34.6	7.5	50.8	6.5	100.0	16,437
**Unweighted cases						



<b>TABLE 1.10 AGE AT MARRIAGE</b>					
Mean age at marriage and percentage of marriages below legally prescribed minimum age at marriage by sex, residence and districts Nagaland, 2012-13.					
Place of residence/ district	Mean age at marriage		Percentage of marriages below legal age at marriage		Currently married women aged 20-24 who were married before age 18 years
	Boys	Girls	Boys (<21 years)	Girls (<18 years)	
Mon	27.4	22.4	12.0	10.5	13.2
Tuensang	26.9	22.5	7.4	0.0	22.0
Mokokchung	29.2	25.1	4.6	2.9	10.7
Zunheboto	27.7	25.8	0.0	0.0	6.1
Wokha	26.2	23.0	13.2	0.0	23.3
Dimapur	26.8	21.3	5.7	13.3	40.8
Kohima	29.7	25.7	7.5	2.3	23.1
Phek	26.3	25.8	3.8	0.0	--
Kiphire	27.3	26.8	2.9	0.0	19.2
Longleng	26.6	25.6	1.3	0.0	15.6
Peren	23.7	22.2	14.7	8.1	24.4
Rural	26.7	24.6	6.4	2.3	19.6
Urban	27.6	24.9	4.5	3.6	26.8
<b>DLHS-4</b>	26.9	24.6	6.0	2.6	21.4

Note : Reference period: January 1<sup>st</sup>, 2008 to survey date.

<b>TABLE 1.11 EDUCATIONAL LEVEL OF THE HOUSEHOLD POPULATION</b>									
Percent distribution of household population age 7 years and above by literacy levels, years of schooling and background characteristics Nagaland, 2012-13.									
Background characteristics	Non-literate	Years of schooling among those who are literate					Missing	Total Percent	Number of persons**
		Less than 5	6 – 8	9 – 10	11 or more				
<b>Total</b>									
<b>Age</b>									
7-9	0.1	96.3	1.9	0.1	0.3	1.3	100.0	1,972	
10-14	0.0	58.7	37.9	1.8	0.6	1.1	100.0	3,453	
15-19	0.2	10.6	41.1	27.2	19.8	1.1	100.0	3,343	
20-29	0.4	11.2	24.8	16.6	47.0	0.0	100.0	6,633	
30-39	0.8	20.5	32.2	16.9	29.6	0.0	100.0	5,507	
40-49	0.8	27.5	31.7	16.5	23.5	0.0	100.0	5,014	
50+	3.4	33.3	19.9	8.6	34.8	0.0	100.0	9,917	
<b>Sex</b>									
Male	1.3	28.4	27.3	14.8	27.9	0.3	100.0	18,517	
Female	1.2	32.0	27.0	11.3	28.2	0.3	100.0	17,477	
<b>Religion</b>									
Hindu	3.2	30.1	26.9	12.1	27.4	0.3	100.0	1,085	
Muslim	1.0	39.2	20.0	5.9	30.9	3.0	100.0	452	
Christian	1.2	30.1	27.3	13.2	28.0	0.2	100.0	34,238	
Others	5.0	21.6	14.4	17.6	38.3	3.1	100.0	64	
<b>Caste</b>									
Scheduled Castes	3.9	31.2	24.2	11.5	28.3	1.0	100.0	901	
Scheduled Tribes	1.2	30.2	27.3	13.1	28.0	0.2	100.0	33,648	
Other Backward Classes	0.0	47.7	23.0	8.4	20.9	0.0	100.0	58	
Others	1.1	28.8	25.2	15.7	28.4	0.9	100.0	1,232	
<b>Total</b>	1.3	30.2	27.1	13.1	28.0	0.3	100.0	35,839	
Note: ** Unweighted cases									

**TABLE 1.12 EDUCATIONAL LEVEL OF THE HOUSEHOLD POPULATION**

Percent distribution of household population age 7 years and above by literacy levels, years of schooling and background characteristics Nagaland, 2012-13.

Background characteristics	Years of schooling among those who are literate						Total Percent	Number of persons**
	Non-literate	Less than 5	6 - 8	9 - 10	11 or more	Missing		
<b>Rural</b>								
<b>Age</b>								
7-9	0.2	95.7	2.3	0.1	0.3	1.4	100.0	1,448
10-14	0.0	61.1	35.7	1.4	0.7	1.1	100.0	2,436
15-19	0.1	12.3	44.1	25.7	16.9	1.0	100.0	2,294
20-29	0.4	13.3	27.7	17.3	41.2	0.0	100.0	4,658
30-39	0.6	23.6	35.0	15.7	25.1	0.0	100.0	4,035
40-49	0.8	30.9	33.5	14.7	20.1	0.0	100.0	3,669
50+	3.8	33.8	19.1	6.4	36.8	0.0	100.0	7,878
<b>Sex</b>								
Male	1.5	30.3	28.2	13.9	25.9	0.2	100.0	13,659
Female	1.4	34.4	27.5	9.5	27.0	0.3	100.0	12,750
<b>Religion</b>								
Hindu	1.8	34.2	18.1	7.4	37.6	0.9	100.0	136
Muslim	0.7	45.2	13.5	2.5	33.4	4.6	100.0	135
Christian	1.4	32.2	28.0	11.9	26.3	0.2	100.0	26,115
Others	3.4	31.1	16.4	18.5	23.9	6.6	100.0	32
<b>Caste</b>								
Scheduled Castes	0.8	41.0	13.5	5.9	35.5	3.4	100.0	234
Scheduled Tribes	1.4	32.3	28.0	11.7	26.3	0.2	100.0	25,822
Other Backward Classes	0.0	48.1	21.9	10.0	20.0	0.0	100.0	41
Others	1.4	22.7	23.5	19.0	32.8	0.7	100.0	321
<b>Total</b>	1.4	32.3	27.8	11.8	26.4	0.3	100.0	26,418
Note: ** Unweighted cases.								

**TABLE 1.13 EDUCATIONAL LEVEL OF THE HOUSEHOLD POPULATION**

Percent distribution of household population age 7 years and above by literacy levels, years of schooling and background characteristics, Nagaland, 2012-13.

Background characteristics	Non-literate	Years of schooling among those who are literate					Missing	Total Percent	Number of persons**
		Less than 5	6 - 8	9 - 10	11 or more				
<b>Urban</b>									
<b>Age</b>									
7-9	0.0	97.6	0.9	0.0	0.3	1.2	100.0	524	
10-14	0.0	54.1	42.0	2.5	0.3	1.0	100.0	1,017	
15-19	0.3	7.8	35.9	29.8	24.9	1.3	100.0	1,049	
20-29	0.4	7.3	19.2	15.3	57.7	0.0	100.0	1,975	
30-39	1.1	13.9	26.2	19.4	39.4	0.0	100.0	1,472	
40-49	0.8	19.9	28.0	20.5	30.8	0.0	100.0	1,345	
50+	2.2	31.5	22.4	15.2	28.6	0.0	100.0	2,039	
<b>Sex*</b>									
Male	0.9	24.2	25.3	16.8	32.5	0.4	100.0	4,793	
Female	0.9	26.9	25.9	15.2	30.8	0.3	100.0	4,628	
<b>Religion</b>									
Hindu	3.4	29.6	28.0	12.6	26.1	0.2	100.0	949	
Muslim	1.2	37.2	22.2	7.1	30.0	2.4	100.0	317	
Christian	0.6	24.6	25.5	16.8	32.3	0.3	100.0	8,123	
Others	6.3	13.4	12.7	16.9	50.8	0.0	100.0	32	
<b>Caste</b>									
Scheduled Castes	4.7	28.5	27.1	13.0	26.3	0.4	100.0	667	
Scheduled Tribes	0.5	24.6	25.4	16.5	32.7	0.2	100.0	7,826	
Other Backward Classes	0.0	46.7	25.4	5.2	22.7	0.0	100.0	17	
Others	1.0	30.6	25.7	14.6	27.1	1.0	100.0	911	
<b>Total</b>	0.9	25.5	25.6	16.0	31.7	0.3	100.0	9,421	
Note: Total number does not match because of missing cases, ** Unweighted cases.									

<b>TABLE 1.14 CURRENTLY ATTENDING SCHOOL</b>									
Percentage of household population (aged 6 to 17 years) attending school/college, Nagaland, 2012-13.									
Background characteristics	Total			Male			Female		
	Rural	Urban	Total	Rural	Urban	Total	Rural	Urban	Total
<b>Age</b>									
6-10	97.8	98.3	98.0	97.5	97.9	97.6	98.1	98.8	98.4
11-13	95.7	97.0	96.1	95.6	97.2	96.1	95.9	96.8	96.1
14-17	89.5	92.9	90.8	89.3	91.6	90.2	89.6	94.3	91.4
6-11	97.7	98.3	97.9	97.4	97.9	97.6	98.1	98.8	98.3
12-17	91.5	94.0	92.4	91.3	93.3	92.0	91.6	94.8	92.8
<b>Total</b>	<b>94.3</b>	<b>95.8</b>	<b>94.8</b>	<b>94.2</b>	<b>95.2</b>	<b>94.5</b>	<b>94.5</b>	<b>96.4</b>	<b>95.1</b>
<b>Religion</b>									
Hindu	87.5	93.6	92.9	91.5	91.6	91.5	85.1	95.7	94.3
Muslim	79.6	84.2	82.9	72.7	82.1	79.6	87.5	87.8	87.7
Christian	94.7	96.8	95.3	94.8	96.6	95.3	94.6	97.0	95.3
Others	82.2	79.1	80.8	100.0	0.0	63.3	73.6	100.0	87.2
<b>Total</b>	<b>94.5</b>	<b>95.8</b>	<b>94.9</b>	<b>94.6</b>	<b>95.2</b>	<b>94.8</b>	<b>94.4</b>	<b>96.6</b>	<b>95.1</b>
<b>Caste/Tribe</b>									
Scheduled Castes	80.3	91.3	88.5	76.2	86.1	84.0	83.2	97.6	93.1
Scheduled Tribes	94.7	97.2	95.5	94.8	97.2	95.5	94.7	97.1	95.4
Other Backward Classes	87.3	100.0	90.7	100.0	100.0	100.0	73.9	100.0	79.1
Others	87.9	87.3	87.4	89.9	86.0	86.7	83.6	89.2	88.3
<b>Total</b>	<b>94.5</b>	<b>95.8</b>	<b>94.9</b>	<b>94.6</b>	<b>95.2</b>	<b>94.8</b>	<b>94.4</b>	<b>96.6</b>	<b>95.1</b>

<b>Table 1.15 AVAILABILITY OF FACILITY AND HEALTH PERSONNEL BY DISTRICT</b>							
Percentage of villages with facility and health personnel by district, Nagaland, 2012-13							
District	Number of villages having facility						Number of villages
	Primary or middle school	Sub-centre	PHCs	Any government health facility <sup>1</sup>	Anganwadi Centre	VHNSC	
Mon	100.0	52.9	20.6	73.5	100.0	47.1	34
Tuensang	100.0	30.3	12.1	42.4	100.0	42.4	33
Mokokchung	100.0	42.9	35.7	71.4	92.9	21.4	28
Zunheboto	100.0	69.0	3.4	82.8	100.0	20.7	29
Wokha	100.0	27.6	17.2	48.3	100.0	41.4	29
Dimapur	100.0	26.3	10.5	36.8	78.9	57.9	19
Kohima	100.0	42.1	10.5	68.4	100.0	36.8	19
Phek	100.0	55.2	34.5	89.7	100.0	37.9	29
Kiphire	100.0	35.5	6.5	48.4	100.0	41.9	31
Longleng	93.1	44.8	13.8	58.6	100.0	34.5	29
Peren	100.0	31.0	20.7	51.7	100.0	37.9	29
<b>Nagaland</b>	<b>99.4</b>	<b>42.1</b>	<b>17.2</b>	<b>61.5</b>	<b>98.1</b>	<b>37.9</b>	<b>309</b>

Note: Table is based on unweighted cases, \*\* Facilities as reported by village pradhan/up pradhan/any other panchayat member/teacher/gram sevak/anganwari centre, <sup>1</sup> Includes Sub-Centre, Primary Health Centre (including Block PHC), Community Health Centre or referral hospital, government hospital, and government dispensary within the village, VHNSC = Village Health Nutrition and Sanitation Committee.

**TABLE 1.16 BIRTH REGISTRATION**

Proportion of children below age 5 years who have registered the birth with civil authority and received birth certificate, by background characteristics, Nagaland, 2012-13.

Background characteristics	Birth Registered		Having birth certificate <sup>1</sup>	Number of children below 5 years**
<b>Age of the children</b>				
Below 1 year	36.0		63.9	307
1 to 2 years	40.3		82.3	446
3-4 years	38.6		85.8	907
<b>Sex of the children</b>				
Male	38.6		81.1	1,033
Female	42.1		84.4	1,010
<b>Place of residence</b>				
Rural	35.1		86.1	1,571
Urban	54.1		76.9	473
<b>Religion</b>				
Hindu	52.5		75.2	93
Muslim	51.7		94.6	65
Christian	39.1		82.6	1,883
Others	64.9		100.0	03
<b>Castes/Tribes</b>				
Scheduled castes	50.5		72.6	96
Scheduled tribes	38.9		82.9	1,868
Other backward classes	52.9		42.3	09
Others	57.2		95.3	71
<b>Total</b>	40.3		82.7	2,044

<sup>1</sup> Out of those who registered. \*\* unweighted cases.

**TABLE 1.17 BIRTH REGISTRATION**

Proportion of children below age 5 years whose birth have been registered with civil authority and received birth certificate, by districts, Nagaland, 2012-13.

Districts	Birth Registered			Received birth certificate <sup>1</sup>			Number of children below 5 years**
	Rural	Urban	Total	Rural	Urban	Total	
Mon	5.5	42.0	14.7	65.8	100.0	90.3	209
Tuensang	42.0	37.3	41.4	85.4	81.1	84.9	426
Mokokchung	48.8	68.5	53.0	83.8	66.0	78.9	221
Zunheboto	44.0	33.3	43.2	88.8	0.0	83.8	43
Wokha	30.1	59.5	37.0	93.1	100.0	95.7	236
Dimapur	45.8	60.5	51.8	89.4	78.8	84.4	402
Kohima	48.4	55.3	51.5	70.5	54.5	62.8	169
Phek	17.3	53.6	18.6	100.0	0.0	89.5	54
Kiphire	20.7	22.2	20.9	88.5	100.0	90.4	56
Longleng	32.1	78.5	34.9	95.8	71.7	92.5	84
Peren	21.9	25.1	22.0	86.4	45.2	83.7	144
<b>Nagaland</b>	35.1	54.1	40.3	86.0	76.8	82.7	2,044

<sup>1</sup> Out of those who registered, \*\* unweighted cases.

# **CHARACTERISTICS OF WOMAN & FERTILITY**





**TABLE 2.1 BACKGROUND CHARACTERISTICS OF EVERMARRIED WOMEN**

Percentage of ever married women age 15-49 years according to selected background characteristics, and place of residence, Nagaland, 2012-13.

Background characteristics	Place of residence		
	Total	Rural	Urban
<b>Age Group</b>			
15-19	1.3	1.2	1.5
20-24	7.7	8.0	7.2
25-29	15.7	15.7	15.7
30-34	18.1	18.2	18.0
35-39	20.0	19.9	20.1
40-44	17.0	16.2	18.7
45-49	20.2	20.8	18.7
<b>Consummation of marriage</b>			
Below 18 years	16.7	15.4	19.4
18 years & above	83.3	84.6	80.6
<b>Marital Duration</b>			
Less than 5 years	18.9	18.4	20.2
5-9 years	15.0	15.1	15.0
10-14 years	17.7	18.4	16.1
15 or more years	48.3	48.2	48.7
<b>Woman's education</b>			
Non-literate <sup>a</sup>	15.6	16.4	13.9
Less than 5 years	8.7	10.3	5.3
5-9 years	51.4	55.1	42.9
10 or more years	24.3	18.2	38.0
<b>Husband's education</b>			
Non-literate <sup>a</sup>	13.3	13.3	13.2
Less than 5 years	5.6	6.7	3.3
5-9 years	44.6	49.2	34.3
10 or more years	36.5	30.8	49.2
<b>Religion</b>			
Hindu	4.3	0.8	12.0
Muslim	1.7	0.7	4.0
Christian	93.8	98.3	83.7
Others	0.2	0.2	0.3
<b>Castes/tribes</b>			
Scheduled castes	3.2	1.1	8.1
Scheduled tribes	92.1	97.3	80.5
Other backward classes	0.2	0.3	0.1
Others	4.4	1.4	11.3
<b>(DLHS-4)**</b>	<b>6,347</b>	<b>4,689</b>	<b>1,658</b>

<sup>a</sup> Literate but did not attend school are also included. \*\*Unweighted cases.

**TABLE 2.2 LEVEL OF EDUCATION OF EVER MARRIED WOMEN**

Percent distribution of ever married women age 15-49 years according to selected background characteristics and years of schooling, Nagaland, 2012-13.

Background characteristics	Non-literate	Literate but no schooling	Years of schooling				Total	Number of women**
			0-5 years	6-8 years	9-10 years	11 or more years		
<b>Age group</b>								
15-19	13.5	0.0	18.4	50.6	14.0	3.6	100.0	83
20-24	10.2	0.2	21.2	37.6	17.7	13.1	100.0	489
25-29	10.8	0.2	21.9	32.1	17.7	17.3	100.0	996
30-34	13.1	0.4	25.4	34.5	13.8	12.9	100.0	1162
35-39	15.4	0.4	29.1	31.8	14.3	8.9	100.0	1269
40-44	17.9	0.5	31.6	29.5	13.1	7.4	100.0	1064
45-49	20.4	0.4	36.4	26.8	9.4	6.6	100.0	1284
<b>Place of residence</b>								
Rural	16.3	0.1	32.6	32.8	11.9	6.3	100.0	4689
Urban	13.0	0.9	19.2	28.9	18.1	19.9	100.0	1658
<b>Husband's education</b>								
Non-literate <sup>a</sup>	66.5	1.6	14.1	11.2	4.2	2.4	100.0	838
Less than 5 years	22.3	0.0	62.5	13.4	0.8	1.0	100.0	370
5-9 years	9.4	0.2	44.7	38.1	6.1	1.5	100.0	2877
10 or more years	2.6	0.2	8.5	34.0	28.8	25.9	100.0	2262
<b>Religion</b>								
Hindu	21.4	5.3	23.6	24.1	14.6	11.0	100.0	233
Muslim	57.5	0.0	15.5	13.3	8.2	5.4	100.0	94
Christian	14.2	0.1	28.9	32.3	13.9	10.5	100.0	6008
Others	(23.9)	(8.3)	(16.2)	(16.6)	(18.6)	(16.5)	(100.0)	12
<b>Castes/tribes</b>								
Scheduled castes	31.2	6.3	19.4	22.0	11.6	9.5	100.0	178
Scheduled tribes	13.2	0.2	29.2	32.7	14.0	10.7	100.0	5906
Other backward classes	(0.0)	(0.0)	(48.6)	(51.4)	(0.0)	(0.0)	(100.0)	14
Others	46.9	0.0	18.4	14.8	13.2	6.7	100.0	249
<b>Nagaland</b>								
	15.3	0.4	28.4	31.6	13.8	10.5	100.0	6347

Note: <sup>a</sup> Literate but did not attend school are also included, ( ) Based on 10-20 unweighted cases. \*\* Unweighted cases.

<b>TABLE 2.3 BIRTH ORDER</b>								
Percent distribution of births <sup>###</sup> among ever married women age 15-49 years according to selected background characteristics and birth order, Nagaland, 2012-13.								
Background characteristics	Distribution of births	Birth order					Total	Number of births <sup>**</sup>
		1	2	3	4+	2 & above		
<b>Age group</b>								
15-19	3.3	90.0	10.0	0.0	0.0	10.0	100.0	30
20-24	24.5	60.4	27.4	9.1	3.1	39.6	100.0	239
25-29	33.9	35.6	29.6	20.0	14.8	64.4	100.0	333
30-34	23.7	18.9	22.9	21.0	37.2	81.1	100.0	238
35-39	9.8	9.7	19.2	20.1	51.0	90.3	100.0	96
40-45	3.4	9.3	15.4	10.5	64.8	90.7	100.0	35
45-49	(1.4)	(12.9)	(17.1)	(15.1)	(54.9)	(87.1)	100.0	14
<b>Place of residence</b>								
Rural	69.8	34.2	23.2	16.8	25.8	65.8	100.0	740
Urban	30.2	39.4	29.6	15.9	15.1	60.6	100.0	245
<b>Education</b>								
Non-literate <sup>a</sup>	16.2	18.4	24.0	18.7	38.8	81.6	100.0	160
Less than 5 years	6.7	21.1	24.8	19.5	34.6	78.9	100.0	70
5-9 years	49.7	35.2	23.6	18.4	22.7	64.8	100.0	497
10 or more years	27.3	50.7	28.7	11.0	9.6	49.3	100.0	258
<b>Religion</b>								
Hindu	5.6	42.9	36.1	11.2	9.8	57.1	100.0	49
Muslim	4.4	18.5	27.2	15.5	38.9	81.5	100.0	37
Christian	89.8	36.1	24.4	16.9	22.6	63.9	100.0	898
Others	0.2	--	--	--	--	--	--	01
<b>Caste/tribes</b>								
Scheduled castes	5.9	31.5	30.9	13.7	23.9	68.5	100.0	52
Scheduled tribes	88.7	35.7	24.3	17.2	22.9	64.3	100.0	886
Other backward classes	0.6	67.9	32.1	0.0	0.0	32.1	100.0	06
Others	4.8	38.5	33.4	10.3	17.8	61.5	100.0	41
<b>Nagaland</b>	100.0	35.8	25.2	16.5	22.6	64.2	100.0	985

<sup>###</sup> Last live/still birth since 01-01-2008, <sup>a</sup> Literate, but did not attend school are also included, ( ) Based on 10-20 unweighted cases. -- Percentage not shown for less than 10 cases. <sup>\*\*</sup> Unweighted cases.

<b>TABLE 2.4 BIRTH ORDER BY DISTRICTS</b>								
Percent distribution of births <sup>###</sup> among ever married women age 15-49 years by birth order and districts, Nagaland, 2012-13								
Districts	Distribution of births	Birth order					Total	Number of births**
		1	2	3	4+	2 & above		
Mon	7.8	35.7	21.4	20.2	22.7	64.3	100.0	78
Tuensang	23.0	21.8	24.2	17.8	36.2	78.2	100.0	225
Mokokchung	10.6	42.0	31.7	16.7	9.5	58.0	100.0	104
Zunheboto	(1.9)	(80.0)	(14.6)	(5.4)	(0.0)	(20.0)	100.0	18
Wokha	10.6	35.8	33.2	14.7	16.3	64.2	100.0	108
Dimapur	21.3	37.4	26.6	15.6	20.4	62.6	100.0	209
Kohima	10.5	36.6	25.4	16.3	21.7	63.4	100.0	100
Phek	(1.6)	(74.0)	(13.0)	(6.5)	(6.5)	(26.0)	100.0	16
Kiphire	(1.9)	(55.9)	(4.7)	(5.3)	(34.2)	(44.1)	100.0	19
Longleng	3.9	55.3	14.5	14.9	15.3	44.7	100.0	38
Peren	6.9	25.6	18.4	23.4	32.6	74.4	100.0	70
<b>Nagaland</b>	100.0	35.8	25.2	16.5	22.5	64.5	100.0	985

<sup>###</sup> Last live/still birth since 01-01-2008, ( ) Based on 10-20 unweighted cases, -- Percentage not shown for less than 10 cases. \*\* Unweighted cases.

**TABLE 2.5 CHILDREN EVER BORN**

Mean children ever born (MCEB) according to selected background characteristics of ever married women age 15-49 years and 40-49 years, Nagaland, 2012-13.

Background characteristics	Mean children ever born to women aged 15-49 years				Mean children ever born to women aged 40-49 years			
	Total	Males	Females	Number of Women**	Total	Males	Females	Number of Women**
<b>Age Group</b>								
15-19	0.50	0.27	0.23	83	na	na	na	na
20-24	0.99	0.50	0.49	489	na	na	na	na
25-29	1.59	0.83	0.76	996	na	na	na	na
30-34	2.36	1.30	1.06	1162	na	na	na	na
35-39	2.78	1.53	1.25	1269	na	na	na	na
40-44	2.93	1.58	1.35	1064	2.93	1.58	1.35	1064
45-49	3.22	1.76	1.46	1284	3.22	1.76	1.46	1284
<b>Residence</b>								
Rural	2.52	1.39	1.13	4689	3.19	1.76	1.43	1726
Urban	2.31	1.21	1.10	1658	2.86	1.49	1.37	622
<b>Education</b>								
Non-literate <sup>a</sup>	2.45	1.34	1.10	993	2.64	1.45	1.19	455
Less than 5 years	2.94	1.66	1.27	571	3.35	1.91	1.44	302
5-9 years	2.58	1.41	1.17	3302	3.20	1.75	1.46	1187
10 or more years	2.04	1.06	0.98	1481	3.02	1.53	1.49	404
<b>Religion</b>								
Hindu	2.09	1.07	1.03	233	2.89	1.47	1.41	63
Muslim	2.67	1.37	1.30	94	(3.60)	(1.96)	(1.64)	16
Christian	2.47	1.35	1.13	6008	3.09	1.68	1.41	2263
Others	(2.07)	(1.00)	(1.06)	12	--	--	--	06
<b>Castes/tribes</b>								
Scheduled castes	2.31	1.08	1.22	178	3.01	1.45	1.54	45
Scheduled tribes	2.50	1.36	1.14	5906	3.16	1.72	1.44	2199
Other backward classes	(3.13)	(1.51)	(1.62)	14	5.71	2.73	2.97	004
Others	1.71	.99	0.72	249	1.76	1.01	0.75	100
<b>Nagaland</b>	2.46	1.33	1.12	6347	3.09	1.67	1.41	2348

Note: Total figure may not add to 100 due to 'don't know' and 'missing cases', <sup>a</sup> Literate but did not attend school are also included, ( ) Based on 10-20 unweighted cases. -- percentage not shown for less than 10 cases, na = Not applicable \*\* Unweighted cases.

**TABLE 2.6 OUTCOMES OF PREGNANCY**

Percent distribution of all pregnancies of currently married women age 15-49 years by outcomes since 01-01-2008 according to background characteristics, Nagaland, 2012-13.

Background characteristics	Number of Currently Married Women	Percentage of Currently pregnant women	Pregnancy outcome				Total percent	Number of pregnancies**
			Live birth	Still birth	Induced abortion	Spontaneous abortion		
<b>Age group</b>								
15-19	75	29.2	93.8	6.2	0.0	0.0	100.0	31
20-24	435	23.7	97.0	1.1	1.2	0.7	100.0	247
25-29	873	15.7	97.1	0.2	1.7	0.9	100.0	335
30-34	1014	7.8	95.7	0.9	1.3	2.1	100.0	243
35-39	1079	5.1	98.2	0.8	0.0	1.0	100.0	96
40-44	907	4.5	100.0	0.0	0.0	0.0	100.0	34
45-49	1055	2.9	(100.0)	(0.0)	(0.0)	(0.0)	(100.0)	14
<b>Place of resident</b>								
Urban	3999	8.1	97.2	0.9	1.0	0.8	100.0	749
Rural	1439	10.3	96.1	0.7	1.5	1.7	100.0	251
<b>Sex-composition of living children</b>								
One son only	567	11.2	97.8	0.5	1.1	.6	100.0	173
One daughter only	362	9.6	99.4	0.6	0.0	0.0	100.0	136
One son, one daughter only	663	5.8	99.2	0.0	0.8	0.0	100.0	134
Two sons only	368	9.5	97.1	0.0	1.1	1.7	100.0	72
Three sons only	106	2.1	(100.0)	(0.0)	(0.0)	(0.0)	(100.0)	17
Three daughters only	67	4.5	100.0	0.0	0.0	0.0	100.0	35
Four and above	1407	2.6	98.5	0.7	0.3	0.4	100.0	226
<b>Woman's Education</b>								
Non-literate <sup>a</sup>	789	9.2	98.9	1.1	0.0	0.0	100.0	161
Less than 5 years	493	6.7	97.3	0.0	0.0	2.7	100.0	70
5-9 years	2854	7.1	97.1	1.1	1.1	0.8	100.0	508
10 or more years	1302	12.9	95.2	0.5	2.4	1.8	100.0	261
<b>Husband's education</b>								
Non-literate <sup>a</sup>	609	11.7	98.3	1.7	0.0	0.0	100.0	105
Less than 5 years	332	7.9	98.6	0.0	0.0	1.4	100.0	73
5-9 years	2482	6.7	96.6	0.7	1.2	1.5	100.0	483
10 or more years	2015	10.6	96.6	1.0	1.8	0.7	100.0	339
<b>Religion</b>								
Hindu	219	8.1	93.4	2.2	4.4	0.0	100.0	52
Muslim	87	11.5	95.5	4.5	0.0	0.0	100.0	39
Christian	5121	8.7	97.3	0.6	0.9	1.2	100.0	907
Others	11	(32.5)	--	--	--	--	--	02
<b>Castes/tribes</b>								
Scheduled castes	164	10.2	94.6	3.3	2.1	0.0	100.0	55
Scheduled tribes	5027	8.0	97.2	0.6	1.1	1.2	100.0	896
Other backward classes	13	(0.0)	(100.0)	(0.0)	(0.0)	(0.0)	100.0	06
Others	234	23.5	94.7	2.6	2.6	0.0	100.0	43
<b>Nagaland</b>	<b>5438</b>	<b>8.8</b>	<b>96.9</b>	<b>0.9</b>	<b>1.2</b>	<b>1.1</b>	<b>100.0</b>	<b>1000</b>

Note: <sup>a</sup> Literate but did not attend school, are also included, ( ) Based on 10-20 unweighted cases, -- Percentage not shown for less than 10 cases, \*\* Unweighted cases.

**TABLE 2.7 OUTCOMES OF PREGNANCY**

Percent distribution of all pregnancies of currently married women age 15-49 years by outcomes since 01-01-2008 according to Districts, Nagaland, 2012-13.

Districts	Number of Currently Married Women	Percentage of Currently pregnant women	Pregnancy outcome				Total percent	Number of pregnancies**
			Live birth	Still birth	Induced abortion	Spontaneous abortion		
Mon	474	8.3	98.7	1.3	0.0	0.0	100.0	78
Tuensang	558	7.0	98.8	0.8	0.4	0.0	100.0	225
Mokokchung	374	4.1	100.0	0.0	0.0	0.0	100.0	99
Zunheboto	620	14.9	94.9	0.0	5.1	0.0	100.0	19
Wokha	457	5.9	100.0	0.0	0.0	0.0	100.0	104
Dimapur	685	11.5	90.8	1.7	3.9	3.6	100.0	229
Kohima	502	8.6	99.2	0.0	0.8	0.0	100.0	100
	339	7.4	100.0	0.0	0.0	0.0	100.0	16
Phek								
Kiphire	513	11.9	100.0	0.0	0.0	0.0	100.0	19
Longleng	468	11.0	100.0	0.0	0.0	0.0	100.0	38
Peren	448	9.5	94.6	2.7	0.0	2.7	100.0	73
<b>Nagaland</b>	<b>5438</b>	<b>100.0</b>	<b>96.9</b>	<b>0.9</b>	<b>1.2</b>	<b>1.1</b>	<b>100.0</b>	<b>1000</b>

\*\* Unweighted cases.

**TABLE 2.8 FERTILITY PREFERENCES**

Percent distribution of currently married women age 15-49 years by desire since January 2008 for additional child, by number of surviving children, Nagaland, 2012-13.

Desire for children	Number of surviving children					Total
	0	1	2	3	4+	
<b>Desire for additional/next child</b>						
Want another soon <sup>1</sup>	15.9	11.1	4.8	2.5	1.1	6.2
Want another later <sup>2</sup>	2.7	3.8	0.5	0.0	0.2	1.2
Want another, undecided when	17.8	8.7	3.1	1.2	0.7	5.4
Undecided	27.5	33.8	30.0	21.4	12.7	24.2
Want no more	11.5	21.4	44.8	53.2	64.4	42.2
Sterilized <sup>3</sup>	0.6	3.9	8.1	9.5	9.3	6.7
Declared in fecund	18.6	7.5	6.4	10.6	11.3	10.6
Inconsistent response	5.4	9.7	2.4	1.6	0.4	3.4
Total percent	100.0	100.0	100.0	100.0	100.0	100.0
Number of women**	846	929	1207	1037	1407	5426
<b>Preferred sex of additional/ next child</b>						
Boy	5.9	12.1	20.5	31.8	32.9	13.0
Girl	4.6	12.6	18.6	15.0	13.2	10.5
Doesn't matter	55.0	46.5	41.5	29.9	37.6	47.7
Up to God	34.5	28.7	19.4	23.3	16.2	28.8
Total percent	100.0	100.0	100.0	100.0	100.0	100.0
Number of women <sup>4**</sup>	355	322	139	58	37	911

<sup>1</sup> Want next birth within 2 years, <sup>2</sup> Want to delay next birth for 2 or more years, <sup>3</sup> Includes both female and male sterilization, <sup>4</sup> Includes women who want another/next child, \*\* Unweighted cases.





# **MATERNAL HEALTH CARE**

**TABLE 3.1 PLACE OF ANTENATAL CHECK-UP**

Percentage of women (aged 15-49) <sup>###</sup> who received any antenatal check-up (ANC) during pregnancy by source and place of antenatal check-ups, according to selected background characteristics, Nagaland, 2012-13.

Background characteristics	Any antenatal check-up <sup>1</sup>	Place of antenatal check-up				Number of women <sup>**</sup>
		Government health facility <sup>2</sup>		Private health facility <sup>3</sup>	Others <sup>4</sup>	
		Health facility	ICDS/Mobile unit			
<b>Age group</b>						
15-19	52.8	57.4	8.2	50.8	0.0	30
20-24	36.7	72.7	1.1	30.3	1.1	254
25-29	45.7	69.8	1.2	34.0	0.4	421
30-34	41.7	65.3	0.0	35.8	3.0	362
35+	39.5	70.2	0.0	29.8	0.0	283
<b>No. of Living Children</b>						
0	--	--	--	--	--	02
1	47.2	67.2	0.7	35.9	0.0	399
2	45.5	70.3	1.5	33.9	1.2	341
3	38.0	69.4	1.1	31.8	1.8	260
4+	34.5	68.6	0.0	31.0	2.2	348
<b>Residence</b>						
Rural	37.0	74.2	0.6	27.4	1.8	1020
Urban	53.4	59.9	1.2	43.7	0.0	330
<b>Education</b>						
Non literate <sup>a</sup>	28.2	66.0	1.7	32.4	4.5	215
Less than 5 years	36.5	81.3	0.0	12.9	5.8	93
9-10 years	38.5	75.5	1.0	27.4	0.6	710
10 or more years	58.2	58.7	0.6	45.2	0.0	332
<b>Religion</b>						
Hindu	68.7	53.7	0.0	46.3	0.0	69
Muslim	45.5	42.7	4.3	57.3	0.0	46
Christian	39.8	72.0	0.8	30.7	1.3	1234
Others	--	--	--	--	--	01
<b>Castes/tribes</b>						
Scheduled castes	63.2	42.5	2.2	55.8	1.7	65
Scheduled tribes	40.0	71.8	0.8	31.0	1.1	1223
Other backward classes	--	--	--	--	--	07
Others	49.9	63.0	0.0	37.0	0.0	55
<b>DLHS-4</b>	41.8	68.8	0.8	33.5	1.1	1350

Note: Total figure may not add to 100 percent due to multiple responses, 'do not know' and 'missing cases' <sup>###</sup> Women who had their last live/still birth since 01-01-2008, <sup>a</sup> Literate but did not attend school are also included, <sup>1</sup> Antenatal check-up done outside home or at home, <sup>2</sup> Includes sub-centre, primary health centre, community health centre or rural hospital, urban health centre/urban health post/ urban family welfare centre, government hospital or dispensary, <sup>3</sup> Includes private hospital/clinic, <sup>4</sup> Includes own home, parents home, other home and other, -- Percentage not shown based on less than 10 cases, \*\* Unweighted cases.

**TABLE 3.2 ANTENATAL CARE BY DISTRICT**

Percentage of women (aged 15-49) <sup>###</sup> who received any antenatal check-up (ANC) during pregnancy by source and place of antenatal check-ups by districts, Nagaland, 2012-13

District/State	Any ANC Check up	Place of antenatal check-up <sup>a</sup>				Number of Women <sup>**</sup>
		Government health facility <sup>1</sup>	Private health facility <sup>2</sup>	Others <sup>3</sup>		
		Health Facility	ICDS/Mobile Unit			
Mon	25.5	97.3	0.0	2.7	0.0	128
Tuensang	19.5	64.7	0.0	39.0	3.5	288
Mokokchung	74.2	86.7	1.3	14.6	1.9	134
Zunheboto	38.1	72.6	0.0	33.9	0.0	44
Wokha	30.0	58.6	0.0	41.4	0.0	137
Dimapur	57.2	47.0	2.1	53.7	1.8	266
Kohima	72.2	78.0	0.0	28.4	0.0	121
Phek	51.6	71.7	0.0	28.3	0.0	27
Kiphire	14.3	79.8	0.0	20.2	0.0	34
Longleng	18.8	91.9	0.0	8.1	0.0	71
Paran	34.2	80.5	0.0	22.2	0.0	100
<b>DLHS-4</b>	<b>41.8</b>	<b>68.8</b>	<b>0.8</b>	<b>33.5</b>	<b>1.1</b>	<b>1350</b>

Note: <sup>a</sup> Total figure may not add to 100 percent due to 'do not know' and 'missing cases'. <sup>###</sup> Women who had their last live/still birth since 01-01-2008, <sup>1</sup> Includes sub-centre, primary health centre, community health centre or rural hospital, urban health centre/ urban health post/ urban family welfare centre, government hospital or dispensary, <sup>2</sup> Includes Private hospital/clinic, <sup>3</sup> Includes own home, parents home, other home and others. <sup>\*\*</sup> Unweighted cases

**TABLE 3.3 COMPONENTS OF ANTENATAL CHECK-UP**

Percentage of women (aged 15-49) <sup>###</sup> who received specific components of antenatal check-up according to selected background characteristics, Nagaland, 2012-13.

Background characteristics	Weight measured	Height measured	Blood pressure checked	Blood tested (Hb)	Urine tested	Abdomen examined	Sonography /ultrasound	Number of Women**
<b>Age group</b>								
15-19	47.3	17.4	39.9	34.8	31.0	21.8	2.7	30
20-24	29.8	9.0	25.9	17.6	23.2	16.9	11.2	254
25-29	34.6	13.9	36.5	17.5	28.1	20.3	17.7	421
30-34	30.8	13.2	30.9	16.5	26.2	17.8	15.3	362
35+	28.2	9.6	30.6	12.8	24.2	17.0	11.0	283
<b>No. of Living Children</b>								
0	--	--	--	--	--	--	--	02
1	39.3	13.8	37.1	21.3	31.6	20.4	20.5	399
2	34.6	15.0	37.9	19.1	26.7	21.4	15.0	341
3	28.0	10.0	27.7	13.8	23.3	18.6	11.8	260
4+	22.3	8.5	22.7	10.9	20.2	12.4	7.5	348
<b>Residence</b>								
Rural	27.2	9.1	27.8	13.8	20.0	15.1	10.4	1020
Urban	42.2	18.9	41.6	23.7	40.1	26.1	22.9	330
<b>Education</b>								
Non- literate <sup>a</sup>	14.7	4.6	16.2	8.5	15.4	9.7	5.8	207
Less than five years	24.9	9.3	25.5	16.8	23.9	15.5	7.6	803
5-9 years	30.2	10.4	30.5	13.7	23.5	17.5	10.8	184
10 or more years	46.6	20.4	46.0	27.7	37.9	26.1	27.4	148
<b>Religion</b>								
Hindu	56.8	19.6	59.7	32.1	48.4	41.8	31.4	69
Muslim	24.0	9.3	24.6	18.7	30.4	15.3	12.7	46
Christian	30.3	11.5	30.3	15.5	24.2	16.9	13.0	1234
Others	--	--	--	--	--	--	--	01
<b>Castes/tribes</b>								
Scheduled Castes	45.4	20.0	47.7	25.0	48.0	31.6	23.3	65
Scheduled Tribes	30.5	11.6	30.5	15.3	24.3	17.0	13.1	1223
Other Backward Classes	--	--	--	--	--	--	--	07
Others	36.4	9.0	40.7	32.1	29.5	28.0	24.1	55
<b>DLHS-4</b>								
	31.7	12.0	31.9	16.7	25.9	18.3	14.1	1350

Note: Percentage may not add to 100.0 due to multiple responses. <sup>###</sup> Women who had their last live/still birth since 01-01-2008, <sup>a</sup> Literate but did not attend school, are also included, -- Percentage not shown for less than 10 cases, \*\* Unweighted cases.

**TABLE 3.4 WOMEN RECEIVED ADVICE DURING ANTENATAL CARE**Percentage of women (aged 15-49)<sup>###</sup> who received advice on different components, according to selected background characteristics, Nagaland, 2012-13

Background characteristics	Nutrition for mother and child	Cleanliness at the time of delivery	Institutional delivery	Keep baby warm	Breast feeding	Advice for family planning		Number of Women**
						Spacing	Limiting	
<b>Age group</b>								
15-19	32.2	39.7	12.6	30.3	26.2	26.3	18.2	30
20-24	22.2	21.8	21.2	23.8	20.2	17.2	16.6	254
25-29	31.7	27.5	29.2	38.6	35.2	30.4	26.0	421
30-34	29.2	23.2	21.2	30.8	28.9	20.4	23.4	362
35+	27.4	26.4	24.6	34.8	35.9	27.3	19.8	283
<b>No. of Living Children</b>								
0	--	--	--	--	--	--	--	02
1	28.6	27.9	24.3	32.9	28.5	24.9	22.7	399
2	32.6	28.9	30.8	36.8	37.3	27.1	23.7	341
3	31.1	21.3	21.5	26.7	26.7	19.3	19.4	260
4+	20.7	20.1	18.3	33.3	29.2	26.6	22.4	348
<b>Residence</b>								
Rural	25.2	24.0	22.4	31.6	31.2	27.3	21.4	1020
Urban	34.4	28.1	27.6	35.6	30.4	20.8	23.8	330
<b>Education</b>								
Non-literate <sup>a</sup>	19.2	12.8	13.6	18.3	18.3	11.3	15.5	207
Less than 5 years	19.8	23.8	26.3	35.8	22.8	30.1	14.0	803
5-9 years	27.5	25.5	22.9	32.9	28.8	23.6	22.6	184
10 or more year	34.3	29.7	29.2	37.4	38.7	29.8	25.2	148
<b>Religion</b>								
Hindu	26.8	35.0	24.7	39.5	33.4	23.5	20.0	69
Muslim	33.2	30.9	16.7	24.7	18.6	6.3	19.5	46
Christian	28.7	24.2	24.5	32.9	31.3	26.0	22.8	1234
Others	--	--	--	--	--	--	--	01
<b>Castes/tribes</b>								
Scheduled castes	29.7	33.6	24.0	33.3	28.3	23.4	26.2	65
Scheduled Tribes	28.3	23.5	24.2	32.4	30.8	26.1	23.1	1223
Other backward classes	--	--	--	--	--	--	--	07
Others	31.1	41.9	26.0	41.6	37.5	10.7	7.0	55
<b>DLHS-4</b>	28.6	25.5	24.4	33.1	30.9	24.8	22.3	1350

<sup>###</sup> Women who had their last live/still birth since 01-01-2008, <sup>a</sup> Literate but did not attend school are also included, -- Percentage not shown based on less than 10 cases, \*\* Unweighted cases.

**TABLE 3.5 (A) ANTENATAL CARE: ANC VISITS AND TIME OF FIRST ANC**

Percent distribution of women (aged 15-49) <sup>###</sup> by the number of antenatal check-up and the stage of pregnancy at the time of first check-up during pregnancy according to selected background characteristics, Nagaland, 2012-13.

Background characteristics	Number of ANC Check up				Stage of pregnancy at the time of the first antenatal check-up			Number of Women**
	No Check up	1	2	3+	First trimester	Second trimester	Third trimester	
<b>Age group</b>								
15-19	47.2	5.9	4.8	42.1	38.2	8.1	2.9	30
20-24	66.3	2.9	8.0	22.8	19.9	9.1	2.2	254
25-29	57.9	3.2	7.4	31.6	27.9	9.8	1.9	421
30-34	65.3	3.8	6.7	24.3	21.6	9.3	2.4	362
35+	65.5	3.8	7.5	23.1	21.9	7.4	1.8	283
<b>No. of Living Children</b>								
0	--	--	--	--	--	--	--	02
1	57.3	3.4	6.2	33.2	28.9	9.5	2.3	399
2	59.2	2.9	7.2	30.7	25.6	8.8	2.3	341
3	65.8	3.9	6.7	23.6	20.8	9.9	1.8	260
4+	70.7	3.8	9.1	16.3	17.8	8.0	2.0	348
<b>Residence</b>								
Rural	68.1	3.7	7.8	20.5	17.9	9.6	2.5	1020
Urban	50.2	3.0	6.0	40.7	37.6	7.7	1.2	330
<b>Education</b>								
Non-literate <sup>a</sup>	76.2	6.2	7.4	10.2	12.2	6.4	1.8	207
Less than 5 years	66.5	3.1	7.7	22.8	21.4	7.6	2.1	803
5-9 years	64.9	2.8	6.9	25.4	22.3	8.8	2.3	184
10 or more year	49.3	3.2	7.9	39.5	34.3	11.3	1.9	148
<b>Religion</b>								
Hindu	38.2	3.9	5.9	52.0	48.4	6.0	0.0	69
Muslim	57.8	6.1	10.7	25.5	29.4	8.6	0.0	46
Christian	64.7	3.3	7.2	24.7	21.8	9.2	2.3	1234
Others	--	--	--	--	--	--	--	01
<b>Castes/tribes</b>								
Scheduled castes	43.8	6.9	10.7	38.6	38.9	9.5	0.0	65
Scheduled Tribes	64.6	3.3	7.2	24.9	21.8	9.3	2.3	1223
Other backward classes	--	--	--	--	--	--	--	07
Others	49.7	1.9	5.2	43.3	42.9	3.6	0.0	55
<b>DLHS-4</b>	<b>62.8</b>	<b>3.5</b>	<b>7.3</b>	<b>26.5</b>	<b>23.7</b>	<b>9.0</b>	<b>2.1</b>	<b>1350</b>

<sup>###</sup> Women who had their last live/still birth since 01-01-2008, <sup>a</sup> Literate but did not attend school are also included, -- Percentage not shown for less than 10 cases, \*\* Unweighted cases.

**TABLE 3.5 (B) ANTENATAL CARE: TT, IFA AND ANC**

Percent distribution of women (aged 15-49)<sup>##</sup> by the number of tetanus toxoid (TT) injections and iron folic acid (IFA) tablets/syrup received during pregnancy, and the percentage who received full antenatal check-up (ANC) according to selected background characteristics, Nagaland, 2012-13.

Background characteristics	Women who received TT			Women who received IFA tablets/syrup equivalent		Full ANC <sup>b</sup>	Number of Women**
	No TT	1	2+	No IFA/syrup	100+ IFA tablets		
<b>Age group</b>							
15-19	51.5	3.0	45.5	0.0	10.9	10.9	30
20-24	65.8	7.2	27.0	0.6	7.9	6.1	254
25-29	56.8	8.4	34.8	2.0	13.7	12.2	421
30-34	60.4	7.8	31.9	0.5	11.8	10.0	362
35+	62.8	9.5	27.7	1.8	13.3	9.0	283
<b>No. of Living Children</b>							
0	--	--	--	--	--	--	02
1	55.8	7.4	36.8	0.8	15.3	13.6	399
2	57.1	10.7	32.1	1.9	11.3	8.7	341
3	63.2	8.5	28.3	1.3	12.3	9.6	260
4+	67.7	6.0	26.3	1.1	8.5	6.6	348
<b>Residence</b>							
Rural	65.8	7.4	26.8	1.2	9.2	7.1	1020
Urban	48.3	9.7	42.0	1.4	18.4	16.2	330
<b>Education</b>							
Non literate <sup>a</sup>	75.3	6.4	18.3	0.0	3.5	1.7	207
Less than 5 years	65.4	4.1	30.5	0.0	14.6	11.4	803
5-9 years	63.2	7.1	29.7	1.0	10.1	8.0	184
10 or more years	45.0	12.1	42.9	2.9	20.3	17.8	148
<b>Religion</b>							
Hindu	35.5	11.9	52.6	1.1	24.1	21.1	69
Muslim	56.2	9.7	34.2	0.0	8.9	7.2	46
Christian	62.5	7.8	29.7	1.3	11.3	9.1	1234
Others	--	--	--	--	--	--	01
<b>Castes/tribes</b>							
Scheduled castes	39.5	13.1	47.5	1.2	16.5	13.3	65
Scheduled tribes	62.3	7.8	29.9	1.3	11.5	9.3	1223
Other backward classes	--	--	--	--	--	--	07
Others	51.6	7.9	40.5	0.0	16.5	15.0	55
<b>DLHS-4</b>	60.6	8.1	31.3	1.2	11.9	9.8	1350

Note: Percentage may not add to 100.0 due to multiple responses, do not know or missing cases.<sup>##</sup> Women who had their last live/still birth since 01-01-2008, <sup>a</sup> Literate but did not attend school are also included, -- Percentage not shown for less than 10 cases.  
<sup>b</sup> At least three visits for antenatal check-up, at least one TT injection received and 100+ IFA tablets/ syrup consumed, \*\* Unweighted cases.



**TABLE 3.6 ANTENATAL CARE INDICATORS AND PREGNACY COMPLICATIONS**Percentage of women (aged 15-49) <sup>###</sup> who received different types of antenatal care (ANC) by districts, Nagaland, 2012-13.

District/State	antenatal check-up in the first trimester of pregnancy	three or more antenatal check-up	at least one tetanus toxoid injection	100+ IFA tablets/ syrup <sup>1</sup>	full antenatal check-up <sup>2</sup>	Any complicatio ns	Number of Women**
Mon	10.9	9.7	25.5	4.8	3.4	69.7	128
Tuensang	9.1	10.6	16.0	5.2	4.5	16.3	288
Mokokchung	27.5	46.6	72.0	26.0	21.3	27.7	134
Zunheboto	19.2	30.8	35.5	15.2	12.6	17.8	44
Wokha	25.1	25.4	30.0	6.0	6.0	18.0	137
Dimapur	37.8	38.1	52.9	17.1	12.9	43.1	266
Kohima	45.0	42.2	67.5	17.7	14.5	34.4	121
Phek	36.9	40.6	51.6	18.7	18.7	15.3	27
Kiphire	2.9	5.5	11.5	5.7	2.9	37.9	34
Longleng	7.5	11.3	17.5	7.5	7.5	13.1	71
Paren	15.2	16.1	33.3	4.7	2.8	59.2	100
<b>DLHS-4</b>	23.7	26.5	39.3	11.9	9.8	33.1	1350

<sup>###</sup> Women who had their last live/still birth since 01-01-2008, <sup>1</sup>100 or more iron folic acid tablets including syrup, <sup>2</sup> At least three visits for antenatal check-up, at least one TT injection received and 100+ IFA tablets/ syrup consumed, \*\* Unweighted cases.

**TABLE 3.7 PLACE OF DELIVERY AND ASSISTANCE**

Percent distribution of women (aged 15-49) <sup>###</sup> according to place of delivery, assistance during home deliveries, and safe deliveries according to background characteristics, Nagaland, 2012-13.

Background characteristics	Institutional delivery			delivery at home	Home delivery assisted by skilled persons <sup>1</sup>	Percentage of SBA deliveries	Number of women**
	Government	Private	Total				
<b>Age group</b>							
15-19	21.8	7.3	29.2	64.8	30.0	59.2	30
20-24	24.2	6.7	30.9	66.8	16.9	47.7	254
25-29	22.4	10.6	33.0	63.5	17.5	50.5	421
30-34	21.9	8.9	30.9	64.3	15.0	45.9	362
35+	16.3	7.8	24.1	71.9	20.1	44.1	283
<b>No. of Living Children</b>							
0	--	--	--	--	--	--	02
1	29.2	12.8	42.0	55.1	18.0	60.0	399
2	22.6	8.0	30.6	66.7	19.3	49.8	341
3	19.9	7.8	27.7	67.4	13.5	41.2	260
4+	11.7	5.6	17.3	77.5	18.5	35.7	348
<b>Residence</b>							
Rural	16.6	5.8	22.3	72.6	16.9	39.3	1020
Urban	32.7	15.9	48.5	50.8	19.0	67.5	330
<b>Education</b>							
Non literate <sup>a</sup>	10.8	3.3	14.1	77.6	13.1	27.2	207
Less than 5 years	12.1	1.1	13.2	83.5	20.8	34.0	803
5-9 years	21.7	7.5	29.2	67.1	18.1	47.2	184
10 or more years	29.3	16.7	46.0	52.7	18.4	64.4	148
<b>Religion</b>							
Hindu	40.5	25.2	65.7	34.3	13.1	78.8	69
Muslim	21.2	19.8	41.0	57.4	6.2	47.2	46
Christian	20.1	7.1	27.2	68.7	18.4	45.5	1234
Others	--	--	--	--	--	--	01
<b>Castes/tribes</b>							
Scheduled castes	27.8	24.0	51.8	47.1	10.6	62.4	65
Scheduled tribes	20.0	7.0	26.9	68.9	18.4	45.3	1223
Other backward classes	25.4	19.2	44.6	55.4	13.8	58.5	07
Others	39.4	23.5	62.9	37.2	10.3	73.1	55
<b>DLHS-4</b>	21.3	8.8	30.1	66.1	17.5	47.6	1350

Note: <sup>###</sup> Women who had their last live/still birth since 01-01-2008, <sup>a</sup> Literate but did not attend school are also include. <sup>1</sup> Includes Doctor/ANM/Nurse, <sup>2</sup> Skilled Birth Attendant, Percentage of women who had institutional and home delivery may not add to 100.0, as some deliveries took place on the way to the institute, working place, other place etc -- Percentage not shown for less than 10 cases, \*\* Unweighted cases

**TABLE 3.8 MODE OF TRANSPORTATION USED FOR DELIVERY AND ARRANGEMENT OF TRANSPORTATION**Percent distribution of women (aged 15-49)<sup>###</sup> who had institutional delivery, according to the transportation used to reach the health facility for delivery and transportation arrangement made according to selected background characteristics, Nagaland, 2012-13

Background characteristics	Mode of transportation used to reach the health facility for delivery				Govt. financial assistance for delivery care (JSY) <sup>c</sup>		Number of women**	Mean Transport cost (Rupees)	Mean Delivery cost (Rupees)		Number of women**
	Ambulance	Jeep/ car	Motor cycle/ scooter	Others <sup>1</sup>	Institutional	Home			Govt.	Private	
<b>Age group</b>											
15-19	3.2	18.9	0.0	7.0	23.4	4.8	30	600	5600	2300	05
20-24	0.7	19.8	0.7	9.6	42.8	11.5	254	947	5759	6875	35
25-29	1.7	20.8	2.4	8.6	38.7	6.2	421	950	4669	13454	63
30-34	1.7	22.1	0.2	7.6	42.1	6.4	362	1219	8416	20491	60
35+	0.7	18.6	0.9	4.2	32.0	7.3	283	1369	7658	13650	29
<b>No. of Living Children</b>											
0	--	--	--	--	--	--	02	-	5500	-	01
1	1.8	29.1	1.4	10.2	38.5	8.3	399	1133	6681	18624	80
2	1.5	19.5	1.5	8.1	44.6	12.5	341	1063	6483	11211	47
3	1.2	20.2	1.1	6.4	41.1	4.7	260	1550	5781	14145	32
4+	0.5	11.6	0.5	4.9	28.3	4.2	348	966	6810	15989	32
<b>Residence</b>											
Rural	1.0	15.2	1.1	5.4	47.0	8.4	1020	1094	6656	14739	117
Urban	2.1	33.0	1.2	12.7	30.2	4.2	330	1211	6166	15834	75
<b>Education</b>											
Non literate <sup>a</sup>	0.0	7.2	0.5	6.4	35.1	3.2	207	1033	8411	15400	13
Less than 5	0.0	6.4	0.9	5.9	37.5	8.2	803	330	3375	00	08
5-9 years	1.6	18.8	1.6	7.8	39.8	8.0	184	957	6108	8536	96
10 or more years	1.9	35.4	0.6	8.3	38.7	9.7	148	1434	7382	20350	75
<b>Religion</b>											
Hindu	1.6	28.0	1.3	34.8	45.4	0.0	69	1308	7121	13644	21
Muslim	1.9	14.1	0.0	25.0	10.9	0.0	46	957	9900	11867	11
Christian	1.3	20.3	1.2	4.9	39.9	8.0	1234	1134	6286	16360	159
Others	--	--	--	--	--	--	01	-	-	4000	01
<b>Castes/tribes</b>											
Scheduled Castes	1.4	24.1	0.0	26.3	31.2	0.0	65	632	7856	14222	17
Scheduled Tribes	1.4	20.1	1.2	4.7	39.8	7.9	1223	1162	6404	16498	154
Other backward classes	--	--	--	--	--	--	07	350	2750	-	02
Others	0.0	24.4	1.6	36.8	38.2	0.0	55	2250	7182	10000	19
<b>DLHS-4</b>	1.3	20.5	1.1	7.6	39.0	7.5	1350	1132	6504	15348	192

<sup>###</sup> Women who had their last live/still birth since 01-01-2008, <sup>a</sup> Literate but did not attend school are also included, <sup>1</sup> Includes bus/train, tempo/auto/tractor, animal drawn cart, foot march, <sup>b</sup> Total figure may not add to 100 percent due to don't know or missing cases, <sup>c</sup> Percentage women who got JSY assistance., -- Percentage not shown for less than 10 cases. \*\* Unweighted cases.

<b>TABLE 3.9 PLACE OF DELIVERY AND ASSISTANCE CHARACTERISTICS BY DISTRICT</b>						
Percent distribution of women (aged 15-49) <sup>###</sup> according to place of delivery, assistance during home deliveries, and safe deliveries by districts, Nagaland, 2012-13.						
District/State	Percentage of women who had institutional delivery	Percentage of women who had delivery at home	Home delivery assisted by skilled persons <sup>1</sup>	Percentage of SBA Delivery <sup>2</sup>	Mean Delivery cost	Number of Women <sup>**</sup>
Mon	15.9	84.1	24.0	39.9	3017	128
Tuensang	10.7	75.2	4.0	14.7	6131	288
Mokokchung	42.8	56.4	35.8	78.7	13861	134
Zunheboto	21.6	75.9	26.5	48.1	3750	44
Wokha	18.2	81.8	35.2	53.3	11392	137
Dimapur	52.0	47.6	13.9	65.9	10776	266
Kohima	44.4	49.8	15.3	59.8	5681	121
Phek	32.5	67.5	29.7	62.2	6000	27
Kiphire	31.5	59.0	3.7	35.2	1917	34
Longleng	17.5	82.5	12.3	29.8	2000	71
Paran	20.9	79.1	12.5	33.5	3200	100
<b>DLHS-4</b>	30.1	66.1	17.5	47.6	9406	1350

Note: Percentage of women who had institutional and home delivery may not add to 100.0, as some deliveries took place on the way to the institute, working place, other place etc, <sup>###</sup>Women who had their last live/still birth since 01-01-2008, <sup>1</sup> Includes Doctor/ANM/Nurse, <sup>2</sup> Skilled Birth Attendants, <sup>\*\*</sup> Unweighted cases.

**TABLE 3.10 REASONS FOR NOT GOING TO HEALTH INSTITUTIONS FOR DELIVERY**Percent distribution of women (aged 15-49) <sup>###</sup> according to main reasons for not going to health institution for delivery, according to selected background characteristics, Nagaland, 2012-13.

Background characteristics	Reasons										Number of women**
	Cost too much	Poor quality service	Too far/ No transport	No time to go	Not Necessary	Not Customary	Better care at home	Family did not allow	Lack of knowledge	Other	
<b>Age group</b>											
15-19	(0.0)	(0.0)	(5.3)	(15.8)	(26.3)	(0.0)	(42.1)	(5.3)	(5.3)	(0.0)	19
20-24	1.1	2.0	23.6	18.4	17.4	1.8	28.1	0.6	3.3	4.0	171
25-29	0.9	1.4	22.7	14.8	25.3	0.7	28.2	0.0	4.0	2.2	273
30-34	3.4	3.0	23.0	10.4	20.5	1.4	32.3	0.6	4.9	0.4	237
35+	2.0	1.3	27.4	15.4	22.6	1.4	23.3	1.7	4.3	0.5	207
<b>No. of Living Children</b>											
0	--	--	--	--	--	--	--	--	--	--	01
1	0.4	2.9	17.5	16.5	24.5	0.0	32.2	0.9	3.6	1.4	226
2	2.8	0.0	21.9	13.1	24.0	2.8	27.6	0.4	5.2	2.2	230
3	1.8	3.4	28.9	16.8	17.4	0.8	24.8	0.7	4.4	1.0	179
4+	2.1	1.6	26.4	12.9	21.1	1.2	28.4	1.0	3.6	1.7	271
<b>Residence</b>											
Rural	1.2	1.5	28.0	14.9	18.3	1.6	27.5	0.6	4.9	1.4	739
Urban	3.8	3.2	8.4	13.5	34.2	0.0	31.5	1.3	1.7	2.4	168
<b>Education</b>											
Non literate <sup>a</sup>	2.7	1.0	25.4	14.6	19.1	0.5	24.5	2.1	8.1	2.0	169
Less than 5 years	0.0	1.3	40.4	12.9	11.8	7.9	21.0	1.8	2.9	0.0	77
5-9 years	1.8	2.2	24.6	13.3	20.4	0.6	30.7	0.5	4.1	1.8	484
10 or more years	1.6	2.0	12.8	18.7	32.5	0.9	28.8	0.0	1.1	1.6	177
<b>Religion</b>											
Hindu	12.6	4.2	10.9	11.8	27.3	0.0	20.8	4.7	0.0	7.7	24
Muslim	6.6	0.0	11.2	27.7	13.1	2.8	12.3	7.8	13.5	5.0	26
Christian	1.3	1.9	24.5	14.2	22.1	1.2	29.2	0.4	4.0	1.3	857
Others	--	--	--	--	--	--	--	--	--	--	00
<b>Castes/tribes</b>											
Scheduled castes	6.0	0.0	7.7	27.3	24.8	2.4	9.6	6.6	8.4	7.2	31
Scheduled tribes	1.3	1.9	24.5	14.4	22.0	1.2	29.1	0.4	4.0	1.3	852
Other backward classes	--	--	--	--	--	--	--	--	--	--	04
Others	14.4	5.0	19.5	5.0	5.2	0.0	35.4	5.9	5.0	4.7	20
<b>DLHS-4</b>	1.8	1.9	23.6	14.6	22.0	1.2	28.4	0.8	4.2	1.7	907

<sup>##</sup> Women who had their last live/still birth since 01-01-2008, <sup>a</sup> Literate but did not attend school, are also included, ( ) Based on 10-20 unweighted cases. -- Percentage not shown based on less than 10 cases.\*\* Unweighted cases

<b>TABLE 3.11 DELIVERY COMPLICATIONS</b>								
Percentage of women (aged 15-49) <sup>###</sup> who had complication during delivery and type of complications during delivery, according to selected background characteristics, Nagaland, 2012-13.								
Background characteristics	Any delivery complication	Type of delivery complications						Number of Women**
		Premature labour	Excessive bleeding	Prolonged labour	obstructed labour	Breech presentation	Convulsion/high BP	
<b>Age group</b>								
15-19	33.8	0.0	27.2	56.4	18.8	0.0	26.4	30
20-24	19.6	23.4	17.3	60.8	29.3	3.7	7.7	254
25-29	19.1	15.7	15.7	66.6	36.4	2.2	13.3	421
30-34	19.9	19.1	17.9	64.3	31.9	5.1	10.3	362
35+	16.8	13.8	17.2	68.0	44.0	7.3	13.0	283
<b>No. of Living Children</b>								
0	--	--	--	--	--	--	--	02
1	22.7	19.7	17.4	59.6	28.5	1.1	12.7	399
2	16.7	21.9	11.9	69.4	24.8	1.8	10.9	341
3	20.0	7.3	17.3	67.0	49.3	5.1	10.9	260
4+	17.1	17.3	21.2	67.0	40.6	10.4	11.1	348
<b>Residence</b>								
Rural	19.1	17.0	19.0	59.8	34.1	5.4	14.6	1020
Urban	19.7	17.3	13.6	76.1	35.3	1.2	5.8	330
<b>Number of ANC Visits</b>								
No visit	19.9	12.3	19.3	69.0	40.4	4.7	11.2	862
1	23.9	36.1	12.2	40.9	11.8	9.3	10.6	48
2	13.7	25.1	12.4	56.6	25.8	0.0	6.0	99
3+	18.9	24.2	14.4	59.4	25.0	2.8	15.1	340
<b>Delivery</b>								
Normal	18.3	16.9	18.7	63.9	34.5	4.1	11.6	1299
Caesarean	43.2	21.7	4.0	69.7	37.7	4.7	16.4	46
By Instrument or Assisted	--	--	--	--	--	--	--	03
<b>Place of Delivery</b>								
Government facility	21.0	19.4	14.3	55.8	32.3	0.0	14.2	278
Private facility	31.0	24.6	18.9	67.4	11.9	10.1	10.0	110
Home	18.2	14.7	18.3	67.1	40.6	4.4	11.6	907
Other	2.5	0.0	0.0	100.0	0.0	0.0	0.0	53
<b>DLHS-4</b>	19.3	17.1	17.4	64.7	34.4	4.1	11.9	1350

Note: Total figure may not add to 100 percent due to 'multiple responses', 'don't know' or 'missing cases', <sup>###</sup> Women who had their last live/still birth since 01-01-2008, -- Percentage not shown for less than 10 cases. \*\* Unweighted cases.

**TABLE 3.12 POST-DELIVERY COMPLICATIONS**

Percentage of women (aged 15-49) <sup>##</sup> who had post delivery complication and type of complications, according to selected background characteristics, Nagaland, 2012 -13.

Background characteristics	Any post delivery complication	Type of post delivery complication				Number of women**
		High fever	Lower abdominal pain	Foul smelling vaginal discharge	Excessive bleeding	
<b>Age group</b>						
15-19	27.5	82.4	78.4	26.9	26.9	30
20-24	14.5	38.5	41.5	11.1	34.8	254
25-29	11.2	35.1	58.1	6.4	22.9	421
30-34	14.2	41.6	40.0	13.8	19.9	362
35+	11.8	36.2	73.0	25.5	5.5	283
<b>No. of Living Children</b>						
0	--	--	--	--	--	02
1	15.9	35.2	51.9	10.0	24.6	399
2	11.0	48.4	46.0	15.9	20.5	341
3	12.1	43.3	61.0	18.0	18.8	260
4+	12.6	36.8	57.4	16.0	20.1	348
<b>Residence</b>						
Rural	12.2	42.4	48.1	15.1	23.3	1020
Urban	15.4	36.0	62.9	12.1	18.0	330
<b>Delivery</b>						
Normal	12.3	42.1	52.5	15.0	22.8	1299
Caesarean	31.4	25.7	54.6	6.1	10.4	46
By Instrument or Assisted	67.8	0.0	100.0	0.0	0.0	03
<b>Place of Delivery</b>						
Government facility	15.8	37.6	50.9	8.4	21.4	278
Private facility	21.7	15.6	68.6	19.7	12.9	110
Home	11.8	47.7	51.0	15.3	22.9	907
Others	--	--	--	--	--	53
<b>Who Conducted the Last Delivery</b>						
Doctor	0.0	--	--	--	--	04
ANM/Nurse/Midwife/LHV	10.1	45.8	78.0	8.4	16.1	123
Dai	14.2	45.4	60.9	19.4	32.0	147
Relatives/Friends	11.1	46.8	42.9	15.1	22.5	673
None	(93.8)	(100.0)	(100.0)	(0.0)	(0.0)	16
<b>DLHS-4</b>	13.1	40.2	53.3	14.1	21.5	1350

<sup>##</sup> Women who had their last live/still birth since 01-01-2008, -- Percentage not shown based on less than 10 cases, \*\* Unweighted cases.

**TABLE 3.13 ANY CHECK-UP AFTER DELIVERY**Percentage of women (aged 15-49) <sup>###</sup> whether received any check-up after delivery according to background characteristics, Nagaland, 2012-13.

Background characteristics	Check up within 48 hours after delivery	Check up within 48 hours after delivery at Home	Check up within 2 weeks after delivery	Check up within 14 to 42 days after delivery	Number of Women**
<b>Age group</b>					
15-19	19.1	6.3	19.1	27.1	30
20-24	19.7	3.9	21.1	22.5	254
25-29	25.8	5.9	30.1	33.4	421
30-34	21.8	4.3	25.5	26.7	362
35+	16.5	4.2	20.3	21.9	283
<b>No. of Living Children</b>					
0	--	--	--	--	02
1	27.1	5.5	30.1	32.5	399
2	24.1	4.7	27.0	28.7	341
3	20.2	4.5	22.4	24.5	260
4+	13.1	4.3	18.3	20.7	348
<b>Residence</b>					
Rural	16.1	4.2	18.8	20.5	1020
Urban	34.3	6.5	39.4	42.5	330
<b>Education</b>					
Non literate <sup>a</sup>	12.4	4.4	15.6	16.9	207
Less than 5 years	10.6	3.1	11.6	17.2	803
5-9 years	17.6	3.7	21.0	22.9	184
10 or more years	37.6	8.3	41.8	44.0	148
<b>Religion</b>					
Hindu	52.7	14.1	55.7	55.7	69
Muslim	35.9	9.8	40.3	48.0	46
Christian	18.7	4.2	22.1	24.1	1234
Others <sup>#</sup>	--	--	--	--	01
<b>Castes/tribes</b>					
Scheduled castes	44.6	15.8	47.8	53.2	65
Scheduled tribes	18.9	4.4	22.3	24.4	1223
Other backward classes	--	--	--	--	07
Others	43.8	0.0	47.6	47.6	55
<b>DLHS-4</b>	21.5	4.7	24.9	27.0	1350

<sup>###</sup> Women who had their last live/still birth since 01-01-2008, <sup>a</sup> Literate but did not attend school, are also included, -- Percentage not shown for less than 10 cases. \*\* Unweighted cases.



**TABLE 3.14 COMPLICATIONS DURING PREGNANCY, DELIVERY AND POST-DELIVERY PERIOD**

Percentage of women (aged 15-49)<sup>##</sup> who had extent of pregnancy, delivery and post-delivery complications and sought treatment for the problem according to background characteristics, Nagaland, 2012-13.

Background characteristics	Who had complication during pregnancy	Sought treatment for pregnancy complication <sup>1</sup>	Who had delivery complication	Who had post- delivery complication	Sought treatment for post-delivery complication <sup>2</sup>	Number of women**
<b>Age group</b>						
15-19	30.3	37.5	33.8	27.5	57.4	30
20-24	34.0	24.7	19.6	14.5	36.1	254
25-29	32.5	32.6	19.1	11.2	35.5	421
30-34	32.5	23.4	19.9	14.2	26.6	362
35+	34.0	19.1	16.8	11.8	29.2	283
<b>No. of living Children</b>						
0	--	--	--	--	--	02
1	36.0	31.1	22.7	15.9	40.1	399
2	26.5	20.0	16.7	11.0	24.5	341
3	31.8	34.9	20.0	12.1	38.5	260
4+	36.8	17.8	17.1	12.6	21.7	348
<b>Residence</b>						
Rural	33.7	22.1	19.1	12.2	24.5	1020
Urban	31.6	35.6	19.7	15.4	49.4	330
<b>Education</b>						
Non literate <sup>a</sup>	35.7	13.9	18.8	18.5	18.7	207
Less than five years	37.3	14.8	18.0	10.2	0.0	803
5-9 years	30.5	23.4	17.6	10.4	37.2	184
10 or more years	35.6	40.4	23.3	16.0	41.3	148
<b>Religion</b>						
Hindu	45.3	28.9	10.1	21.2	32.3	69
Muslim	41.7	50.5	26.2	39.7	49.3	46
Christian	31.9	24.2	19.6	11.4	30.1	1234
Others	--	--	--	--	--	01
<b>Castes/tribes</b>						
Scheduled castes	45.9	39.7	21.8	36.0	47.8	65
Scheduled tribes	32.1	23.9	19.7	11.6	30.1	1223
Other backward classes	--	--	--	--	--	07
Others	38.7	38.3	10.5	15.4	22.4	55
<b>DLHS-4</b>	33.1	25.9	19.3	13.1	32.8	1350

<sup>##</sup> Women who had their last live/still birth since 01-01-2008, <sup>a</sup> Literate but did not attend school are also included, <sup>1</sup> Women who reported at least one complication of pregnancy, <sup>2</sup> Women who reported at least one post delivery complication. -- Percentage not shown for less than 10 cases,\*\* Unweighted cases.

**TABLE 3.15 COMPLICATIONS DURING PREGNANCY, DELIVERY AND POST-DELIVERY PERIOD**

Percentage of women (aged 15-49)<sup>##</sup> who had extent of pregnancy, delivery and post-delivery complications and sought treatment for the problem according to by districts, Nagaland, 2012-13.

Districts	Who had complication during pregnancy	Sought treatment for pregnancy complication <sup>1</sup>	Who had delivery complication	Who had post-delivery complication	Sought treatment for post-delivery complication <sup>2</sup>	Number of women**
Mon	69.7	2.0	44.9	4.7	0.0	128
Tuensang	16.3	20.4	10.6	9.5	9.3	288
Mokokchung	27.7	23.5	29.0	14.7	40.1	134
Zunheboto	17.8	75.8	8.4	6.6	100.0	44
Wokha	18.0	29.6	12.6	10.1	37.7	137
Dimapur	43.1	45.9	23.0	23.5	44.5	266
Kohima	34.4	35.1	14.9	19.0	36.3	121
Phek	15.3	73.6	14.7	0.0	na	27
Kiphire	37.9	6.8	20.2	14.7	0.0	34
Longleng	13.1	22.6	13.9	13.0	0.0	71
Paran	59.2	10.0	12.1	4.8	19.6	100
<b>DLHS-4</b>	<b>33.1</b>	<b>25.9</b>	<b>19.3</b>	<b>13.1</b>	<b>32.8</b>	<b>1350</b>

<sup>##</sup> Women who had their last live/still birth since 01-01-2008, <sup>1</sup> Women who reported at least one complication of pregnancy.

<sup>2</sup> Women who reported at least one post delivery complication, na= not applicable \*\* Unweighted cases.

**TABLE 3.16 AWARENESS OF THE DANGER SIGNS OF NEW BORN**

Percentage of women (aged 15-49) <sup>###</sup> who had awareness of the danger signs of new born, according to selected background characteristics, Nagaland, 2012-13.

Background characteristic	Difficulty in breathing	Cold/ hot to touch	Develop yellow staining on palm and soles	Blue tongue & Lips	Abnormal movement	Poor sucking of breast	Baby did not cry	Number of Women**
<b>Age group</b>								
15-19	12.6	23.1	10.2	9.5	3.2	20.0	15.0	30
20-24	11.8	16.8	3.7	6.8	3.4	15.9	15.3	254
25-29	17.3	22.4	4.4	9.4	5.9	23.5	16.5	421
30-34	13.4	16.1	3.6	7.5	4.4	18.9	12.4	362
35+	12.4	17.8	4.2	8.1	5.0	15.0	15.3	283
<b>Children ever born</b>								
0	--	--	--	--	--	--	--	02
1	14.9	19.2	3.5	8.8	4.7	19.1	16.6	399
2	16.0	20.6	4.8	8.6	4.4	22.0	14.3	341
3	13.7	14.2	3.3	6.6	4.8	16.1	11.7	260
4+	11.7	19.4	4.6	7.9	4.8	18.1	15.8	348
<b>Residence</b>								
Rural	13.7	17.0	3.8	7.7	4.3	17.2	14.3	1020
Urban	15.1	22.9	5.1	9.1	5.9	23.2	16.3	330
<b>Education</b>								
Non literate <sup>a</sup>	11.4	16.9	1.2	3.6	1.4	14.5	12.3	207
Less than 5 years	11.8	13.1	1.8	0.9	4.9	16.3	9.5	803
9-10 years	11.9	18.0	3.8	6.8	5.0	17.4	13.4	184
10 or more years	20.8	22.6	7.1	15.5	6.3	25.6	20.9	148
<b>Religion</b>								
Hindu	13.1	18.2	2.5	2.2	3.2	22.0	16.2	69
Muslim	19.2	29.6	4.2	7.8	4.0	16.4	20.3	46
Christian	14.0	18.3	4.3	8.6	4.9	18.9	14.6	1234
Others	--	--	--	--	--	--	--	01
<b>Castes/tribes</b>								
Scheduled castes	16.9	29.6	3.8	6.2	5.9	27.4	29.4	65
Scheduled tribes	13.8	18.2	4.2	8.5	4.9	18.8	14.5	1223
Other backward classes	--	--	--	--	--	--	--	07
Others	16.1	16.2	3.6	3.4	1.8	12.6	5.9	55
<b>DLHS-4</b>								
	14.1	18.7	4.2	8.2	4.8	19.0	14.9	1350

<sup>###</sup> Women who had their last live/still birth since 01-01-2008, <sup>a</sup> Literate but did not attend school are also included, -- Percentage not shown for less than 10 cases. \*\* Unweighted cases

# **CHILD HEALTH CARE AND IMMUNIZATION**



**TABLE 4.1 TIMING AND CHILDHOOD CHECK-UPS**

Percentage of children aged under 3 years received check up and place of check-up according to selected background characteristics, Nagaland, 2012-13

Background characteristics	Children received Check-up within 24 hours of birth	Number of children**	Place of check-up <sup>4</sup>				Total	Number of children <sup>4**</sup>
			Government <sup>1</sup>	Private <sup>2</sup>	Home <sup>3</sup>	Others		
<b>Age group</b>								
15-19	16.2	29	--	--	--	--	--	05
20-24	17.4	216	95.1	4.9	0.0	0.0	100.0	38
25-29	16.5	302	58.5	37.4	0.0	4.1	100.0	47
30-34	18.4	225	60.3	39.7	0.0	0.0	100.0	40
35-39	10.5	91	--	--	--	--	--	09
40-44	7.6	32	--	--	--	--	--	02
45-49	(36.9)	12	--	--	--	--	--	04
<b>Residence</b>								
Rural	13.3	686	70.3	29.7	0.0	0.0	100.0	91
Urban	24.1	221	61.7	35.5	0.0	2.8	100.0	54
<b>Mother's education</b>								
Non-literate <sup>a</sup>	11.9	146	63.9	36.1	(0.0)	(0.0)	(100.0)	17
Less than 5 years	6.7	63	--	--	--	--	--	04
5-9 years	13.8	454	70.3	29.7	0.0	0.0	100.0	62
10 or more years	26.1	244	60.9	36.2	0.0	2.9	100.0	62
<b>Religion</b>								
Hindu	35.8	49	(69.3)	30.7	(0.0)	(0.0)	(100.0)	18
Muslim	15.8	32	--	--	--	--	--	05
Christian	15.2	825	66.7	31.4	0.0	2.0	100.0	122
Others	--	1	--	--	--	--	--	00
<b>Castes/Tribes</b>								
Scheduled Castes	17.5	48	28.5	71.5	--	--	--	09
Scheduled Tribes	15.3	816	68.4	31.7	0.0	2.0	100.0	121
Other Backward Classes	22.3	6	--	--	--	--	--	01
Others	36.9	37	(69.6)	30.4	(0.0)	(0.0)	(100.0)	14
<b>DLHS-4</b>	16.5	907	65.8	32.7	0.0	1.5	100.0	145

Note: Table based on youngest living child born since 01.01.2008, <sup>a</sup> Literate but did not attend school are also included, <sup>1</sup> Includes government hospital or dispensary, urban health centre/ urban health post/ urban family welfare centre, community health centre or rural hospital, primary health centre, sub-centre, ICDS and Govt. AYUSH hospital /clinic, <sup>2</sup> Includes non-governmental hospital/ trust hospital or clinic, private hospital/clinic and private AYUSH hospital /clinic, <sup>3</sup> Includes Doctor ASHA and ANM/Nurse, <sup>4</sup> Among those Children who received check-up within 24 hours of birth, -- Percentage not shown based on less than 10 cases, ( ) Based on 10-20 unweighted cases, \*\* Unweighted cases.

<b>TABLE 4.2 INITIATION OF BREASTFEEDING</b>					
Percentage of youngest living child born since 01.01.2008 aged under 3 years whose mother started breastfeeding within one hour of birth, within 24 hours of birth and after 24 hours of birth according to selected background characteristics, Nagaland, 2012-13.					
Background characteristics	Children received Colostrum/ <i>Khees</i> <sup>b</sup>	Initiation of breastfeeding			Number of children**
		Within one hour of birth	Within 24 hours of birth <sup>1</sup>	After 24 hours of birth	
<b>Age group</b>					
15-19	44.4	43.4	78.2	18.4	29
20-24	63.1	45.0	90.1	6.5	216
25-29	53.9	39.0	88.4	7.1	302
30-34	66.0	47.7	89.0	6.3	225
35-39	54.8	38.9	87.0	5.4	91
40-44	60.7	45.9	83.9	13.4	32
45-49	(75.0)	(58.3)	(100.0)	(0.0)	12
<b>Residence</b>					
Rural	61.7	47.4	89.9	6.0	686
Urban	53.7	33.2	85.1	9.7	221
<b>Mother's education</b>					
Non-literate <sup>a</sup>	62.2	52.3	83.1	13.0	146
Less than 5 years	59.8	45.9	93.2	3.8	63
5-9 years	59.8	42.5	91.0	5.0	454
10 or more years	56.7	38.6	85.9	8.2	244
<b>Religion</b>					
Hindu	53.5	51.1	75.0	14.5	49
Muslim	34.6	36.2	65.3	29.5	32
Christian	61.0	43.0	90.6	5.6	825
Others	--	--	--	--	01
<b>Castes/Tribes</b>					
Scheduled Castes	41.2	36.8	67.0	24.4	48
Scheduled Tribes	60.2	43.1	90.2	5.6	816
Other Backward Classes	--	--	--	--	06
Others	63.5	55.1	80.8	13.9	37
<b>DLHS-4</b>					
	59.3	43.2	88.4	7.1	907

\*Percentage not shown due to less number of cases, <sup>a</sup> Literate but did not attend school are also included.  
<sup>b</sup> Yellowish thick milk secretion during the first few days after child birth, <sup>1</sup> Includes children whose mother started breastfeeding within one hour of birth, -- Percentage not shown based on less than 10 cases, .( ) Based on 10-20 unweighted cases, \*\* Unweighted cases.

**TABLE 4.3 BREASTFEEDING AND WEANING STATUS**

Percentage of children aged under 3 years who had exclusive breastfeeding and weaning status, Nagaland, 2012-13.

Age in months	Exclusive breastfeeding	Weaning status <sup>1</sup>			Number of children**
		Other fluids	Semisolid food	Solid food	
<2	38.4	4.9	2.9	0.0	44
2-3	37.6	0.0	0.0	0.0	43
4-5	34.5	4.3	5.1	1.4	54
6-8	22.8	5.4	19.8	2.6	69
9-11	16.8	17.3	38.0	16.1	72
12-17	7.9	12.7	39.0	22.3	189
18-23	1.9	11.8	38.9	22.6	150
24-35	1.4	12.1	49.8	36.8	286
6-9	22.5	8.9	23.0	5.6	92
6-35 <sup>2</sup>	6.5	12.1	41.2	25.4	766

Note: Table based on youngest living child born since 01.01.2008, <sup>2</sup> Children aged 6-35 months breastfed for at least 6 months, <sup>1</sup> Based on those children who had breastfeeding with other fluids, semi solid food and solid food, \*\* Unweighted cases.



**TABLE 4.4 EXCLUSIVE BREASTFEEDING**

Percentage of youngest living child born since 01.01.2008 aged 0-5 months who received exclusive breastfeeding according to selected background characteristics, Nagaland, 2012-13.

Background characteristics	Exclusive breastfeeding	
	0-5 months	Number of children**
<b>Age group</b>		
15-19	--	09
20-24	45.6	36
25-29	41.2	44
30-34	32.2	27
35-39	--	09
40-44	--	03
45-49	--	02
<b>Residence</b>		
Rural	42.0	90
Urban	36.1	40
<b>Mother's education</b>		
Non-literate <sup>a</sup>	35.7	25
Less than 5 years	(27.3)	11
5-9 years	46.3	63
10 or more years	34.6	31
<b>Religion</b>		
Hindu	(25.0)	12
Muslim	--	05
Christian	42.7	113
Others	na	00
<b>Castes/Tribes</b>		
Scheduled Castes	--	09
Scheduled Tribes	42.2	112
Other Backward Classes	na	00
Others	--	09
<b>DLHS-4</b>	39.9	130

<sup>a</sup> Literate but did not attend school are also included. ( ) Based on 10-20 unweighted cases. -- Percentage not shown for less than 10 cases.\*\* Unweighted cases.

<b>TABLE 4.5 BREASTFEEDING BY DISTRICTS</b>					
Percentage of children aged under 3 years whose mother started breastfeeding within one hour of birth, within 24 hours of birth, and after 24 hours of birth by districts, Nagaland, 2012-13.					
Districts	Children received Colostrum/ <i>Khees</i> <sup>a</sup>	Initiation of breastfeeding			Number of children**
		Within one hour of birth	Within 24 hours of birth <sup>1</sup>	After 24 hours of birth	
Mon	80.5	22.0	92.4	4.6	70
Tuensang	63.2	52.5	91.5	4.7	209
Mokokchung	89.8	35.3	93.7	6.3	95
Zunheboto	(31.6)	(42.1)	(89.5)	(5.3)	19
Wokha	39.7	34.0	92.9	4.9	94
Dimapur	53.9	41.0	76.6	13.0	199
Kohima	59.7	44.9	87.8	8.5	86
Phek	(33.3)	(40.0)	(100.0)	0.0	15
Kiphire	(23.5)	(88.2)	(100.0)	(0.0)	17
Longleng	24.8	80.4	100.0	0.0	36
Paran	69.4	42.6	88.1	7.5	67
<b>DLHS-4</b>	59.3	43.2	88.4	7.1	907

Note: Table based on youngest living child born since 01.01.2008.  
<sup>a</sup> Yellowish thick milk secretion during the first few days after child birth, <sup>1</sup> Includes children whose mother started breastfeeding within one hour of birth, ( ) Based on 10-20 unweighted cases, \*\* Unweighted cases.

**TABLE 4.6 VACCINATION OF CHILDREN**

Percentage of children aged 12-23 months who received specific vaccination according to selected background characteristics Nagaland, 2012-13.

Background characteristics	BCG	DPT			Polio				Measles	Full vaccination <sup>1</sup>	No vaccination	Vaccination card seen	Number of children**
		1	2	3	0	1	2	3					
<b>Residence</b>													
Rural	60.2	73.0	68.2	64.5	32.3	71.6	68.8	58.4	49.8	35.6	21.2	20.8	261
Urban	64.5	80.0	75.8	70.2	37.5	78.6	75.8	65.0	46.3	35.5	11.5	26.2	69
<b>Sex of child</b>													
Male	60.9	78.0	74.2	67.8	39.2	76.4	73.1	63.8	46.6	36.0	14.7	21.5	181
Female	61.8	70.7	65.1	63.7	26.7	69.6	67.5	55.5	51.7	35.0	23.7	23.1	149
<b>Birth order</b>													
1	63.0	71.4	65.4	60.0	29.7	69.8	67.2	60.4	48.7	32.6	21.5	22.9	117
2	69.5	78.6	73.5	69.9	35.4	76.4	75.0	62.5	51.5	37.6	17.8	27.6	82
3	58.7	80.7	77.0	75.4	38.6	80.7	73.1	53.6	52.8	38.5	9.6	19.2	52
4+	51.1	71.9	69.2	64.9	34.7	70.8	69.5	61.5	43.5	36.0	21.8	17.1	79
<b>Mother's education</b>													
Non-literate <sup>a</sup>	45.8	61.3	54.0	54.0	36.6	61.3	56.8	52.7	33.5	26.8	33.6	12.7	44
Less than 5 years	(52.6)	(89.5)	(89.5)	(89.5)	(36.8)	(89.5)	(84.2)	(63.2)	(42.1)	(36.8)	(10.5)	(21.1)	19
5-9 years	61.1	73.5	70.6	65.5	35.0	72.6	71.3	61.0	48.8	35.9	17.8	21.4	167
10 or more years	69.4	79.9	72.8	67.9	30.0	77.0	73.1	61.5	56.5	38.3	15.7	27.3	100
<b>Religion</b>													
Hindu	--	--	--	--	--	--	--	--	--	--	--	--	09
Muslim	--	--	--	--	--	--	--	--	--	--	--	--	08
Christian	63.2	76.1	71.5	67.9	35.1	74.6	71.7	61.2	51.0	37.5	17.7	22.6	312
Others	--	--	--	--	--	--	--	--	--	--	--	--	01
<b>Castes/Tribes</b>													
Scheduled Castes	(38.5)	(69.2)	(69.2)	(61.5)	(15.4)	(69.2)	(69.2)	(53.8)	(15.4)	(15.4)	(20.0)	(23.1)	13
Scheduled Tribes	62.0	75.1	70.4	66.4	34.8	73.6	70.6	60.0	50.3	36.4	18.7	21.7	308
Other Backward Classes	--	--	--	--	--	--	--	--	--	--	--	--	03
Others	--	--	--	--	--	--	--	--	--	--	--	--	06
<b>DLHS-4</b>	61.3	74.8	70.1	66.0	33.6	73.4	70.6	60.1	48.9	35.6	18.8	22.2	330

Table based on youngest living child born since 01.01.2008<sup>a</sup> Literate but did not attend school are also included, <sup>1</sup>BCG, three injections of DPT, three doses of Polio (excluding Polio "0") and measles. , -- Percentage not shown based on less than 10 cases, ( ) Based on 10-20 unweighted cases, \*\* Unweighted cases.

<b>TABLE 4.7 STATUS OF CHILDHOOD VACCINATION BY DISTRICTS</b>									
Percentage of children aged 12-23 months received specific vaccination and Vitamin-A supplementation by districts, Nagaland, 2012-13.									
Districts	Vaccination card seen	Vaccination Status						Percentage received any dose of Vitamin-A <sup>2</sup>	Number of children**
		BCG	DPT3	Polio 3	Measles	Full <sup>1</sup>	None		
Mon	9.1	44.4	67.2	58.9	34.7	20.4	4.5	34.8	21
Tuensang	14.4	51.3	68.2	55.5	44.0	34.1	26.3	18.7	78
Mokokchung	33.9	88.9	80.3	75.7	77.9	60.6	4.6	79.3	46
Zunheboto	--	--	--	--	--	--	--	--	08
Wokha	9.9	41.3	37.3	35.0	22.0	13.7	45.8	33.7	37
Dimapur	34.8	70.4	67.8	67.8	52.1	38.1	13.3	43.3	63
Kohima	34.7	63.5	69.3	55.6	57.7	38.6	23.0	45.4	35
Phek	--	--	--	--	--	--	--	--	07
Kiphire	--	--	--	--	--	--	--	--	05
Longleng	(10.0)	(50.0)	(70.0)	(60.0)	(30.0)	(20.0)	(20.0)	(34.5)	10
Paren	(15.0)	(65.0)	(85.0)	(85.0)	(60.0)	(55.0)	(0.0)	(51.0)	20
<b>DLHS-4</b>	22.2	61.3	66.0	60.1	48.9	35.6	19.2	39.0 <sup>#</sup>	330

Note. Table based on youngest living child born since 01.01.2008, <sup>1</sup> BCG, three injections of DPT, three doses of Polio (excluding Polio 0) and measles, <sup>2</sup> Children aged 12-35 months, <sup>#</sup> Percentage in fact sheet children aged 9-35 months. ( ) based on 10-20 unweighted cases. -- Percentage not shown for less than 10 cases. \*\* Unweighted cases.

**TABLE 4.8 PLACE OF CHILDHOOD VACCINATION**

Percentage of children aged 3 years received vaccination by place of vaccination, according to selected background characteristics, Nagaland, 2012-13.

Background characteristics	Place of vaccination						Number of children**
	Government health sector				Private health sector <sup>1</sup>	Others	
	Anganwadi Centre	Sub-Health Centre	Primary Health Centre	Other government health facility			
<b>Residence</b>							
Rural	1.8	17.0	16.2	58.5	8.8	0.9	491
Urban	0.0	3.3	4.9	70.7	22.2	1.3	158
<b>Sex of the child</b>							
Male	1.1	12.9	13.9	61.8	12.0	1.6	342
Female	1.5	13.1	11.3	62.7	13.1	0.3	306
<b>Birth order</b>							
1	0.8	14.7	12.1	60.1	15.5	2.4	220
2	1.0	9.8	13.1	65.9	13.6	0.6	165
3	2.6	12.1	16.0	61.1	7.5	0.0	118
4+	1.3	14.7	11.1	61.6	11.7	0.0	146
<b>Mother's education</b>							
Non-literate <sup>a</sup>	5.1	6.4	11.8	63.7	12.0	0.0	96
Less than 5 years	0.0	28.3	14.4	50.1	7.2	0.0	43
5-9 years	0.8	14.6	13.2	62.6	9.7	1.2	324
10 or more years	0.5	10.2	12.4	62.9	19.1	1.3	186
<b>Religion</b>							
Hindu	2.6	8.0	5.3	56.7	29.6	0.0	36
Muslim	(15.0)	(0.0)	(10.0)	(50.0)	(30.0)	(0.0)	20
Sikh	0.8	13.8	13.5	62.8	10.8	1.1	592
Others	--	--	--	--	--	--	01
<b>Castes/Tribes</b>							
Scheduled Castes	9.8	5.8	8.4	46.8	32.9	0.0	35
Scheduled Tribes	0.8	14.1	13.6	62.7	10.7	1.1	581
Other Backward Classes	--	--	--	--	--	--	05
Others	0.0	3.3	7.2	63.8	25.8	0.0	28
<b>DLHS-4</b>	1.3	13.0	12.8	62.1	12.7	1.0	649

Note: Table based on youngest living child born since 01.01.2008, <sup>a</sup>Literate but did not attend school are also included,

<sup>1</sup> Includes non-governmental hospital/trust hospital or clinic, private hospital and private doctor/clinic, -- Percentage not shown based on less than 10 cases, ( ) Based on 10-20 unweighted cases, \*\* Unweighted cases.

<b>TABLE 4.9 VITAMIN-A AND HEPATITIS-B SUPPLEMENTATION FOR CHILDREN</b>				
Percentage of children aged 12-35 months received at least one dose of Vitamin-A, 3-5 doses of Vitamin-A and Hepatitis-B injection, according to selected background characteristics, Nagaland, 2012-13.				
Background characteristics	Children who received at least one dose of Vitamin-A <sup>###</sup>	Children who received 3-5 doses of Vitamin-A	Children who received Hepatitis-B injection	Number of children**
<b>Age of the child</b>				
12-23 months	37.7	32.1	38.9	398
24-35 months	37.4	32.1	29.2	284
<b>Residence</b>				
Rural	36.3	29.9	32.1	528
Urban	41.1	37.1	42.2	154
<b>Sex of the child</b>				
Male	38.9	34.5	33.0	362
Female	36.3	29.1	37.2	319
<b>Birth order</b>				
1	40.4	38.3	35.6	238
2	41.7	27.1	39.8	162
3	39.4	34.8	41.9	113
4+	28.2	23.7	24.3	169
<b>Mother's education</b>				
Non-literate <sup>a</sup>	24.5	45.9	19.8	102
Less than 5 years	40.3	25.7	33.5	47
5-9 years	34.6	30.2	32.7	345
10 or more years	49.1	31.8	47.1	188
<b>Religion</b>				
Hindu	41.1	12.4	45.5	32
Muslim	39.4	65.2	17.2	23
Sikh	37.4	31.7	35.2	626
Others	--	--	--	01
<b>Castes/Tribes</b>				
Scheduled Castes	55.7	41.3	29.1	35
Scheduled Tribes	37.2	31.2	34.6	619
Other Backward Classes	--	--	--	05
Others	16.5	46.6	46.7	23
<b>DLHS-4</b>	37.6	32.1	34.9	682

Note: Table based on youngest living child born since 01.01.2008.

<sup>a</sup>Literate but not attend school are also included, <sup>###</sup> Children aged 9-35 months.-- Percentage not shown for less than 10 cases \*\* Unweighted cases.

<b>TABLE 4.10 AWARENESS REGARDING DIARRHOEA MANAGEMENT</b>								
Percentage of women who are aware of diarrhoea management according to selected background characteristics, Nagaland, 2012-13.								
Background characteristics	Knowledge of diarrhoea management	Type of practices followed if child gets diarrhoea <sup>1</sup>						Number of women**
		Give ORS	Salt and sugar solution	Continue normal food	Continue breast-feeding	Give plenty of fluids	Others	
<b>Age group</b>								
15-19	53.7	34.5	35.6	6.5	7.3	23.7	3.3	75
20-24	61.8	37.3	39.3	15.4	8.7	25.0	7.4	435
25-29	66.4	41.4	41.8	15.3	9.0	27.5	6.4	873
30-34	72.6	44.6	49.3	14.1	7.0	35.5	6.3	1014
35-39	76.7	48.5	51.9	15.8	6.9	31.1	6.2	1079
40-44	76.2	47.3	50.3	14.4	5.5	26.0	7.5	907
45-49	78.5	48.6	57.9	18.1	6.4	32.9	4.9	1055
<b>Residence</b>								
Rural	71.1	43.0	50.8	14.8	7.6	30.6	3.8	3999
Urban	77.3	50.5	46.4	16.9	5.9	29.4	11.7	1439
<b>Mother's education</b>								
Non-literate <sup>a</sup>		41.3	41.5	12.7	4.7	26.6	5.2	789
Less than 5 years	67.4	37.7	47.0	14.8	5.5	33.3	2.3	493
5-9 years	71.6	41.5	50.9	14.3	6.4	28.2	6.6	2854
10 or more years	73.0	58.4	51.9	19.7	10.5	35.4	7.4	1302
	77.0							
<b>Religion</b>								
Hindu	65.7	40.3	37.2	12.1	4.0	23.6	12.4	219
Muslim	68.3	43.0	44.9	19.3	3.4	40.7	2.1	87
Sikh	73.5	45.7	50.1	15.5	7.3	30.3	6.0	5121
Others	72.9	(36.4)	(45.5)	(18.2)	(0.0)	(27.3)	(27.3)	11
<b>Castes/Tribes</b>								
Scheduled Castes	69.8	41.9	38.7	13.5	4.5	27.3	12.3	164
Scheduled Tribes	73.4	45.2	50.8	15.9	7.5	31.0	6.2	5027
Other Backward Classes	23.1	(7.7)	(7.7)	(0.0)	(0.0)	(7.7)	(15.4)	13
Others	71.8	52.7	33.5	9.5	1.9	19.1	2.8	234
<b>DLHS-4</b>								
	73.0	45.3	49.4	15.5	7.1	30.2	6.3	5438

Note: Table based on women with last two surviving children born since 01.01.2008. <sup>a</sup>Literate but did not attend school are also included.  
<sup>1</sup> Among women aware of diarrhoea management, -- Percentage not shown based on less than 10 cases, ( ) Based on 10-20 unweighted cases, \*\* Unweighted cases.

**TABLE 4.11 TREATMENT OF DIARRHOEA**

Percentage of children suffered from diarrhoea and sought advice/ treatment according to selected background characteristics, Nagaland, 2012-13.

Background characteristics	Children suffered from diarrhoea <sup>1</sup>	Number of children	Given ORS	Children sought advice/treatment	Source of treatment			Number of children**
					Government health facility <sup>2</sup>	Private Health facility <sup>3</sup>	Other	
<b>Age group</b>								
Less than 25	5.1	353	(42.1)	(26.3)	(40.0)	(20.0)	(20.0)	19
25-29	3.6	533	(47.4)	(10.5)	(50.0)	(50.0)	(0.0)	19
30-34	3.4	432	(53.3)	(33.3)	(40.0)	(60.0)	(0.0)	15
35-39	1.5	196	--	--	--	--	--	03
40-49	5.2	96	--	--	--	--	--	05
<b>Residence</b>								
Rural	3.5	1232	40.7	15.9	30.5	45.2	12.1	44
Urban	4.3	378	(52.9)	(29.4)	(60.0)	(40.0)	(0.0)	17
<b>Mother's education</b>								
Non-literate <sup>a</sup>	4.9	256	(25.0)	(16.7)	(50.0)	(50.0)	(0.0)	12
Less than 5 years	3.0	121	--	--	--	--	--	04
5-9 years	3.7	839	32.2	14.1	45.5	18.2	18.2	32
10 or more years	3.4	394	(76.9)	(38.5)	(40.0)	(60.0)	(0.0)	13
<b>Religion</b>								
Hindu	1.3	77	--	--	--	--	--	01
Muslim	7.3	54	--	--	--	--	--	04
Sikh	3.7	1476	45.0	16.1	33.5	48.8	8.9	56
Others	--	03	--	--	--	--	--	00
<b>Castes/Tribes</b>								
Scheduled Castes	1.1	78	--	--	--	--	--	01
Schedule Tribes	3.7	1462	45.8	16.3	33.5	48.8	8.9	55
Other Backward Classes	--	08	--	--	--	--	--	00
Others	8.2	62	--	--	--	--	--	05
<b>DLHS-4</b>	3.7	1610	44.5	20.4	43.1	44.3	6.3	61

Note: Table based on women with last two surviving children born since 01.01.2008. <sup>a</sup>Literate but did not attend school are also included. <sup>1</sup>Last two weeks prior to survey, <sup>2</sup>Includes government hospital or dispensary, urban health centre/ urban health post/ urban family welfare centre, community health centre or rural hospital, primary health centre, sub-centre, ICDS and Govt. AYUSH hospital /clinic. <sup>3</sup>Includes non-governmental hospital/ trust hospital or clinic, private hospital/clinic and private AYUSH hospital /clinic, -- Percentage not shown based on less than 10 cases, ( ) Based on 10-20 unweighted cases, \*\* Unweighted cases.



**TABLE 4.12 AWARENESS AND TREATMENT OF ACUTE RESPIRATORY INFECTION (ARI)**

Percentage of women who are aware of danger signs of ARI and whose children suffer from ARI and sought advice/treatment according to selected background characteristics, Nagaland, 2012-13.

Background characteristics	Danger signs of Acute Respiratory Infection (ARI) <sup>1</sup>							Source of treatment <sup>5</sup>					Number of children**
	Women aware of danger signs of ARI	Number of women**	Difficulty in breathing	Pain in chest and productive cough	Wheezing/whistling	Rapid breathing	Other Signs <sup>2</sup>	Children suffered from ARI <sup>3</sup>	Children sought advice/treatment <sup>4</sup>	Government health facility <sup>6</sup>	Private health facility <sup>7</sup>	Others	
<b>Age group</b>													
15-19	51.4	75	39.5	20.2	11.1	15.0	15.0	6.3	--	--	--	--	33
20-24	55.4	435	43.7	26.4	18.7	20.2	17.8	5.5	(26.3)	(60.0)	(40.0)	(0.0)	320
25-29	61.2	873	44.3	33.5	22.0	19.5	19.5	4.6	53.8	32.7	67.3	0.0	533
30-34	64.5	1014	45.8	31.8	19.7	19.2	23.9	4.7	(26.3)	(40.0)	(60.0)	(0.0)	432
35-39	70.9	1079	51.7	32.5	22.6	21.0	24.6	4.1	--	--	--	--	196
40-44	69.1	907	44.9	35.0	21.9	21.9	23.0	3.0	--	--	--	--	70
45-49	71.2	1055	48.9	39.2	23.9	22.4	29.1	0.0	na	na	na	na	26
<b>Residence</b>													
Rural	64.9	3999	45.4	31.8	21.6	21.3	24.8	3.6	28.0	60.4	39.6	0.0	1232
Urban	69.7	1439	50.2	37.6	21.8	19.4	20.9	7.1	43.0	32.0	68.0	0.0	378
<b>Mother's education</b>													
Non-literate <sup>a</sup>	63.9	789	41.1	35.1	19.7	19.8	18.3	7.0	(12.5)	(100.0)	(0.0)	(0.0)	256
Less than 5 years	65.5	493	39.1	29.6	20.6	22.4	20.7	2.3	--	--	--	--	121
5-9 years	64.7	2854	46.0	31.8	19.8	19.2	22.8	4.8	40.7	37.7	62.3	0.0	839
10 or more years	71.7	1302	54.9	37.8	26.8	23.7	29.3	3.4	46.2	44.4	55.6	0.0	394
<b>Religion</b>													
Hindu	60.9	219	47.6	37.7	16.6	10.1	18.2	6.4	--	--	--	--	77
Muslim	60.3	87	45.9	35.9	20.4	17.7	22.6	9.6	0.0	--	--	--	54
Sikh	66.8	5121	46.9	33.3	21.9	21.3	23.9	4.3	37.5	44.6	55.4	0.0	1476
Other	63.9	11	(45.5)	(36.4)	(27.3)	(9.1)	(9.1)	0.0	na	na	na	na	3
<b>Castes/Tribes</b>													
Scheduled Castes	66.3	164	47.1	39.7	18.4	15.3	27.3	10.3	--	--	--	--	78
Scheduled Tribes	66.5	5027	47.5	32.8	22.3	21.7	24.2	4.2	37.1	42.4	57.6	0.0	1462
Other Backward Classes	29.7	13	(23.1)	(7.7)	(7.7)	(7.7)	(7.7)	0.0	--	--	--	--	8
Others	66.6	234	36.5	45.6	11.7	7.1	8.9	0.0	6.3	--	--	--	62
<b>DLHS-4</b>	66.4	5438	46.9	33.6	21.6	20.7	23.6	4.6	34.6	45.4	54.6	0.0	1610

Note: Table based on women with last two surviving children born since 01.01.2008. <sup>a</sup>Literate but did not attend school are also included, <sup>1</sup> Among women who are aware of any danger signs of ARI. <sup>2</sup> Includes not able to drink or take a feed, excessive drowsy and difficulty to keep awake, running nose and others. <sup>3</sup> Last two weeks prior to survey. <sup>4</sup> Among children with ARI or fever in last two weeks who sought advice/ treatment. <sup>5</sup> Among children who sought advice/treatment. <sup>6</sup> Includes government hospital or dispensary, urban health centre/urban health post/urban family welfare centre, community health centre or rural hospital, primary health centre, sub-centre, ICDS and Govt. AYUSH hospital/clinic. <sup>7</sup> Includes non-governmental hospital/trust hospital or clinic, private hospital/clinic and private AYUSH hospital/clinic, -- Percentage not shown based on less than 10 cases, ( ) Based on 10-20 unweighted cases. \*\* Unweighted cases.

**TABLE 4.13 AWARENESS OF ORS AND ACUTE RESPIRATORY INFECTION (ARI) BY DISTRICTS**

Percentage of women by awareness of ORS and percentage of children suffered from diarrhoea and ARI and sought advice/treatment by districts, Nagaland, 2012-13.

Districts	Oral Rehydration Therapy/Solution (ORS)			Acute Respiratory Infection (ARI)		Number of children**
	Women aware of ORS	Children suffered from diarrhoea <sup>1</sup>	Children sought advice/treatment	Children suffered from ARI <sup>1</sup>	Children sought advice/treatment <sup>2</sup>	
Mon	23.3	1.6	0.0	0.8	100.0	137
Tuensang	48.0	2.3	11.6	3.8	25.3	377
Mokokchung	45.8	5.1	0.0	2.0	33.4	158
Zunheboto	45.3	2.8	0.0	0.0	na	36
Wokha	43.9	2.2	0.0	2.2	24.4	170
Dimapur	49.8	6.1	54.0	8.9	41.6	324
Kohima	52.5	2.9	0.0	7.7	38.5	156
Phek	41.2	0.0	na	4.0	0.0	26
Kiphire	62.8	0.0	na	0.0	na	32
Longleng	52.2	7.5	0.0	0.0	na	73
Paran	15.2	4.8	0.0	6.5	12.7	121
<b>DLHS-4</b>	43.6	3.7	20.4	4.6	34.6	1610

Note: Table based on women with last two surviving children born since 01.01.2008. <sup>1</sup> Last two weeks prior to survey, <sup>2</sup> Among children with ARI or fever in last two weeks sought advice /treatment, na= Not available, \*\* Unweighted cases.



# **FAMILY PLANNING**

<b>TABLE 5.1 AWARENESS OF CONTRACEPTIVE METHODS</b>						
Percentage of ever married and currently married women age 15-49 years who are aware of specific contraceptive method by place of residence, Nagaland, 2012-13.						
Contraceptive methods	Ever married women			Currently married women		
	Total	Rural	Urban	Total	Rural	Urban
Any method	93.0	92.2	94.6	93.6	92.9	95.1
Any modern method <sup>1</sup>	80.6	79.0	84.0	80.6	78.8	84.6
Female sterilization	26.8	24.2	32.6	24.2	20.9	31.5
Male sterilization	6.6	5.2	9.7	6.5	5.1	9.6
Intra Uterine Device	27.1	26.0	29.6	27.2	26.2	29.6
Pill	29.7	25.7	38.7	28.0	23.3	38.2
Emergency contraceptive pill	14.7	12.3	20.0	15.4	12.9	20.8
Injectables	20.5	18.1	25.7	20.6	18.2	26.0
Condom	53.3	52.0	56.2	55.2	54.1	57.8
Female condom	7.2	5.8	10.5	7.7	6.1	11.2
Rhythm method	21.3	21.7	20.5	23.1	23.8	21.6
Withdrawal method	20.7	21.8	18.3	22.3	23.6	19.3
Contraceptive herbs	4.8	4.0	6.6	5.3	4.5	7.2
Lactational Amenorrhoea Method(LAM)	5.5	4.0	8.8	6.0	4.5	9.4
Others	3.3	4.1	1.6	3.7	4.6	1.6
<b>Number of women**</b>	<b>6347</b>	<b>4689</b>	<b>1658</b>	<b>5438</b>	<b>3999</b>	<b>1439</b>

<sup>1</sup>Includes female sterilization, male sterilization, Intra-Uterine Device, pill, condom, female condom, emergency Contraceptive Pill and Injectables, \*\* Unweighted cases.

**TABLE 5.2 AWARENESS OF CONTRACEPTIVE METHODS**

Percentage of currently married women age 15-49 years who are aware of specific contraceptive method according to selected background characteristics, Nagaland, 2012-13.

Background characteristics	Any method	Any modern method	Male sterilization	Female sterilization	IUD	Pill	ECP	Injectables	Condom	Female condom	Rhythm method	Withdrawal method	Contraceptive herbs	LAM	Others	Number of women**
<b>Age group</b>																
15-24	92.4	79.3	6.2	26.4	25.2	35.7	16.7	21.6	62.5	7.4	21.7	20.4	4.5	6.4	4.2	510
25-29	94.3	84.2	9.4	26.3	29.9	34.9	19.4	24.3	59.6	10.6	26.0	25.4	7.3	7.9	3.6	873
30-34	95.5	81.1	7.6	26.1	30.1	29.9	20.0	21.5	57.2	8.6	26.3	24.2	6.7	7.8	3.8	1014
35-39	94.6	80.5	5.5	24.1	26.8	26.9	12.2	19.8	54.0	6.1	20.9	23.8	5.2	5.2	3.7	1079
40-49	92.1	79.1	5.3	21.6	25.3	22.5	12.7	18.7	51.0	6.9	21.9	19.5	4.0	4.7	3.4	1962
<b>No. of living children</b>																
0	93.1	70.4	3.6	16.9	21.0	20.0	12.3	20.7	47.8	5.7	31.3	13.8	2.2	2.1	1.9	846
1	92.9	75.5	6.1	22.3	24.5	29.8	13.6	18.1	51.2	7.3	25.3	18.9	4.1	5.8	2.6	931
2	94.0	84.3	7.4	26.0	28.2	30.0	16.8	21.9	59.2	8.5	21.2	27.4	6.9	7.3	3.1	1210
3	93.8	84.1	5.9	26.2	29.6	28.5	16.1	17.0	58.5	7.2	19.9	24.4	5.0	5.9	3.8	1039
4+	93.9	84.3	8.1	26.7	30.2	29.4	16.8	23.9	56.5	8.8	20.8	23.6	6.9	7.6	5.9	1412
<b>Residence</b>																
Rural																
Urban	92.9	78.8	5.1	20.9	26.2	23.3	12.9	18.2	54.1	6.1	23.8	23.6	4.5	4.5	4.6	3999
	95.1	84.6	9.6	31.5	29.6	38.2	20.8	26.0	57.8	11.2	21.6	19.3	7.2	9.4	1.6	1439
<b>Education</b>																
Non-literate <sup>a</sup>	95.8	72.5	7.9	19.6	27.0	27.7	17.7	21.6	41.4	8.2	30.3	17.7	6.5	7.9	7.4	789
Less than five years	90.4	77.1	4.2	18.7	26.5	23.6	12.0	18.7	48.7	5.1	20.6	16.3	4.1	4.5	3.5	1573
5-9 years	94.4	84.0	6.3	26.1	27.2	28.0	14.3	18.4	61.2	8.2	22.0	28.0	5.7	5.9	3.8	1774
10 or more years	95.0	84.8	8.6	30.6	28.3	33.1	19.3	25.1	62.8	9.7	23.4	24.2	5.6	6.9	1.6	1302
<b>Religion</b>																
Hindu	91.1	80.3	8.3	37.4	23.5	52.2	16.6	19.3	54.1	8.1	20.4	22.7	6.7	12.7	0.9	219
Muslim	97.6	86.8	10.0	22.4	14.0	56.0	11.7	15.9	56.7	5.5	9.9	14.9	0.0	0.0	3.0	87
Christian	93.7	80.4	6.3	23.4	27.6	26.1	15.4	20.8	55.2	7.7	23.5	22.4	5.3	5.8	3.8	5121
Others	(100.0)	(90.9)	(18.2)	(63.6)	(45.5)	(72.7)	(27.3)	(18.2)	(72.7)	(9.1)	(36.4)	(18.2)	(27.3)	(9.1)	(0.0)	11
<b>Castes/Tribes</b>																
Scheduled castes	97.7	84.0	14.6	42.2	29.3	53.8	22.2	23.3	53.9	11.8	26.5	25.9	8.4	13.9	0.5	164
Scheduled tribes	93.7	80.4	6.5	23.7	28.2	26.7	15.7	20.3	55.7	7.9	24.1	22.8	5.4	6.0	3.7	5027
Other backward classes	(100.0)	(92.3)	(0.0)	(84.6)	(76.9)	(23.1)	(7.7)	(7.7)	(76.9)	(0.0)	(23.1)	(15.4)	(0.0)	(15.4)	(0.0)	13
Others	89.6	81.7	1.2	16.7	6.1	34.0	5.4	24.7	46.6	1.6	2.4	9.2	1.2	1.2	5.5	234
<b>DLHS-4</b>	<b>93.6</b>	<b>80.6</b>	<b>6.5</b>	<b>24.2</b>	<b>27.2</b>	<b>28.0</b>	<b>15.4</b>	<b>20.6</b>	<b>55.2</b>	<b>7.7</b>	<b>23.1</b>	<b>22.3</b>	<b>5.3</b>	<b>6.0</b>	<b>3.7</b>	<b>5438</b>

Note: IUD = Intra-Uterine Device; ECP = Emergency Contraceptive Pill; LAM = Lactational Amenorrhoea Method., <sup>a</sup> Literates but did not attend school, are also included, \*\* Unweighted cases.

<b>TABLE 5.3 AWARENESS OF CONTRACEPTIVE METHODS BY DISTRICT</b>																
Percentage of currently married women age 15-49 years who are aware of specific contraceptive method by district, Nagaland, 2012-13.																
District	Any method	Any modern method	Male sterilization	Female sterilization	IUD	Pill	ECP	Injectables	Condom	Female condom	Rhythm method	Withdrawal method	Contraceptive herbs	LAM	Other	Number of women**
Mon	99.1	91.4	9.7	16.9	40.8	30.5	16.9	52.7	39.9	11.7	18.6	18.4	11.7	11.4	12.8	474
Tuensang	97.5	86.8	2.7	15.4	39.5	27.6	32.4	22.9	48.1	7.4	23.2	11.6	0.8	0.7	2.2	558
Mokokchung	100.0	92.6	5.4	64.9	56.0	25.2	8.2	13.7	66.8	4.8	21.8	21.9	0.6	4.7	0.0	374
Zunheboto	90.7	80.4	0.9	14.9	19.1	18.5	12.6	16.1	51.9	1.7	23.4	23.4	1.6	0.0	0.5	620
Wokha	86.2	82.7	2.7	29.7	20.6	22.8	8.4	13.9	62.9	5.0	11.0	15.5	0.0	0.0	0.0	457
Dimapur	94.8	88.6	11.3	39.9	27.5	57.7	17.7	22.9	61.5	11.7	16.4	23.0	6.6	8.2	1.1	685
Kohima	98.4	76.4	19.0	39.3	40.3	36.9	26.2	20.7	59.3	17.9	46.6	38.6	16.8	23.7	6.8	502
Phek	95.1	62.2	0.6	13.9	16.0	8.2	2.9	8.0	49.2	1.2	39.3	30.4	2.6	0.0	0.0	339
Kiphire	99.2	81.8	0.2	2.5	8.7	15.5	3.3	11.0	52.3	1.2	12.3	15.9	0.2	0.0	1.3	513
Longleng	85.9	68.3	0.0	2.6	0.4	8.7	3.9	5.7	64.0	1.7	20.2	32.5	0.8	0.0	0.0	468
Paran	81.3	63.7	15.0	23.7	31.9	32.1	24.9	30.9	49.9	15.5	29.4	18.7	15.0	14.8	18.5	448
<b>DLHS-4</b>	<b>93.5</b>	<b>80.3</b>	<b>6.3</b>	<b>23.7</b>	<b>27.1</b>	<b>27.3</b>	<b>15.0</b>	<b>20.3</b>	<b>55.0</b>	<b>7.5</b>	<b>23.3</b>	<b>22.5</b>	<b>5.2</b>	<b>5.8</b>	<b>3.8</b>	<b>5438</b>

Note: IUD = Intra-Uterine Device; ECP = Emergency Contraceptive Pill; LAM =Lactational Amenorrhoea Method, \*\* Unweighted cases.

**TABLE 5.4 EVER USE OF CONTRACEPTIVE METHOD**

Percentage of currently married women age 15-49 years who ever used specific contraceptive method according to selected background characteristics, Nagaland, 2012-13.

Background characteristics	Any method	Any modern method	Male sterilization	Female sterilization	IUD	Pill	ECP	Injectables	Condom	Female condom	Rhythm method	Withdrawal method	Others	Number of women**
<b>Age group</b>														
15 - 19	37.9	24.2	0.0	0.0	1.2	9.8	2.4	1.6	14.2	0.0	6.1	11.1	1.5	75
20 - 24	33.9	21.6	0.0	0.3	1.5	5.5	2.4	1.2	13.3	0.6	10.2	8.1	0.0	435
25 - 29	43.3	30.9	0.0	2.4	6.4	8.5	4.0	1.8	13.8	0.6	10.7	9.3	0.1	873
30 - 34	53.9	37.9	0.2	7.2	8.2	5.9	3.9	1.6	16.8	0.2	14.6	13.3	0.3	1014
35 - 39	58.4	43.3	0.4	8.7	10.4	6.9	2.9	3.6	16.8	0.3	12.0	14.5	0.4	1079
40 - 44	53.8	40.4	0.1	8.8	9.0	8.2	2.4	4.0	14.0	0.3	11.7	10.0	0.4	907
45 - 49	46.6	34.9	0.1	8.2	10.1	3.8	2.1	2.5	11.5	0.4	10.5	10.5	0.2	1055
<b>No. of living children</b>														
0	36.8	16.3	0.0	0.5	1.3	1.9	2.0	3.3	9.6	0.4	19.8	3.6	0.4	846
1	48.4	30.9	0.2	3.8	6.6	8.7	3.0	1.7	12.2	0.4	15.0	8.0	0.1	931
2	54.8	42.8	0.2	7.7	8.5	9.5	4.0	2.2	18.4	0.3	10.0	15.8	0.7	1210
3	51.5	40.2	0.2	9.2	10.3	5.8	3.3	1.6	14.8	0.4	8.6	13.3	0.2	1039
4+	53.3	43.2	0.1	8.9	11.7	5.8	2.5	3.7	15.3	0.4	8.3	13.0	0.0	1412
<b>Residence</b>														
Rural	49.2	35.5	0.1	5.5	9.1	5.6	3.1	2.4	14.8	0.4	11.9	12.8	0.2	3999
Urban	51.3	37.8	0.2	8.6	6.3	8.5	2.9	2.9	13.8	0.4	11.2	8.2	0.4	1439
<b>Education</b>														
Non-literate <sup>a</sup>	53.1	34.4	0.2	5.7	7.7	6.1	3.1	5.6	9.7	0.2	17.7	7.3	0.9	789
Less than five years	50.7	36.7	0.2	6.0	11.5	6.8	2.4	2.3	12.2	0.1	11.8	8.9	0.2	1573
5-9 years	49.2	37.1	0.1	7.0	7.5	6.4	3.2	2.1	16.7	0.5	9.9	15.8	0.1	1774
10 or more years	47.8	35.5	0.1	6.9	5.6	6.6	3.4	1.8	17.0	0.6	10.5	10.7	0.2	1302
<b>Religion</b>														
Hindu	52.3	39.1	0.0	10.0	3.9	18.0	1.1	0.4	10.4	0.0	8.5	6.5	0.0	219
Muslim	50.7	37.4	0.0	3.8	1.1	16.6	2.0	1.2	17.0	1.2	7.1	11.2	0.0	87
Christian	49.8	36.1	0.2	6.4	8.6	5.7	3.1	2.7	14.7	0.4	12.0	11.6	0.3	5121
Others	(27.3)	(18.2)	(0.0)	(18.2)	(0.0)	(9.1)	(0.0)	(0.0)	(0.0)	(0.0)	(9.1)	(0.0)	(0.0)	11
<b>Castes/Tribes</b>														
Scheduled castes	54.4	36.5	0.0	8.4	3.2	14.3	1.0	1.1	12.9	1.1	12.5	11.0	0.0	164
Scheduled tribes	49.4	35.5	0.1	6.4	8.7	5.9	3.2	2.0	14.7	0.4	12.3	11.8	0.2	5027
Other backward classes	(61.5)	(38.5)	(0.0)	(15.4)	(23.1)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(7.7)	(15.4)	(0.0)	13
Others	54.1	48.2	0.4	7.3	)	13.8	1.6	14.2	12.7	0.0	0.5	3.3	2.0	234
<b>DLHS-4</b>	<b>49.8</b>	<b>36.2</b>	<b>0.1</b>	<b>6.5</b>	<b>8.2</b>	<b>6.5</b>	<b>3.0</b>	<b>2.6</b>	<b>14.5</b>	<b>0.4</b>	<b>11.7</b>	<b>11.4</b>	<b>0.3</b>	<b>5438</b>

Note: IUD = Intra-Uterine Device; ECP = Emergency Contraceptive Pill. <sup>a</sup> Literates but did not attend school, are also included. ( ) Based on 10-20 unweighted cases. \*\* Unweighted cases.



**TABLE 5.5 (A) CURRENT USE OF CONTRACEPTIVE METHODS**

Percentage of currently married women age 15-49 years who are currently using specific contraceptive method according to selected background characteristics, Nagaland, 2012-13.

Background characteristics	Any method	Any modern method	Male sterilization	Female sterilization	IUD	Pill	Condom	Rhythm method	With-drawal method	Others	Number of women**
<b>Age group</b>											
15 - 19	19.8	10.8	0.0	0.0	1.2	5.9	3.7	4.8	4.1	0.0	75
20 - 24	15.5	9.5	0.0	0.3	1.0	2.9	4.7	3.4	2.5	0.0	435
25 - 29	27.5	17.9	0.0	2.4	4.7	4.9	4.9	4.3	4.7	0.7	873
30 - 34	36.2	24.4	0.2	7.2	6.3	3.1	6.9	6.0	5.7	0.2	1014
35 - 39	40.2	29.2	0.4	8.8	7.6	4.0	6.6	4.8	5.7	0.5	1079
40 - 44	36.5	28.2	0.1	8.9	6.8	5.0	6.0	4.8	3.4	0.0	907
45 - 49	32.7	25.9	0.1	8.3	8.2	1.7	6.8	3.0	3.7	0.0	1055
<b>No. of living children</b>											
No children	13.6	4.9	0.0	0.5	0.8	0.6	2.9	7.4	1.1	0.2	846
1 child											
1 son	29.9	20.8	0.2	3.9	5.5	5.1	5.3	5.8	3.1	0.2	568
No son	27.8	17.1	0.0	3.6	2.9	5.8	4.5	7.7	2.5	0.5	363
2 children											
1 or more sons	39.7	29.5	0.3	8.1	7.1	5.9	7.2	3.2	6.7	0.2	1033
No sons	37.7	24.4	0.0	6.4	3.8	6.8	7.4	5.7	7.1	0.5	177
3 children											
1 or more sons	38.0	28.9	0.2	9.5	8.0	3.6	6.8	3.4	5.2	0.4	972
No sons	37.7	22.0	0.0	5.8	3.2	2.8	10.1	9.8	5.9	0.0	67
4+ children											
1 or more sons	38.3	30.8	0.1	9.1	9.5	2.4	7.2	2.3	5.1	0.1	1376
No sons	45.0	26.9	0.0	8.7	7.6	3.1	7.4	12.7	5.4	0.0	36
<b>Residence</b>											
Rural	32.7	23.4	0.1	5.6	7.1	3.3	6.2	4.1	5.0	0.3	3999
Urban	33.8	24.9	0.1	8.7	4.4	4.5	6.0	5.3	3.3	0.2	1439
<b>Education</b>											
Non-literate <sup>a</sup>	28.2	19.4	0.2	5.7	6.0	3.0	3.5	4.3	4.3	0.1	789
Less than five years	37.2	28.2	0.1	6.0	9.9	4.3	6.4	6.2	2.7	0.1	1573
5-9 years	33.0	22.8	0.1	7.2	4.9	3.8	5.7	3.3	6.5	0.3	1774
10 or more years	31.3	22.9	0.2	6.9	4.0	3.0	7.9	4.1	3.9	0.4	1302
<b>Religion</b>											
Hindu	34.1	27.3	0.0	10.6	2.7	8.9	5.2	4.1	2.6	0.0	219
Muslim	32.0	21.8	0.0	3.8	1.1	8.1	8.9	2.8	7.3	0.0	87
Christian	33.1	23.7	0.2	6.4	6.6	3.3	6.1	4.5	4.5	0.3	5121
Others	(18.2)	(18.2)	(0.0)	(18.2)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	11

Contd ...

**TABLE 5.5 (A) CURRENT USE OF CONTRACEPTIVE METHODS —Continued**

Background characteristics	Any method	Any modern method	Male sterilization	Female sterilization	IUD	Pill	Condom	Rhythm method	Withdrawal method	Other	Number of women**
<b>Castes/Tribes</b>											
Scheduled castes	38.2	25.6	0.0	9.1	1.6	8.7	6.2	5.7	6.8	0.0	164
Scheduled tribes	33.4	24.0	0.1	6.4	6.7	3.4	6.2	4.6	4.5	0.3	5027
Other backward classes	(46.2)	(30.8)	(0.0)	(15.4)	(15.4)	(0.0)	(0.0)	(0.0)	(15.4)	0.0	13
Others	22.4	20.1	0.4	7.3	1.2	5.9	5.0	0.9	1.3	0.0	234
<b>DLHS-4</b>	<b>33.1</b>	<b>23.9</b>	<b>0.1</b>	<b>6.6</b>	<b>6.3</b>	<b>3.7</b>	<b>6.1</b>	<b>4.5</b>	<b>4.5</b>	<b>0.2</b>	<b>5438</b>
Note: IUD = Intra-Uterine Device; ECP = Emergency Contraceptive Pill. <sup>a</sup> Literates but did not attend school, are also included, ** Unweighted cases.											

**TABLE 5.5 (B) DURATION OF USE OF SPACING METHODS**

Percentage of currently married women age 15-49 years who are currently using spacing method by duration of use according to selected background characteristics, Nagaland, 2012-13.

Background characteristics	IUD				Number of IUD users**	Pill		Condom	
	< 6 months	6 months to 2 years	2-3 years	3 or more years		> 6 months	Number of Pill users**	> 6 months	Number of condom users
<b>Age group</b>									
15 - 19	---	---	---	---	01	---	04	---	03
20 - 24	---	---	---	---	05	(38.5)	13	(25.0)	20
25 - 29	7.9	39.6	7.4	13.8	41	47.9	43	22.4	43
30 - 34	5.6	10.3	16.2	26.5	66	44.9	30	8.3	71
35 - 39	3.5	7.2	9.8	43.3	82	38.5	43	19.1	69
40 - 44	2.9	3.0	12.5	46.9	65	24.0	45	28.5	56
45 - 49	1.2	1.1	6.5	39.5	89	(27.8)	18	21.7	72
<b>No. of living children</b>									
0	---	---	---	---	07	---	06	24.2	24
1	14.1	12.4	8.4	23.2	43	19.5	49	19.7	46
2	2.4	8.7	10.5	34.9	82	36.8	71	9.6	91
3	3.9	8.1	15.6	33.0	78	35.5	35	20.2	73
4+	2.0	10.7	8.4	41.7	139	61.8	35	26.6	100
<b>Residence</b>									
Rural	2.8	9.1	11.4	29.5	285	34.3	131	15.8	248
Urban	9.5	12.6	6.8	58.8	64	39.2	65	28.1	86
<b>Education</b>									
Non-literate <sup>a</sup>	7.5	2.3	1.9	16.4	50	59.6	23	30.9	28
Less than five years	4.0	8.0	11.4	33.2	158	27.5	66	17.2	102
5-9 years	2.3	10.1	18.7	39.2	88	35.4	66	16.7	100
10 or more years	5.0	21.0	1.7	55.1	53	38.0	41	21.4	104
<b>Religion</b>									
Hindu	---	---	---	---	06	66.5	21	(18.2)	11
Muslim	---	---	---	---	01	---	08	---	08
Christian	4.3	10.1	10.6	34.4	342	29.0	167	18.7	315
Others	na	na	na	na	na	na	na	na	na
<b>Castes/Tribes</b>									
Scheduled castes	---	---	---	---	03	(82.4)	17	(20.0)	10
Scheduled tribes	4.3	10.1	10.6	34.4	341	28.9	165	18.9	312
Other backward classes	---	---	---	---	02	---	---	---	---
Others	---	---	---	---	03	(64.3)	14	(33.3)	12
<b>DLHS-4</b>	<b>4.2</b>	<b>9.9</b>	<b>10.4</b>	<b>35.9</b>	<b>349</b>	<b>36.2</b>	<b>196</b>	<b>19.5</b>	<b>334</b>

Note: IUD = Intra-Uterine Device \*\* Unweighted cases, <sup>a</sup> Literates but did not attend school, are also included. ( ) Base on 10-20 unweighted cases. -- Percentage not shown for less than 10 than cases. \*\* unweighted cases.

**TABLE 5.6 AGE AT THE TIME OF STERILIZATION**

Percent distribution of women age 15-49 years by age at the time of sterilization, according to selected background characteristics, Nagaland, 2012-13.

Background characteristics	Age at the time of sterilization						Total <sup>1</sup>	Mean age of sterilization	Number of women**
	<20	20 -24	25 -29	30 -34	35 -39	40 +			
<b>Years since sterilization</b>									
<2	0.0	7.5	21.2	37.6	9.9	23.8	100.0	33.12	26
2-3	0.0	1.7	23.0	36.0	17.0	22.4	100.0	34.32	56
4-5	0.0	7.8	17.0	23.7	19.1	32.4	100.0	34.40	50
6-7	0.0	8.3	34.1	33.1	19.3	5.2	100.0	31.43	37
8-9	0.0	17.4	26.3	32.5	19.8	4.1	100.0	29.75	20
10+	3.8	18.4	34.2	26.8	16.8	0.0	100.0	28.66	56
<b>No. of living children</b>									
0	---	---	---	---	---	---	---	---	06
1	0.0	8.1	14.5	22.1	29.1	26.2	100.0	35.06	34
2	2.2	10.3	22.4	21.7	21.3	22.0	100.0	33.11	92
3	0.0	9.7	19.2	21.4	28.4	21.3	100.0	34.47	97
4+	0.0	1.3	16.8	32.6	19.2	30.2	100.0	35.20	129
<b>Residence</b>									
Rural	0.4	5.6	18.5	26.2	18.4	30.9	100.0	34.80	233
Urban	0.9	8.0	19.9	24.6	29.4	17.3	100.0	33.75	125
<b>Education</b>									
Non-literate <sup>a</sup>	2.8	2.0	13.1	20.0	25.4	36.6	100.0	36.96	47
Less than five years	0.9	6.2	20.6	30.2	20.3	21.9	100.0	33.53	100
5-9 years	0.0	8.2	23.3	21.1	23.1	24.3	100.0	33.88	125
10 or more years	0.0	7.1	14.8	29.6	24.0	24.5	100.0	34.91	86
<b>Religion</b>									
Hindu	5.1	17.3	22.5	12.3	38.0	4.8	100.0	30.35	23
Muslim	---	---	---	---	---	---	---	---	03
Christian	0.3	5.8	19.1	26.3	21.4	27.1	100.0	34.71	330
Others	---	---	---	---	---	---	---	---	02
<b>Castes/Tribes</b>									
Scheduled castes	(7.1)	(7.1)	(14.3)	(7.1)	(50.0)	(14.3)	100.0	33.43	14
Scheduled tribes	0.3	6.0	18.6	26.6	21.5	27.0	100.0	34.67	323
Other backward classes	---	---	---	---	---	---	---	---	02
Others	(0.0)	(15.8)	(26.3)	(26.3)	(21.1)	(10.5)	100.0	31.37	19
<b>DLHS-4</b>	<b>0.6</b>	<b>6.6</b>	<b>19.0</b>	<b>25.6</b>	<b>22.9</b>	<b>25.3</b>	<b>100.0</b>	<b>34.43</b>	<b>358</b>

<sup>1</sup> Total figure may not add to 100 percent due to 'don't know' or 'missing cases', <sup>a</sup> Literates but did not attend school, are also included. ( ) Based on 10-20 unweighted cases. -- Percentage not shown for less than 10 cases. \*\* Unweighted cases.

**TABLE 5.7 CONTRACEPTIVE PREVALENCE RATE BY DISTRICT**

Percentage of currently married women age 15-49 years who are currently using any contraceptive method, by districts, Nagaland, 2012-13.

District	Any method	Any modern method	Male sterilization	Female sterilization	IUD	Pill	Condom	Rhythm method	Withdrawal method	Other	Number of Women**
Mon	30.8	28.0	0.2	1.3	16.7	2.1	0.7	0.4	2.2	0.2	474
Tuensang	37.5	29.5	0.2	3.8	17.6	2.0	5.9	7.0	0.5	0.6	558
Mokokchung	51.8	34.3	0.8	19.4	8.0	1.3	4.8	6.7	10.5	0.3	374
Zunheboto	26.6	18.9	0.0	4.1	6.2	4.5	3.3	5.8	1.5	0.5	620
Wokha	33.6	25.2	0.2	13.1	1.7	1.7	7.8	3.0	5.1	0.2	457
Dimapur	36.2	28.4	0.1	9.8	2.3	9.4	5.7	1.3	6.4	0.1	685
Kohima	44.4	25.3	0.2	13.0	3.7	1.0	7.2	9.5	9.3	0.4	502
Phek	21.5	11.1	0.0	2.9	4.0	0.3	3.9	6.6	3.7	0.0	339
Kiphire	35.1	26.0	0.0	1.7	5.2	10.0	8.9	5.8	3.3	0.0	513
Longleng	31.3	22.2	0.0	1.7	0.2	1.7	18.4	0.4	8.5	0.2	468
Paren	12.6	8.7	0.0	1.2	4.2	1.2	0.8	3.0	0.9	0.0	448
<b>DLHS-4</b>	<b>33.0</b>	<b>23.8</b>	<b>0.1</b>	<b>6.4</b>	<b>6.4</b>	<b>3.6</b>	<b>6.1</b>	<b>4.4</b>	<b>4.6</b>	<b>0.2</b>	<b>5438</b>

Note: IUD = Intra Uterine Device, \*\* Unweighted cases.

**TABLE 5.8 SOURCES OF MODERN CONTRACEPTIVE METHODS**

Percent distribution of currently married women age 15-49 years who are currently using modern contraceptive methods by source according to selected background characteristics, Nagaland, 2012-13.

Background Characteristics	Spacing Method				Number of women**	Limiting method				Number of women**
	Government <sup>2</sup>	Private <sup>3</sup>	Other <sup>4</sup>	Total <sup>1</sup>		Government <sup>5</sup>	Private <sup>6</sup>	Other <sup>7</sup>	Total <sup>1</sup>	
<b>Age group</b>										
15 - 19	---	---	---	---	08	---	---	---	---	na
20 - 24	24.5	68.6	6.9	100.0	40	---	---	---	---	01
25 - 29	22.6	76.4	1.0	100.0	135	53.5	46.5	0.0	100.0	21
30 - 34	21.1	54.7	24.2	100.0	175	56.2	43.8	0.0	100.0	71
35 - 39	31.4	53.5	15.1	100.0	215	68.9	31.1	0.0	100.0	95
40 - 44	17.8	73.2	8.9	100.0	179	45.5	54.5	0.0	100.0	80
45 - 49	24.5	57.9	17.6	100.0	187	47.2	52.8	0.0	100.0	88
<b>No. of living children</b>										
0	17.3	82.7	0.0	100.0	38	---	---	---	---	04
1	18.9	71.8	9.3	100.0	143	53.0	47.0	0.0	100.0	34
2	21.3	60.3	18.4	100.0	255	61.2	38.8	0.0	100.0	92
3	20.0	66.6	13.5	100.0	195	58.9	41.1	0.0	100.0	97
4+	33.3	54.9	11.8	100.0	308	49.0	51.0	0.0	100.0	129
<b>Residence</b>										
Rural	25.6	62.5	11.9	100.0	706	59.6	40.4	0.0	100.0	232
Urban	20.6	64.3	15.1	100.0	233	48.5	51.5	0.0	100.0	124
<b>Education</b>										
Non-literate <sup>3</sup>	26.7	67.5	5.8	100.0	108	51.0	49.0	0.0	100.0	46
Less than five years	24.4	69.3	6.4	100.0	348	58.3	41.7	0.0	100.0	99
5-9 years	25.3	62.3	12.5	100.0	274	67.2	32.8	0.0	100.0	125
10 or more years	20.7	54.8	24.5	100.0	209	38.3	61.7	0.0	100.0	86
<b>Religion</b>										
Hindu	21.2	65.2	13.6	100.0	38	41.9	58.1	0.0	100.0	23
Muslim	(37.5)	(56.3)	(6.3)	100.0	17	---	---	---	---	03
Christian	23.7	63.1	13.2	100.0	884	56.6	43.4	0.0	100.0	328
Others	---	---	---	---	---	0.0	100.0	0.0	100.0	02
<b>Castes/Tribes</b>										
Scheduled castes	21.2	65.7	13.1	100.0	30	(38.5)	(61.5)	---	100.0	14
Scheduled tribes	24.0	62.7	13.3	100.0	877	56.0	44.0	0.0	100.0	322
Other backward classes	---	---	---	---	02	51.3	---	---	---	02
Others	26.0	66.6	7.4	100.0	30	(50.0)	(50.0)	---	100.0	18
<b>DLHS-4</b>	<b>23.9</b>	<b>63.1</b>	<b>13.0</b>	<b>100.0</b>	<b>939</b>	<b>55.0</b>	<b>45.0</b>	<b>0.0</b>	<b>100.0</b>	<b>356</b>

Note: Spacing method includes- pill (Daily/Weekly), condom (Male/Female), and Injectables and limiting method includes- male sterilization and female sterilization. <sup>3</sup> Literates but did not attend school, are also included. <sup>1</sup> Total figure may not add to 100 percent due to 'missing cases', <sup>2</sup> Hospital, dispensary, UHC/UHP/UFWC, CHC/ Rural Hospital, PHC, Sub Health Centre/ANM, Mobile clinic, *Anganwadi* / ICDS centre, ASHA, Other Community Based Worker, AYUSH Hospital/Clinic and Other Public Health Sector, <sup>3</sup> Hospital, Doctor/Clinic, Mobile Clinic, AYUSH Hospital/Clinic, Traditional Healer, Pharmacy/Drugstore and Other Private Medical Sector, <sup>4</sup> NGO or Trust Hospital/clinic Private, Shop, Vending Machine, Husband, Relatives/Friends, Others and Don't Know, <sup>5</sup> Hospital, Dispensary, CHC/Rural Hospital, PHC, Mobile Clinic, Camp and Other Public Sector Health Facility, <sup>6</sup> Hospital, Doctor/Clinic, Mobile Clinic and Other Private Health Facility, <sup>7</sup> NGO or Trust Hospital/Clinic, Other and Don't Know. ( ) Based on 10-20 unweighted cases. -- Percentage not shown for less than 10 cases. \*\* Unweighted cases.

**TABLE 5.9 CASH BENEFITS RECEIVED AFTER STERILIZATION**

Percent distribution of currently married women and wives of sterilized men who received cash benefits after sterilization, by districts, Nagaland, 2012-13.

District	Cash benefits received				Total (100%)	Number of women**
	Received cash benefits	At the time of discharge	At the time of first follow-up	After several visits		
Mon	---	---	---	---	---	06
Tuensang	0.0	100.0	0.0	0.0	100.0	22
Mokokchung	32.0	88.0	8.0	4.0	100.0	76
Zunheboto	3.8	0.0	100.0	0.0	100.0	25
Wokha	16.9	54.5	36.4	9.1	100.0	63
Dimapur	16.4	36.4	45.5	18.2	100.0	68
Kohima	4.7	25.0	75.0	0.0	100.0	65
Phek	(20.0)	---	(50.0)	(50.0)	100.0	10
Kiphire	---	---	---	---	---	09
Longleng	---	---	---	---	---	07
Paran	---	---	---	---	---	05
<b>DLHS-4</b>	<b>15.6</b>	<b>57.6</b>	<b>31.8</b>	<b>10.6</b>	<b>100.0</b>	<b>356</b>

() Based on 10-20 unweighted cases. -- Percentage not shown for less than 10 cases, \*\* Unweighted cases.

**TABLE 5.10 HEALTH PROBLEMS WITH CURRENT USE OF CONTRACEPTION AND TREATMENT RECEIVED**

Percentage of currently married women age 15-49 years who are currently using contraceptive method and who were informed about side effects, had side effects with the method, treatment taken for side effect with the method, Nagaland, 2012-13.

Health problems/side effect	Type of method		
	Female sterilization	IUD	Pill
Women who were informed about the side effects before adoption of the method	11.9	24.1	39.2
Women who had side-effect/health problem due to use of contraceptive method	9.7	3.5	4.9
<b>Number of current users**</b>	<b>348</b>	<b>349</b>	<b>196</b>
<b>Type of health problems/side effects<sup>1</sup></b>			
Weakness/inability to work	28.1	(25.0)	(20.0)
Body ache/ backache	28.3	(41.7)	(20.0)
Abdominal pain	44.5	(41.7)	---
Weight gain	9.6	---	---
Dizziness	23.5	(8.3)	(30.0)
Nausea/vomiting	3.0	---	---
Fever	8.2	(8.3)	---
Breast tenderness	---	(0.0)	---
Irregular periods	---	(16.7)	---
Excessive bleeding	8.6	(0.0)	---
Spotting	---	(8.3)	---
Amenorrhoea	---	(0.0)	---
Cramps	5.6	(0.0)	---
Decreased libido	---	(0.0)	---
Rashes/allergy	3.0	(0.0)	---
Infection	---	(0.0)	---
Others	16.3	(0.0)	(20.0)
<b>Number of users with side effects**</b>	<b>35</b>	<b>12</b>	<b>10</b>
<b>Percentage of women received treatment</b>	<b>42.9</b>	<b>58.3</b>	<b>---</b>
<b>Source of treatment</b>			
Government health facility	17.8	---	---
Private health facility	27.6	---	---
Other	0.0	---	---
<b>Number of women with treatment taken**</b>	<b>15</b>	<b>07</b>	<b>01</b>

Note: <sup>1</sup> Percentages may add to more than 100 because of multiple responses. ( ) Based on 10-20 unweighted cases. -- Percentage not shown for less than 10 cases. \*\* Unweighted cases.



**TABLE 5.11 REASONS FOR DISCONTINUATION OF CONTRACEPTION**

Percent distribution of currently married women age 15-49 years who are past users (currently non-users) by reason for discontinuation of the contraceptive method according to selected background characteristics, Nagaland, 2012-13

Background characteristics	Reasons for discontinuation			Number of women**
	Fertility related <sup>1</sup>	Side effect related	Others <sup>2</sup>	
<b>Age group</b>				
15 - 19	(58.3)	(25.0)	(16.7)	12
20 - 24	42.9	16.7	40.4	75
25 - 29	39.5	13.3	47.2	139
30 - 34	22.0	22.6	55.4	176
35 - 39	9.1	22.5	68.4	184
40 - 44	8.2	17.6	74.2	138
45 - 49	7.1	33.3	59.6	126
<b>No. of living children</b>				
0	40.2	25.1	34.7	144
1	31.7	20.8	47.5	160
2	18.8	15.8	65.4	190
3	6.0	17.5	76.4	149
4+	7.2	26.8	66.0	207
<b>Residence</b>				
Rural	16.9	21.2	61.9	629
Urban	27.5	21.5	50.9	221
<b>Education</b>				
Non-literate <sup>a</sup>	22.7	38.1	39.2	133
Less than five years	14.2	13.7	72.2	214
5-9 years	16.2	17.1	66.7	289
10 or more years	29.4	23.8	46.8	214
<b>Religion</b>				
Hindu	30.7	15.4	53.9	35
Muslim	(23.1)	(46.2)	(30.8)	13
Christian	19.6	21.2	59.2	801
Others	---	---	---	01
<b>Castes/Tribes</b>				
Scheduled castes	19.6	26.5	53.9	22
Scheduled tribes	18.1	20.8	61.0	775
Other backward classes	---	---	---	02
Others	48.7	24.4	26.9	51
<b>DLHS-4</b>	<b>20.2</b>	<b>21.3</b>	<b>58.5</b>	<b>850</b>

<sup>a</sup> Literates but did not attend school, are also included, <sup>1</sup> Wanted child, method failed/became pregnant, <sup>2</sup> Others include supply not available, difficult to get method, lack of pleasure, method was inconvenient, cost too much, family/husband opposed, not having sex, infrequent sex, husband away and others. ( ) Based on 10-20 unweighted cases. -- Percentage not shown for less than 10 cases. \*\* Unweighted cases.

**TABLE 5.12 FUTURE INTENTION TO USE CONTRACEPTION**  
 Percent distribution of currently married women aged 15-49 years who are not using contraceptive method but having intention to use contraception in future by background characteristics Nagaland, 2012-13.

Background Characteristics	Future intention to use <sup>1</sup>		Want to use any family planning method			Number of non-users**
	Spacing Method	Limiting Method	Within 12 months	12 months and more	Undecided	
<b>Age group</b>						
15 - 19	8.0	0.0	27.6	23.1	49.3	39
20 - 24	3.1	1.4	10.3	19.9	69.9	267
25 - 29	4.1	1.5	16.5	30.5	53.0	507
30 - 34	2.8	1.1	14.2	34.8	51.1	587
35 - 39	0.8	0.5	15.7	35.0	49.4	623
40 - 44	0.6	0.4	15.2	18.4	66.4	555
45 - 49	0.7	0.0	13.9	24.7	61.4	691
<b>No. of living children</b>						
0	1.6	0.3	0.0	26.6	73.4	530
1	2.9	0.2	29.4	25.4	45.2	573
2	2.1	0.9	8.1	39.6	52.3	675
3	1.8	1.5	22.4	23.3	54.3	639
4+	1.3	0.5	13.9	28.4	57.7	852
<b>Residence</b>						
Rural	2.0	0.6	19.3	30.6	50.1	2431
Urban	1.6	0.8	7.3	26.2	66.5	838
<b>Education</b>						
Non-literate <sup>a</sup>	1.3	0.7	8.9	22.9	68.2	503
Less than five years	2.1	0.8	15.5	27.9	56.6	905
5-9 years	2.0	0.3	16.7	34.9	48.4	1099
10 or more years	1.9	1.1	16.0	27.6	56.4	762
<b>Religion</b>						
Hindu	1.9	3.4	11.0	16.9	72.1	129
Muslim	3.5	2.0	0.0	23.2	76.8	49
Christian	1.9	0.5	15.9	30.4	53.6	3085
Others	---	---	---	---	---	06
<b>Castes/Tribes</b>						
Scheduled castes	4.0	6.2	11.1	26.1	62.9	87
Scheduled tribes	1.8	0.6	16.2	29.3	54.5	3044
Other backward classes	---	---	---	---	---	07
Others	1.2	0.0	0.0	29.5	70.5	131
<b>DLHS-4</b>	<b>1.9</b>	<b>0.7</b>	<b>15.0</b>	<b>29.1</b>	<b>55.9</b>	<b>3269</b>

Note: (Total figure may not add to N, sample total, due to 'don't know' or 'missing cases'). Spacing method includes IUD, pills, condom (Male/Female) and Injectables. Limiting method includes male sterilization and female sterilization, <sup>1</sup> Total figure may not add to 100 percent due to exclusion of other methods (Rhythm/ Periodic abstinence, Withdrawal, Undecided and Others), <sup>a</sup> Literates but did not attend school, are also included. -- Percentage not shown for less than 10 cases. \*\* Unweighted cases

**TABLE 5.13 ADVICE ON CONTRACEPTIVE USE**

Percentage of currently married women age 15-49 years who are currently not using any contraceptive and were advised by the ANM/health worker to use modern contraception by suggested method and place of residence, Nagaland, 20012-13.

Advice	Total	Residence	
		Rural	Urban
Percent Non-users advised to use modern contraceptive method <sup>1</sup>	14.0	12.2	18.0
<b>Number of Non-users**</b>	<b>3269</b>	<b>2431</b>	<b>838</b>
Percent of Traditional method users advised to use modern method	29.0	26.7	34.5
<b>Number of traditional method users**</b>	<b>494</b>	<b>368</b>	<b>126</b>
<b>Percent of non-users or traditional method users who were advised to use</b>			
Female sterilization			
Male sterilization	5.1	4.9	5.7
IUD	0.9	0.8	1.0
Pill(Daily/weekly)	8.1	8.3	7.5
Injectables	7.5	7.5	7.4
Condom/ <i>Nimrod</i>	2.3	1.9	3.3
Female condom	8.2	8.3	8.0
	0.7	0.6	0.8
Rhythmic /periodic abstinence			
Withdrawal	6.9	5.6	9.7
Others	3.5	3.3	4.0
	1.0	0.6	1.7

Note: Exclude women in menopause or those who have undergone hysterectomy, <sup>1</sup> Includes Doctor, ANM, Health Worker, *anganwadi* Worker and ASHA, \*\* Unweighted cases.

**TABLE 5.14 REASONS FOR NOT USING MODERN CONTRACEPTIVE METHODS AMONG RHYTHM AND WITHDRAWAL METHOD USERS**

Percent distribution of currently married women age 15-49 years who are currently using rhythm or withdrawal method by reasons for not using modern contraceptive method, according to selected background characteristics, Nagaland, 2012-13.

Background characteristics	Reason for not using modern contraceptive method			Number of women**
	Fertility related	Opposition to use/lack of knowledge	Method related	
<b>Age group</b>				
15 - 19	---	---	---	07
20 - 24	76.9	0.0	23.1	27
25 - 29	54.7	4.3	41.0	80
30 - 34	52.7	6.9	40.4	117
35 - 39	48.7	3.5	47.8	113
40 - 44	57.3	4.9	37.9	75
45 - 49	38.9	7.9	53.2	75
<b>No. of living children</b>				
0	46.8	1.6	51.6	71
1	66.2	0.0	33.8	92
2	38.6	8.0	53.5	127
3	52.2	6.7	41.0	95
4+	58.5	9.7	31.8	109
<b>Residence</b>				
Rural	56.4	4.3	39.3	368
Urban	44.5	7.3	48.1	126
<b>Education</b>				
Non-literate <sup>a</sup>	27.1	6.7	66.2	72
Less than five years	74.8	0.9	24.3	143
5-9 years	50.7	9.6	39.7	174
10 or more years	36.9	4.9	58.3	105
<b>Religion</b>				
Hindu	(30.8)	(7.7)	(61.5)	15
Muslim	---	---	---	09
Christian	53.7	4.8	41.5	470
Others	---	---	---	---
<b>Castes/Tribes</b>				
Scheduled castes	36.4	17.4	46.2	21
Scheduled tribes	53.8	4.9	41.4	466
Other backward classes	---	---	---	02
Others	---	---	---	05
<b>DLHS-4</b>	<b>52.3</b>	<b>5.4</b>	<b>42.4</b>	<b>494</b>

<sup>a</sup> Literates but did not attend school, are also included. ( ) Based on 10-20 unweighted cases. -- Percentage not shown for less than 10 cases. \*\* Unweighted cases.

**TABLE 5.15 UNMET NEED FOR FAMILY PLANNING SERVICES**

Percentage of currently married women age 15-49 years by unmet need for family planning services according to selected background characteristics, Nagaland, 2012-13

Background characteristics	Unmet need for FP			Number of women**
	Spacing <sup>1</sup>	Limiting <sup>2</sup>	Total	
<b>Age group</b>				
15 - 19	43.0	1.4	44.3	75
20 - 24	40.6	8.3	49.0	435
25 - 29	28.6	12.8	41.4	873
30 - 34	21.3	21.9	43.2	1014
35 - 39	16.4	26.3	42.7	1079
40 - 44	12.4	25.7	38.1	907
45 - 49	5.7	33.7	39.3	1055
<b>Number of living children</b>				
0	30.4	12.2	42.6	846
1	29.3	13.1	42.5	931
2	19.8	22.1	41.9	1210
3	13.1	28.0	41.1	1039
4+	9.6	31.2	40.9	1412
<b>Residence</b>				
Rural	19.8	22.7	42.5	3999
Urban	15.9	23.7	39.6	1439
<b>Education</b>				
Non-literate <sup>a</sup>	23.3	22.7	46.0	789
Less than five years	16.9	23.1	40.0	1573
5-9 years	18.9	22.0	40.9	1774
10 or more years	17.9	24.4	42.2	1302
<b>Religion</b>				
Hindu	12.3	18.3	30.7	219
Muslim	18.0	16.2	34.2	87
Christian	19.0	23.4	42.3	5121
Others	(12.5)	(25.0)	(37.5)	11
<b>Castes/Tribes</b>				
Scheduled castes	13.3	20.7	34.0	164
Scheduled tribes	18.9	23.3	42.2	5027
Other backward classes	(16.7)	(16.7)	(33.4)	13
Others	16.4	19.0	35.4	234
<b>DLHS-4</b>	<b>18.6</b>	<b>23.0</b>	<b>41.6</b>	<b>5438</b>

Note: Total unmet need refers to unmet for limiting and spacing.

<sup>1</sup> Unmet need for spacing includes the proportion of currently married women who are neither in menopause or had hysterectomy nor are currently pregnant and who want more children after two years nor later and are currently not using any family planning method. The women who are not sure about whether and when to have next child are also included in unmet need for spacing.

<sup>2</sup> Unmet need for limiting includes the proportion of currently married women who are neither in menopause nor had hysterectomy nor are currently pregnant and do not want any more children but are currently not using any family planning method. Total unmet need refers to unmet for limiting and spacing.

<sup>a</sup> Literates but did not attend school, are also included. \*\* Unweighted cases.

**TABLE 5.16 UNMET NEED FOR FAMILY PLANNING SERVICES BY DISTRICT**  
 Percentage of currently married women age 15-49 years by unmet need for family planning services by districts, Nagaland, 2012-13.

District	Unmet need for FP			Number of women**
	Spacing <sup>1</sup>	Limiting <sup>2</sup>	Total	
Mon	33.8	19.3	53.1	474
Tuensang	21.0	30.7	51.8	558
Mokokchung	11.3	22.3	33.5	374
Zunheboto	15.3	19.6	34.8	620
Wokha	14.0	22.0	36.1	457
Dimapur	12.7	22.9	35.6	685
Kohima	15.7	20.5	36.2	502
Phek	26.1	19.2	45.3	339
Kiphire	11.6	39.4	51.0	513
Longleng	10.6	24.1	34.7	468
Paren	41.5	8.7	50.3	448
<b>DLHS-4</b>	<b>18.6</b>	<b>23.0</b>	<b>41.6</b>	<b>5438</b>

Note: Total unmet need refers to unmet for limiting and spacing.  
<sup>1</sup> Unmet need for spacing includes the proportion of currently married women who are neither in menopause nor had hysterectomy nor are currently pregnant and who want more children after two years or later and are currently not using any family planning method. The women who are not sure about whether and when to have next child are also included in unmet need for spacing.  
<sup>2</sup> Unmet need for limiting includes the proportion of currently married women who are neither in menopause nor had hysterectomy nor are currently pregnant and do not want any more children but are currently not using any family planning method. \*\* Unweighted cases.



**REPRODUCTIVE HEALTH PROBLEMS AND  
AWARENESS**



**TABLE 6.1 MENSTRUATION RELATED PROBLEMS BY BACKGROUND CHARACTERISTICS**

Percentage of ever married women aged 15-49 years who had any menstruation related problem during three months prior to survey and among them, reported specific symptoms according to selected background characteristics, Nagaland, 2012-13.

Background characteristics	Who had any menstruation related problem (%)	Total number of women <sup>1</sup>	Reported Symptoms among who had any menstruation problem								Number of women who had menstruation problem**
			No periods	Painful periods	Frequent or short periods	Irregular periods	Prolonged bleeding	Scanty bleeding	Inter-menstrual bleeding	Blood clots/excessive bleeding	
<b>Age group</b>											
15-19	-	67	-	-	-	-	-	-	-	-	03
20-24	(4.1)	415	(11.8)	(58.9)	(23.5)	(23.5)	(11.8)	(0.0)	(5.9)	(5.9)	17
25-29	3.9	881	0.0	55.4	16.8	39.6	6.1	0.0	6.9	11.4	33
30-34	4.0	1117	2.2	42.3	33.1	25.6	6.6	8.3	0.0	4.5	44
35-39	3.9	1234	9.0	45.7	17.8	34.0	3.0	4.0	0.0	0.0	50
40-44	4.5	981	8.7	40.5	16.3	35.4	4.5	5.4	4.1	0.0	43
45-49	3.8	1074	9.2	36.6	13.0	39.0	2.7	5.4	2.3	11.3	42
<b>Place of residence</b>											
Rural	3.8	4263	7.6	43.2	20.9	30.4	6.2	3.7	3.1	5.0	163
Urban	4.6	1506	4.3	46.1	17.3	40.7	4.1	5.7	2.9	5.1	69
<b>Age at consumption of marriage</b>											
Below 18 years	6.0	825	2.0	47.9	20.8	40.3	4.1	2.1	4.7	7.7	49
18 years & above	3.6	4088	8.9	42.6	19.3	32.0	6.8	4.5	3.2	3.3	146
<b>Marital duration</b>											
0-4	3.3	977	13.3	43.3	22.8	36.2	12.2	0.0	5.8	3.5	32
5-9	2.9	862	3.8	69.6	28.5	19.7	4.9	3.8	0.0	0.0	25
10-14	4.5	1042	4.1	43.3	16.5	36.9	9.6	1.8	5.1	8.6	47
15+	4.5	2633	6.4	40.9	18.7	32.5	2.6	7.0	2.3	4.7	120
<b>Education</b>											
Non-literate <sup>a</sup>	4.3	931	13.3	41.2	11.9	37.3	9.2	2.6	2.6	7.2	38
Less than 5 yrs	4.4	530	8.3	22.2	41.9	38.1	4.1	0.0	0.0	0.0	24
5-9 years	4.0	2980	4.9	50.5	17.2	30.9	3.4	6.7	2.4	5.1	122
10 or more years	3.6	1328	3.8	41.6	21.5	37.1	8.0	2.4	6.3	5.5	48
<b>Husband's education</b>											
Non-literate <sup>a</sup>	5.6	794	15.9	34.4	15.5	30.5	10.6	2.3	2.4	13.4	43
Less than 5 yrs	3.8	342	(0.0)	(61.5)	(15.4)	(15.4)	(0.0)	(0.0)	(0.0)	(0.0)	13
5-9 years	4.1	2593	4.7	44.9	23.8	34.3	3.8	4.9	3.5	1.9	108
10 or more years	3.3	2040	4.1	46.0	16.8	36.3	5.7	5.8	3.3	5.2	68
<b>Religion</b>											
Hindu	5.2	211	(0.0)	(27.3)	(36.4)	(36.4)	(9.1)	(0.0)	(18.2)	(9.1)	11
Muslim	9.3	80	--	--	--	--	--	--	--	--	08
Christian	3.9	5468	7.1	44.6	19.3	33.3	5.1	4.4	2.2	4.1	212
Other	--	10	--	--	--	--	--	--	--	--	01

Contd...

**TABLE 6.1 MENSTRUATION RELATED PROBLEMSBY BACKGROUND CHARACTERISTICS – Continued**

Background characteristics	Who had any menstruation related problem	Total number of women <sup>1</sup>	Reported Symptoms								Number of women who had menstruation problem**
			No periods	Painful periods	Frequent or short periods	Irregular periods	Prolonged bleeding	Scanty bleeding	Inter-menstrual bleeding	Blood clots/excessive bleeding	
<b>Castes/Tribes</b>											
Scheduled Castes	6.7	151	--	--	--	--	--	--	--	--	10
Scheduled Tribes	3.7	5379	5.8	44.3	20.6	33.9	4.8	4.7	2.4	3.8	200
Other Backward Classes	(14.3)	14	0.0	100.0	0.0	0.0	52.7	0.0	0.0	52.7	02
Others	8.9	225	15.1	35.1	14.6	29.0	5.3	0.0	5.7	5.3	20
<b>DLHS-4</b>	4.0	5769	6.4	44.2	19.6	34.0	5.5	4.4	3.0	5.0	232
Note: Total figure may not add to 100 percent due to multiple responses <sup>a</sup> Literate but did not attend school, are also included. <sup>1</sup> Excludes pregnant, in amenorrhea, in menopause, had hysterectomy and ever menstruated women. ( ) Based on 10-20 unweighted cases. -- Percentage not shown for less than 10 unweighted cases.** Unweighted cases.											

**TABLE 6.2 SOURCE OF KNOWLEDGE ABOUT RTI/STIBY BACKGROUND CHARACTERISTICS**

Percentage of ever married women aged 15- 49 years who have heard about RTI/STI, among them, who received information from specific sources according to selected background characteristics, Nagaland, 2012-13.

Background characteristics	Who have heard RTI/STI	Total number of women**	Source of Knowledge										Number of women heard of RTI/STI*
			Radio	T.V.	Cinema	Print media <sup>1</sup>	Health personnel <sup>2</sup>	School/ adult education programs <sup>3</sup>	Leaders/ community meeting <sup>4</sup>	Husband	Relative / friends	Other	
<b>Age group</b>													
15-19	(18.8)	83	(13.3)	(20.0)	(26.7)	(40.0)	(46.7)	(26.7)	(46.7)	(13.3)	(6.7)	(0.0)	15
20-24	19.8	489	7.6	21.0	28.3	52.4	55.8	22.5	47.3	4.8	12.2	0.0	98
25-29	18.8	996	5.4	32.0	31.0	56.3	52.1	18.3	34.9	14.7	6.1	0.7	186
30-34	16.6	1162	13.1	31.8	31.3	51.0	43.8	16.2	37.2	11.5	7.9	0.0	192
35-39	13.2	1269	8.1	28.0	28.7	49.7	46.7	16.6	38.1	7.2	5.6	1.0	162
40-44	14.5	1064	11.4	31.9	26.3	57.0	35.9	14.4	30.6	9.4	12.8	0.7	153
45-49	10.9	1284	7.1	29.7	25.2	48.7	49.9	23.2	37.2	12.2	11.9	0.5	137
<b>Residence</b>													
Rural	13.1	4689	11.0	26.3	23.5	50.2	49.7	18.7	40.3	10.6	7.4	0.1	616
Urban	19.5	1658	5.9	34.5	36.3	55.8	42.5	17.6	32.2	10.2	11.2	1.0	327
<b>Age at consummation of marriage</b>													
Below 18 years	9.9	900	6.4	27.7	16.2	46.6	43.9	18.1	42.6	13.8	1.3	0.0	85
18 years & above	16.1	4557	7.2	29.1	29.3	52.0	48.0	19.7	37.4	10.3	9.4	0.5	723
<b>Marital duration</b>													
0-4	20.7	1150	9.8	29.8	35.1	50.8	51.9	16.7	36.9	11.4	9.2	0.0	238
5-9	17.3	917	7.8	28.6	29.6	49.3	42.6	20.3	35.9	9.8	5.6	0.8	158
10-14	15.2	1080	9.0	31.8	29.7	57.2	55.8	17.9	34.7	11.5	7.2	0.0	156
15+	11.8	2926	8.7	28.0	21.4	53.0	41.2	19.5	37.7	9.7	8.7	0.8	343
<b>Education</b>													
Non-literate <sup>a</sup>	6.6	993	15.0	23.5	12.9	40.5	51.0	19.7	37.2	16.2	7.3	0.0	63
Less than 5 yrs	8.2	571	6.9	17.2	6.0	28.7	36.3	30.0	61.5	15.3	7.6	0.0	45
5-9 years	12.1	3302	8.8	29.7	19.9	50.9	43.4	18.6	41.3	10.0	4.9	0.0	399
10 or more years	29.1	1481	8.5	31.7	40.9	57.9	50.3	16.6	30.7	9.5	12.9	1.1	436
<b>Husband's education</b>													
Non-literate <sup>a</sup>	6.9	838	17.4	36.2	17.9	47.4	43.6	19.1	30.9	13.6	5.0	0.0	56
Less than 5 years	9.5	370	0.0	15.4	14.8	33.8	36.6	34.0	50.7	17.1	8.7	0.0	35
5-9 years	12.0	2877	10.5	25.5	20.3	49.4	48.6	18.3	42.6	10.1	7.2	0.2	344
10 or more years	22.6	2262	7.7	32.5	36.2	56.1	46.8	17.2	33.2	9.9	10.5	0.8	508
<b>Religion</b>													
Hindu	12.5	233	5.7	32.8	23.5	64.4	14.4	27.9	23.9	11.6	0.0	0.0	28
Muslim	15.2	94	(0.0)	(7.7)	(7.7)	(61.5)	(38.5)	(23.1)	(30.8)	(7.7)	(0.0)	(0.0)	13
Christian	15.1	6008	9.3	30.0	29.2	51.9	48.3	17.9	37.6	10.5	9.2	0.5	899
Others	(25.1)	12	--	--	--	--	--	--	--	--	--	--	03

Contd...

**TABLE 6.2 SOURCE OF KNOWLEDGE ABOUT RTI/STIBY BACKGROUND CHARACTERISTICS**

Background characteristics	Who have heard RTI/S TI	Total number of women**	Source of Knowledge										Number of women heard of RTI/STI**
			Radio	T.V.	Cinema	Print media <sup>1</sup>	Health personnel <sup>2</sup>	School/adult education programs <sup>3</sup>	Leaders/community meeting <sup>4</sup>	Husband	Relative/friends	Other	
<b>Castes/Tribes</b>													
Scheduled Castes	14.6	178	9.9	39.1	28.6	46.2	19.1	23.6	46.2	8.6	3.6	0.0	26
Scheduled Tribes	15.3	5906	9.1	29.6	28.9	52.0	48.6	18.4	37.6	10.7	9.4	0.5	890
Other Backward classes	(7.0)	14	--	--	--	--	--	--	--	--	--	--	01
Others	11.5	249	3.1	21.2	23.2	71.8	26.3	11.4	11.0	4.2	0.0	0.0	26
<b>DLHS-4</b>	15.1	6347	9.0	29.6	28.7	52.4	46.9	18.3	37.0	10.4	8.9	0.5	943

Note: Total figure may not add to 100 percent due to multiple responses. <sup>a</sup>Literate but did not attend school, are also included. <sup>1</sup> Includes News papers/books/magazines/slogans/pamphlets and posters. <sup>2</sup> Includes Doctor/ASHA/health workers. <sup>3</sup> Includes school/teacher, adult education programs. <sup>4</sup> Includes religious/ political leaders, community meetings and exhibition/ *Mela*. ( ) Based on 10-20 unweighted cases. -- Percentage not shown for less than 10 cases.\*\* Unweighted cases.

**TABLE 6.3 KNOWLEDGE OF MODE OF TRANSMISSION OF RTI/STIBY BACKGROUND CHARACTERISTICS**

Percentage of ever married women aged 15-49 years who have heard of RTI/STI and among them, who have knowledge of transmission of RTI/STI, according to selected background characteristics, Nagaland, 2012-13.

Background characteristics	knowledge of transmission of RTI/STI								Number of women heard of RTI/STI **
	Heard of RTI/STI	Unsafe delivery	Unsafe abortion	Unsafe IUD insertion	Unsafe sex with homosexuals	Unsafe sex with persons who have many partners	Unsafe sex with sex workers	Other	
<b>Age group</b>									
15-19	(18.1)	(46.7)	(40.0)	(6.7)	(6.7)	(66.7)	(73.3)	(0.0)	15
20-24	19.8	51.7	39.8	15.6	20.9	61.9	45.6	1.2	98
25-29	18.8	47.8	40.5	26.5	20.3	54.2	56.1	0.5	186
30-34	16.6	38.0	39.2	26.0	19.3	55.3	60.6	0.0	192
35-39	13.2	35.9	37.7	25.3	22.9	54.3	59.5	0.0	162
40-44	14.5	38.5	41.8	24.8	16.2	58.0	46.4	0.0	153
45-49	10.9	33.7	36.8	21.8	19.2	66.6	51.6	0.0	137
<b>Residence</b>									
Rural	13.1	44.0	37.0	20.5	17.9	55.6	49.4	0.2	616
Urban	19.5	35.3	42.9	28.6	22.0	61.2	62.2	0.3	327
<b>Age at consummation of marriage</b>									
Below 18 years	9.9	29.3	36.2	18.4	18.8	67.1	61.4	0.0	85
18 years & above	16.1	42.2	38.9	24.9	18.7	56.5	53.5	0.3	723
<b>Marital duration</b>									
0-4	20.7	49.7	42.2	22.5	21.7	53.0	50.3	0.9	238
5-9	17.3	40.4	34.5	24.9	20.2	55.5	56.9	0.0	158
10-14	15.2	40.8	41.7	28.1	18.4	56.7	57.3	0.0	156
15+	11.8	35.3	37.7	22.2	19.0	62.1	53.2	0.0	343
<b>Education</b>									
Non-literate <sup>a</sup>	6.6	28.8	28.8	19.4	22.4	55.4	41.8	0.0	63
Less than 5 yrs	8.2	18.9	13.9	10.5	8.9	51.1	64.0	0.0	45
5-9 years	12.1	38.2	37.5	20.4	20.2	60.3	52.5	0.0	399
10 or more years	29.1	46.4	45.1	28.7	19.7	56.7	57.2	0.5	436
<b>Husband's education</b>									
Non-literate <sup>a</sup>	6.9	33.0	33.0	15.0	15.7	47.2	40.6	0.0	56
Less than 5 years	9.5	37.4	18.4	16.5	15.4	49.7	38.1	0.0	35
5-9 years	12.0	32.9	34.6	19.2	17.6	63.4	59.4	0.0	344
10 or more years	22.6	46.5	44.5	28.2	21.6	56.0	54.0	0.4	508
<b>Religion</b>									
Hindu	12.5	11.5	22.1	11.2	12.2	77.6	59.8	0.0	28
Muslim	(13.8)	(23.1)	(30.8)	(15.4)	(15.4)	(76.9)	(53.8)	(0.0)	13
Christian	15.1	42.1	40.2	24.5	19.9	56.6	54.3	0.2	899
Others	--	--	--	--	--	--	--	--	03
<b>Castes/Tribes</b>									
Scheduled Castes	14.6	28.9	32.2	11.9	28.2	65.6	53.9	0.0	26
Scheduled Tribes	15.3	42.2	40.3	24.7	20.0	56.9	54.4	0.2	890
Other Backward Classes	--	--	--	--	--	--	--	--	01
Others	11.5	5.9	22.2	10.8	0.0	75.3	59.8	0.0	26
<b>DLHS-4</b>	15.1	40.5	39.4	23.8	19.6	57.9	54.5	0.2	943

Note: Total figure may not add to 100 percent due to multiple responses. <sup>a</sup>Literate but did not attend school, are also included.  
 ( ) Based on 10-20 unweighted cases. -- Percentage not shown for less than 10 cases. \*\* Unweighted cases.

**TABLE 6.4 SYMPTOMS OF RTI/STIBY BACKGROUND CHARACTERISTICS**

Percentage of ever married women aged 15-49 years who had reported abnormal vaginal discharge, other RTI/STI symptoms during three months prior to survey according to selected background characteristics, Nagaland, 2012-13

Background characteristics	Women reported abnormal vaginal discharge	Women reported other RTI/STI symptoms <sup>1</sup>	Percentage reported specific symptom of RTI/STI <sup>1</sup>							Total number of women **
			Itching or irritation over vulva	Boils/Ulcers/Warts around vulva	Pain in lower abdomen not related menses	Swelling in the groin	Painful blister like lesions	Pain during sexual intercourse <sup>2</sup>	Spotting after sexual intercourse <sup>2</sup>	
<b>Age group</b>										
15-19	2.4	21.4	1.2	1.1	7.7	1.0	2.5	2.5	2.2	83
20-24	2.9	11.8	2.2	1.0	3.9	1.8	1.0	1.1	0.3	489
25-29	1.9	13.3	2.8	1.3	3.2	2.2	0.4	0.6	0.3	996
30-34	3.2	14.6	2.6	0.8	3.0	2.0	0.8	0.9	0.1	1162
35-39	1.9	12.0	1.5	0.6	2.2	1.4	0.5	0.2	0.2	1269
40-44	1.8	10.7	1.9	0.6	1.5	1.5	0.5	0.2	0.0	1064
45-49	2.2	11.6	1.9	0.7	2.1	1.7	0.5	0.4	0.1	1284
<b>Residence</b>										
Rural	2.0	12.1	2.0	0.7	2.6	1.9	0.6	0.6	0.2	4689
Urban	2.8	13.2	2.4	0.9	2.5	1.4	0.5	0.4	0.1	1658
<b>Age at consummation of marriage</b>										
Below 18 years	3.3	14.3	2.5	0.3	3.0	1.4	0.5	0.5	0.2	900
18 years & above	2.2	9.5	1.5	0.5	1.8	1.6	0.4	0.6	0.2	4557
<b>Marital duration</b>										
0-4	1.8	12.6	2.0	1.5	3.1	1.9	0.6	1.1	0.4	1150
5-9	1.9	11.8	2.7	0.9	3.3	1.4	0.9	0.7	0.3	917
10-14	3.3	13.3	1.8	0.5	2.6	1.7	0.2	0.4	0.1	1080
15+	2.2	12.2	2.2	0.6	2.1	1.9	0.6	0.4	0.1	2926
<b>Education</b>										
Non-literate <sup>a</sup>	3.3	14.5	2.1	0.7	3.0	1.8	0.6	0.2	0.0	993
Less than 5 yrs	2.1	9.4	2.4	0.6	1.7	0.7	0.0	0.2	0.0	571
5-9 years	1.8	11.6	2.0	0.8	2.6	1.3	0.7	0.5	0.3	3302
10 or more years	2.6	14.4	2.2	0.9	2.5	3.0	0.6	1.0	0.2	1481
<b>Husband's education</b>										
Non-literate <sup>a</sup>	2.9	17.5	2.5	0.7	2.9	1.5	0.6	0.1	0.2	838
Less than 5 years	2.2	10.4	1.5	0.4	2.5	0.9	0.5	0.3	0.0	370
5-9 years	2.1	11.2	2.2	0.9	2.6	1.3	0.6	0.4	0.2	2877
10 or more years	2.2	12.7	1.9	0.7	2.4	2.5	0.7	0.9	0.2	2262
<b>Religion</b>										
Hindu	1.0	12.4	2.2	0.0	1.6	0.8	0.0	0.0	0.0	233
Muslim	8.0	22.0	6.3	1.4	11.6	2.5	2.1	0.9	0.0	94
Christian	2.2	12.3	2.0	0.8	2.5	1.8	0.6	0.5	0.2	6008
Others	(8.3)	(25.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	12

Contd....

**TABLE 6.4 SYMPTOMS OF RTI/STIBY BACKGROUND CHARACTERISTICS**

Background characteristics	Women reported abnormal vaginal discharge	Women reported other RTI/STI symptoms <sup>1</sup>	Percentage reported specific symptom of RTI/STI <sup>1</sup>							Total number of women **
			Itching or irritation over vulva	Boils/Ulcers/Warts around vulva	Pain in lower abdomen not related menses	Swelling in the groin	Painful blister like lesions	Pain during sexual intercourse <sup>2</sup>	Spotting after sexual intercourse <sup>2</sup>	
<b>Castes/Tribes</b>										
Scheduled Castes	3.1	21.4	4.6	1.3	6.1	1.9	1.1	0.5	0.0	178
Scheduled Tribes	2.2	12.4	2.0	0.8	2.5	1.8	0.6	0.6	0.2	5906
Other Backward Classes	(7.1)	(7.1)	(7.1)	(0.0)	(7.1)	(0.0)	(0.0)	(0.0)	(0.0)	14
Others	3.4	8.3	2.8	0.8	1.3	0.4	0.0	0.0	0.0	249
<b>DLHS-4</b>	2.3	12.5	2.1	0.8	2.6	1.7	0.6	0.5	0.2	6347

Note: Total figure may not add to 100 percent due to 'do not know' or 'missing cases.' <sup>a</sup>Literate but did not attend school, are also included. <sup>1</sup> Excluding women having abnormal vaginal discharge problem. <sup>2</sup>Only for currently married women. \*\* Unweighted cases.

**TABLE 6.5 DISCUSSED ABOUT RTI/STI PROBLEMS WITH HUSBAND AND SOUGHT TREATMENT BY BACKGROUND CHARACTERISTICS**

Percentage of ever married women aged 15-49 years discussed RTI /STI problem with husband/partner and sought treatment among who reported any RTI/STI<sup>1</sup> problem and source of treatment according to selected background characteristics, Nagaland, 2012-13.

Background characteristics	Women discussed RTI/STI problems with husband/partner <sup>1</sup>	Women sought treatment <sup>1</sup> for RTI/STI problems	Number of women having any RTI/STI <sup>1</sup>	Source of treatment			Number of women who sought treatment**
				Government	Private	Other	
<b>Age group</b>							
15-19	(44.4)	(5.6)	18	-	-	-	01
20-24	44.8	15.2	58	-	-	-	09
25-29	44.4	19.5	132	56.1	36.7	7.1	26
30-34	45.3	16.6	166	33.4	66.6	0.0	26
35-39	41.2	18.8	148	30.1	58.9	11.0	27
40-44	49.3	18.0	114	36.2	49.4	14.4	20
45-49	45.4	21.7	145	37.9	52.8	9.2	31
<b>Residence</b>							
Rural	42.4	16.3	568	44.4	44.9	10.8	91
Urban	50.2	22.5	213	31.7	63.8	4.5	49
<b>Age at consummation of marriage</b>							
Below 18 years	61.0	17.5	122	32.0	63.6	4.4	22
18 years & above	48.4	20.0	425	38.1	51.7	10.2	82
<b>Marital duration</b>							
0-4	43.0	15.6	145	41.9	58.1	0.0	23
5-9	(41.3)	(14.7)	109	(56.3)	(37.5)	(6.3)	16
10-14	47.5	20.1	140	42.0	51.6	6.4	26
15+	49.6	20.9	350	35.3	54.2	10.5	73
<b>Education</b>							
Non-literate <sup>a</sup>	35.4	12.5	136	(47.1)	(47.1)	(5.9)	17
Less than 5 yrs	54.9	16.7	53	--	--	--	08
5-9 years	49.5	18.6	378	45.5	42.0	12.5	70
10 or more years	40.8	21.8	214	30.5	69.5	.0	46
<b>Husband's education</b>							
Non-literate <sup>a</sup>	29.3	10.5	143	(28.6)	(71.4)	(0.0)	14
Less than 5 years	52.0	22.5	38	--	--	--	08
5-9 years	49.9	17.2	319	54.6	37.3	8.1	56
10 or more years	46.5	22.8	281	31.8	60.2	8.0	63
<b>Religion</b>							
Hindu	54.0	19.9	29	--	--	--	06
Muslim	81.4	37.8	20	--	--	--	08
Christian	43.5	17.6	729	40.7	51.0	8.3	127
Others	--	--	03	--	--	--	--
<b>Castes/Tribes</b>							
Scheduled Castes	57.6	26.6	38	--	--	--	10
Scheduled Tribes	43.8	17.5	722	41.4	50.2	8.4	125
Other Backward Classes	--	--	01	--	--	--	01
Others	54.9	22.1	20	--	--	--	05
<b>DLHS-4</b>	44.9	18.3	781	39.3	52.4	8.3	141

Note: Total figure may not add to 100 percent due to 'do not know' or 'missing cases'. <sup>a</sup>Literate but did not attend school, are also included. <sup>1</sup> Any RTI/STI (Including abnormal vaginal discharge or other RTI/STI problem).  
( ) Based on unweighted cases. -- Percentage not shown for less than 10 cases. \*\* Unweighted cases.



**TABLE 6.6 RTI/STI INDICATORS BY DISTRICTS**

Percentage of ever married women aged 15-49 years who reported RTI/STI problem during three months prior to the survey and among them percentage sought treatment for the problem, by district, Nagaland, 2012-13

Districts	Who heard about RTI/STI	Who reported any abnormal vaginal discharge	Who have any other symptoms of RTI/STI <sup>1</sup>	Total number of women**	Who sought treatment for any RTI/STI <sup>2</sup>	Number of women having any RTI/STI <sup>2</sup>
Mon	8.0	2.6	6.4	676	6.9	38
Tuensang	24.9	3.0	7.6	583	18.2	46
Mokokchung	19.8	1.9	37.1	538	23.2	201
Zunheboto	8.4	1.0	3.6	704	16.1	26
Wokha	15.4	2.1	9.1	492	11.8	44
Dimapur	25.2	3.8	22.3	753	25.4	160
Kohima	19.1	2.9	11.8	535	16.6	61
Phek	13.9	1.1	25.6	486	10.9	126
Kiphire	9.7	2.2	5.6	552	6.5	32
Longleng	12.3	1.9	5.4	507	10.1	30
Peren	(4.0)	(1.5)	(3.3)	521	(17.6)	17
<b>DLHS-4</b>	14.7	2.2	12.4	6347	17.9	781

<sup>1</sup> Excluding women having abnormal vaginal discharge. <sup>2</sup> Any RTI/STI (including abnormal vaginal discharge problem or other RTI/STI problem). \*\*Unweighted cases.

<b>TABLE 6.7 KNOWLEDGE OF HIV/AIDS</b>													
Percentage of ever married women aged 15–49 years who have heard of HIV/AIDS and among them, who received information from specific sources according to selected background characteristics, Nagaland, 2012-13.													
Background characteristics	Who have heard of HIV/AIDS	Total women**	Sources of knowledge for HIV/AIDS										Number of women heard of HIV/AIDS**
			Radio	T.V.	Cinema	Print media <sup>1</sup>	Health personnel <sup>2</sup>	School/adult education programs <sup>3</sup>	Leaders/community meetings <sup>4</sup>	Husband	Relatives / friends	Other	
<b>Age group</b>													
15-19	72.5	83	15.0	30.0	23.3	40.0	26.7	26.7	75.0	10.0	3.3	5.0	60
20-24	80.6	489	11.2	23.5	25.0	35.7	39.5	27.0	64.3	10.5	3.1	1.0	392
25-29	77.3	996	11.1	28.6	26.7	36.7	43.1	28.8	60.0	17.8	2.5	1.7	765
30-34	79.3	1162	16.4	29.4	24.8	38.4	41.5	28.2	59.3	15.0	2.6	2.1	916
35-39	77.0	1269	15.6	26.5	24.0	38.5	39.8	27.3	56.7	14.8	2.6	1.6	970
40-44	71.3	1064	11.8	23.5	23.0	37.0	42.2	24.3	56.7	14.8	4.8	1.7	756
45-49	72.0	1284	15.0	26.2	20.4	33.4	38.9	29.6	60.6	16.4	2.5	2.3	922
<b>Residence</b>													
Rural	74.2	4689	15.3	22.9	17.6	34.5	42.3	28.7	60.0	16.2	2.4	1.9	3469
Urban	79.0	1658	10.2	36.7	40.3	42.8	36.4	24.8	57.6	12.5	4.3	1.7	1312
<b>Age at consummation of marriage</b>													
Below 18 years	72.7	900	13.2	26.2	19.6	31.0	35.1	29.1	59.2	16.0	0.6	1.2	652
18 years & above	77.5	4557	14.7	26.9	24.7	37.8	42.2	28.3	60.2	15.7	3.3	1.7	3512
<b>Marital duration</b>													
0-4	70.8	1150	11.2	28.6	30.1	36.3	41.9	27.3	60.0	12.4	3.5	1.7	807
5-9	74.7	917	14.0	27.1	24.4	36.8	38.2	28.5	60.7	17.8	1.9	2.2	680
10-14	78.9	1080	15.6	28.0	22.7	39.0	45.6	27.1	58.9	15.4	3.2	1.7	844
15+	76.4	2926	14.7	25.2	21.3	36.5	39.7	28.2	57.9	15.3	2.7	1.9	2235
<b>Education</b>													
Non-literate <sup>a</sup>	45.6	993	18.9	27.6	10.7	28.1	40.1	31.6	58.1	15.1	0.9	0.7	449
Less than 5 yrs	69.2	571	13.1	16.7	10.9	34.6	46.5	33.1	51.8	13.9	2.3	0.8	396
5-9 years	79.4	3302	12.8	23.2	17.8	32.0	39.0	27.4	62.2	14.9	2.0	1.9	2611
10 or more years	89.5	1481	14.6	36.2	43.9	49.8	42.5	25.2	56.4	16.2	5.8	2.5	1325
<b>Husband's education</b>													
Non-literate <sup>a</sup>	45.8	838	16.8	29.1	13.4	32.2	35.9	29.1	55.8	13.1	0.8	1.3	382
Less than 5 years	67.0	370	19.4	23.5	10.5	29.1	38.1	36.0	60.7	8.9	2.0	0.8	247
5-9 years	77.3	2877	12.2	20.8	16.7	30.5	39.9	26.8	61.4	15.2	2.1	1.9	2215
10 or more years	86.0	2262	14.7	33.4	35.7	45.8	42.9	27.3	57.5	16.5	4.5	2.0	1937
<b>Religion</b>													
Hindu	80.2	233	8.0	46.0	29.4	36.4	16.6	16.6	61.5	8.0	0.5	0.5	187
Muslim	56.1	94	9.8	29.4	17.6	27.5	17.6	15.7	54.9	3.9	2.0	0.0	51
Christian	75.8	6008	14.2	25.8	23.6	36.9	42.0	28.3	59.3	15.6	3.0	1.9	4534
Other	(75.0)	12	--	--	--	--	--	--	--	--	--	--	09

Contd....

**TABLE 6.7 KNOWLEDGE OF HIV/AIDS**

Background characteristics	Who have heard of HIV/AIDS	Total women**	Sources of knowledge for HIV/AIDS									Number of women heard of HIV/AIDS **	
			Radio	T.V.	Cinema	Print media <sup>1</sup>	Health person nel <sup>2</sup>	School/ adult education programs <sup>3</sup>	Leaders/ community meetings <sup>4</sup>	Husband	Relatives/ Friends		Other
<b>Castes/Tribes</b>													
Scheduled Castes	72.6	178	11.0	46.5	29.1	37.8	17.3	22.8	51.2	7.1	0.8	0.8	127
Scheduled Tribes	76.8	5906	14.3	25.9	23.6	37.0	42.0	28.3	59.5	15.7	3.1	1.8	4505
Other Backward Classes	(78.6)	14	(9.1)	(0.0)	(0.0)	(0.0)	(0.0)	(9.1)	(45.5)	(9.1)	(0.0)	45.5	11
Others	55.4	249	5.1	36.2	28.3	30.4	21.0	11.6	62.3	7.2	0.7	0.0	138
<b>DLHS-4</b>	75.7	6347	13.9	26.7	23.8	36.8	40.7	27.7	59.3	15.2	2.9	1.9	4781

Note: Total figure may not add to 100 percent due to multiple responses. <sup>a</sup>Literate but did not attend school, are also included. <sup>1</sup> Includes News papers/books/magazines/slogans/pamphlets and posters. <sup>2</sup> Includes Doctor/ASHA/health workers. <sup>3</sup> Includes school/teacher, adult education programs. <sup>4</sup> Includes religious/ political leaders, community meetings and exhibition/ *Mela*. ( ) Based on 10-20 unweighted cases. -- Percentage not shown for less than 10 cases.\*\* Unweighted cases.

**TABLE 6.8 KNOWLEDGE ABOUT MODE OF TRANSMISSION OF HIV/AIDS BY BACKGROUND CHARACTERISTICS**

Percentage of ever married women aged 15-49 years having knowledge of mode of transmission of HIV/AIDS among who have heard about HIV/AIDS according to selected background characteristics, Nagaland, 2012-13.

Background characteristics	Percentage of women who reported mode of transmission as							
	Unsafe sex with homosexuals	Unsafe sex with person having many partners	Unsafe sex with sex workers	Unprotected sex with HIV/AIDS infected person	Infected mother to child	Transfusion of infected blood	Sharing of injection/ Needles	Number of women who heard of HIV/AIDS**
<b>Age group</b>								
15-19	11.8	38.8	39.0	49.5	38.8	52.6	60.7	60
20-24	11.3	38.9	39.0	52.2	38.2	54.5	56.0	392
25-29	11.4	40.5	40.3	53.6	39.1	59.1	56.0	765
30-34	14.3	41.5	44.9	52.7	38.4	54.2	52.4	916
35-39	14.0	38.6	46.4	51.6	32.6	58.3	54.5	970
40-44	10.2	37.1	44.8	51.0	34.7	56.4	54.8	756
45-49	13.3	39.1	43.7	52.3	37.1	54.2	52.5	922
<b>Residence</b>								
Rural	12.2	39.4	43.8	49.9	33.6	54.9	53.6	3469
Urban	13.7	39.2	43.3	57.0	42.6	58.8	55.5	1312
<b>Age at consummation of marriage</b>								
Below 18 years	9.3	36.5	39.2	46.6	29.7	46.5	46.3	652
18 years & above	13.6	41.1	45.7	53.8	38.1	58.0	56.6	3512
<b>Marital duration</b>								
0-4	12.7	43.9	43.0	54.9	39.4	55.5	54.5	807
5-9	12.0	37.2	39.6	50.4	36.9	57.9	53.6	680
10-14	13.3	41.3	44.0	53.1	37.1	54.8	53.4	844
15+	12.9	37.8	45.1	51.2	34.8	55.7	54.4	2235
<b>Education</b>								
Non-literate <sup>a</sup>	9.8	33.7	36.5	40.7	29.5	47.7	46.4	449
Less than 5 yrs	8.8	33.9	38.1	38.9	31.7	52.2	51.2	396
5-9 years	9.9	35.9	40.8	48.4	31.2	53.4	52.9	2611
10 or more years	19.7	49.1	52.8	66.7	50.1	65.2	60.1	1325
<b>Husband's Education</b>								
Non-literate <sup>a</sup>	8.5	35.0	32.9	41.2	29.6	43.2	46.4	382
Less than 5 years	13.5	36.1	29.8	43.6	24.4	44.0	50.2	247
5-9 years	9.3	36.2	41.0	46.6	30.1	53.0	51.2	2215
10 or more years	17.0	44.0	50.3	61.5	46.3	63.6	59.6	1937
<b>Religion</b>								
Hindu	7.0	28.7	31.4	36.9	35.6	42.0	39.2	187
Muslim	12.9	27.8	35.4	38.9	44.5	37.1	50.4	51
Christian	12.9	40.0	44.4	53.1	36.5	57.1	55.0	4534
Other	--	--	--	--	--	--	--	09
<b>Castes/Tribes</b>								
Scheduled Castes	11.8	27.7	33.3	43.7	39.1	38.9	36.4	127
Scheduled Tribes	12.9	40.1	44.5	53.1	36.6	57.1	55.1	4505
Other Backward Classes	(0.0)	(9.1)	(0.0)	(63.6)	(0.0)	(90.9)	(9.1)	11
Others	5.5	29.5	32.3	32.7	32.2	42.9	48.8	138
<b>DLHS-4</b>	12.6	39.3	43.6	52.2	36.5	56.2	54.2	4781

Note: Total figure may not add to 100 percent due to multiple responses. <sup>a</sup>Literate but did not attend school, are also included. ( ) Based on unweighted cases. -- Percentage not shown for less than 10 cases. \*\* Unweighted cases

**TABLE 6.9 KNOWLEDGE OF HIV PREVENTION METHODS BY BACKGROUND CHARACTERISTICS**

Among ever married women aged 15-49 years who heard about HIV/AIDS, percentage who reported HIV/AIDS can be prevented in specific ways, according to selected background characteristics, Nagaland, 2012-13.

Background characteristics	Percentage who say that HIV/AIDS can be prevented by					Number of women having knowledge of HIV/AIDS**
	Using condom correctly during each sexual intercourse	Sex with one partner	avoid homosexual <sup>1</sup>	Avoid risks getting infected through bloods <sup>2</sup>	Avoid Pregnancy when having HIV/AIDS	
<b>Age group</b>						
15-19	25.6	31.5	11.5	72.0	19.9	60
20-24	31.6	27.7	9.7	64.8	20.8	392
25-29	28.4	25.3	10.5	69.3	20.5	765
30-34	27.2	29.7	15.9	69.2	21.0	916
35-39	29.6	27.2	15.8	68.3	19.7	970
40-44	30.1	25.7	13.9	67.8	23.7	756
45-49	28.1	28.0	17.3	66.4	19.0	922
<b>Residence</b>						
Rural	27.3	29.2	14.5	66.3	19.3	3469
Urban	32.3	23.5	14.2	71.4	23.5	1312
<b>Age at consummation of marriage</b>						
Below 18 years	23.5	24.6	11.2	59.6	17.2	652
18 years & above	29.7	29.2	16.0	70.8	22.6	3512
<b>Marital duration</b>						
0-4	32.5	27.7	12.3	68.5	21.8	807
5-9	26.1	25.2	10.7	66.7	19.8	680
10-14	27.7	30.6	15.0	69.0	20.1	844
15+	28.8	26.9	16.4	68.0	20.7	2235
<b>Education</b>						
Non-literate <sup>a</sup>	26.8	17.0	9.4	56.7	14.4	449
Less than 5 yrs	22.5	25.5	10.3	64.6	21.0	396
5-9 years	25.1	27.3	11.3	63.0	18.8	2611
10 or more years	38.3	31.4	23.0	76.7	26.0	1325
<b>Husband's education</b>						
Non-literate <sup>a</sup>	27.9	17.7	8.0	53.3	14.2	382
Less than 5 years	25.0	29.9	6.2	63.8	17.1	247
5-9 years	23.8	26.2	10.6	62.8	18.1	2215
10 or more years	35.1	30.2	20.8	73.4	25.2	1937
<b>Religion</b>						
Hindu	24.1	11.3	7.4	42.9	17.0	187
Muslim	22.9	20.5	18.5	54.9	21.1	51
Christian	29.2	28.3	14.7	67.8	20.9	4534
Other	--	--	--	--	--	09
<b>Castes/Tribes</b>						
Scheduled Castes	29.0	17.0	10.3	51.0	13.6	127
Scheduled Tribes	29.3	28.2	14.7	67.8	21.0	4505
Other Backward Classes	--	(72.7)	--	(72.7)	--	11
Others	18.5	10.9	9.6	42.8	20.1	138
<b>DLHS-4</b>	28.9	27.4	14.4	66.5	20.7	4781

Note: Total figure may not add to 100 percent due to multiple responses. <sup>a</sup> Literate but did not attend school, are also included.

<sup>1</sup> Includes sex with one partner, Limit number of sexual partner, Avoid sex with sex workers and avoids sex with homosexuals. <sup>2</sup> Includes avoid sex with who inject drugs, use tested blood, use only new/sterilized needles, avoid IV drip and avoid razors/blades.

( ) Based on unweighted cases. -- Percentage not shown for less than 10 cases. \*\* Unweighted cases.

**TABLE 6.10 MISCONCEPTION ABOUT TRANSMISSION OF HIV/AIDS BY BACKGROUND CHARACTERISTICS**

Percentage of ever married women aged 15-49 years having misconception about the transmission of HIV/AIDS among who have heard of HIV/AIDS, according to selected background characteristics, Nagaland, 2012-13.

Background characteristics	Misconception about the transmission of HIV/AIDS						Number of women heard of HIV/AIDS**
	Shaking hand	Hugging	Sharing clothes	Sharing food	Stepping on someone's urine/stool	Get HIV/AIDS from mosquito, flea or bedbug	
<b>Age group</b>							
15-19	9.8	6.6	11.6	6.5	8.2	34.9	60
20-24	2.7	1.7	3.6	5.5	7.5	25.9	392
25-29	1.2	0.5	2.2	2.2	4.7	20.2	765
30-34	1.5	1.7	2.9	3.5	5.4	21.9	916
35-39	1.7	1.5	2.7	2.9	4.8	21.1	970
40-44	2.0	1.6	1.8	2.4	3.6	19.8	756
45-49	1.8	1.3	2.2	2.7	4.8	19.8	922
<b>Residence</b>							
Rural	1.7	1.2	2.0	2.5	4.2	22.0	3469
Urban	2.1	1.9	3.8	4.2	6.7	19.6	1312
<b>Age at consummation of marriage</b>							
Below 18 years	4.0	3.3	4.8	4.6	9.0	24.5	652
18 years & above	1.3	0.9	2.2	2.5	4.3	20.3	3512
<b>Marital duration</b>							
0-4	1.9	1.2	2.8	3.1	4.9	22.2	807
5-9	1.3	0.5	3.7	3.9	7.1	21.1	680
10-14	1.9	1.3	2.1	2.8	3.8	21.6	844
15+	2.0	1.8	2.4	2.9	4.9	20.4	2235
<b>Education</b>							
Non-literate <sup>a</sup>	3.3	2.8	6.3	4.8	10.5	23.4	449
Less than 5 yrs	0.8	1.2	1.5	1.8	2.4	17.0	396
5-9 years	2.2	1.6	2.7	3.3	5.3	23.9	2611
10 or more years	1.0	0.7	1.5	2.3	3.3	16.6	1325
<b>Husband's education</b>							
Non-literate <sup>a</sup>	3.3	3.6	5.8	7.5	10.1	23.8	382
Less than 5 years	2.4	2.0	4.9	5.4	5.7	19.5	247
5-9 years	2.1	1.6	2.8	3.2	6.1	24.9	2215
10 or more years	1.2	0.7	1.5	1.7	2.7	16.9	1937
<b>Religion</b>							
Hindu	5.6	6.1	11.8	13.7	19.8	38.2	187
Muslim	6.7	6.7	14.3	16.3	26.7	35.8	51
Christian	1.6	1.1	2.0	2.3	4.0	20.2	4534
Other	--	--	--	--	--	--	09
<b>Castes/Tribes</b>							
Scheduled Castes	4.9	5.9	12.8	13.9	21.3	31.6	127
Scheduled Tribes	1.6	1.2	2.1	2.3	4.1	20.2	4505
Other Backward Classes	--	--	--	--	--	(36.4)	11
Others	6.7	4.7	7.4	12.6	16.7	38.9	138
<b>DLHS-4</b>	1.8	1.4	2.6	3.0	5.0	21.2	4781

<sup>a</sup>Literate but did not attend school, are also included. ( ) Based on unweighted cases. -- percentage not shown for less than 10 cases. \*\* Unweighted cases.

**TABLE 6.11 KNOWLEDGE ABOUT THE PLACE WHERE HIV/AIDS TEST CAN BE DONE**

Percentage of ever married women aged 15-49 years having knowledge about place where HIV/AIDS test can be done according to selected background characteristics, Nagaland 2012-13

Background Characteristics	Who know the place of HIV/AIDS test	Total women heard of HIV/AIDS**	Places where people can go to get tested for HIV/AIDS								Number of women who know the place for HIV/AIDS test**
			Government				Private				
			Hospital/ dispensary	CHC/P HC/Sub Health-Centre	VCTC/IC TC/ RTI/STI Clinic	Other public/N GO hospital	Hospital/ Clinic	VCTC/ICT C/ RTI/STI Clinic	Other Private centre		
<b>Age Group</b>											
15-19	36.9	60	24.6	18.4	5.9	1.9		23.3	27.8	--	21
20-24	44.3	392	43.7	7.1	1.7	0.6		17.1	28.0	--	172
25-29	44.5	765	40.3	12.8	4.2	0.7		25.3	16.6	.2	340
30-34	43.3	916	35.8	10.0	4.8	1.7		32.0	15.6	--	388
35-39	40.1	970	35.1	9.9	6.5	0.9		31.4	14.9	--	384
40-44	42.0	756	32.9	11.2	11.2	0.7		28.3	15.3	--	314
45-49	32.0	922	34.0	12.9	4.8	--		26.3	21.0	--	291
<b>Residence</b>											
Rural	36.4	3469	35.6	12.5	5.3	1.3		25.9	18.8	.1	1267
Urban	49.0	1312	37.3	8.4	6.6	0.5		30.7	15.8	--	643
<b>Age at consummation of marriage</b>											
Below 18 years	35.1	652	42.2	11.0	6.0	1.2		24.3	14.1	.4	227
18 years & above	42.6	3512	35.2	9.3	6.3	0.9		29.8	18.1	--	1478
<b>Marital Duration</b>											
0-4	46.4	807	42.3	10.9	2.8	1.4		22.2	20.4	--	372
5-9	43.6	680	41.2	10.2	4.8	1.0		25.7	16.7	--	292
10-14	40.3	844	36.0	9.1	4.8	0.7		29.9	18.2	--	334
15+	36.9	2235	31.6	11.6	8.2	0.8		31.5	15.8	.1	813
<b>Education</b>											
Non-literate <sup>a</sup>	25.4	449	43.5	15.1	2.3	1.7		15.7	18.8	--	112
Less than 5 yrs	31.5	396	26.2	8.7	15.7	2.5		36.1	10.8	--	125
5-9 years	36.0	2611	36.0	12.3	6.6	0.6		27.2	16.4	.1	931
10 or more years	56.2	1325	37.1	9.0	3.9	1.1		29.0	20.0	--	742
<b>Husband's Education</b>											
Non-literate <sup>a</sup>	27.9	382	33.6	18.5	1.8	1.3		21.4	22.3	--	106
Less than 5 years	27.9	247	28.7	6.4	5.6	1.2		35.8	22.2	--	69
5-9 years	34.5	2215	37.2	12.2	7.4	1.0		27.5	14.2	--	759
10 or more years	51.0	1937	36.3	9.5	5.1	--		28.2	19.4	.1	976
<b>Religion</b>											
Hindu	38.5	187	60.9	4.1	2.9	(14.3)		21.5	7.8	--	71
Muslim	27.4	51	(35.7)	(7.1)	(7.1)	1.0		(21.4)	(14.3)	--	14
Christian	40.7	4534	35.1	11.3	6.0	--		28.0	18.2	.0	1818
Other	--	09	--	--	--	--		--	--	--	07

Contd...

**TABLE 6.11 KNOWLEDGE ABOUT THE PLACE WHERE HIV/AIDS TEST CAN BE DONE**

Background Characteristics	Who know the place of HIV/AIDS test	Total women heard of HIV/AIDS**	Places where people can go to get tested for HIV /AIDS							Number of women who know the place for HIV/AIDS test**
			Government				Private			
			Hospital/ dispensary	CHC/PHC /Sub-Centre	VCTC/ICTC / RTI/STI Clinic	Other public/NGO hospital	Hospital/ Clinic	VCTC/ICT C/ RTI/STI Clinic	Other Private centre	
<b>Castes/Tribes</b>										
Scheduled Castes	41.8	127	50.1	7.2	4.1	3.1	26.6	5.1	--	53
Scheduled Tribes	40.8	4505	35.2	11.3	6.0	1.0	28.1	17.9	.0	1812
Other Backward Classes	(18.2)	11	--	--	--	--	--	--	--	02
Others	31.3	138	54.9	2.5	2.6	--	17.2	22.8	--	43
<b>DLHS-4</b>	40.5	4781	36.3	10.9	5.8	1.0	27.8	17.6	.0	1910

Note: Total figure may not add to 100 percent due to 'do not know' or 'missing cases. CHC= Community Health Centre; PHC= Primary Health Centre; VCTC/ICTC= voluntary/Integrated counseling and testing centre, NGO= Non Governmental Organization. <sup>a</sup>Literate but did not attend school, are also included. -- Percentage not shown for less than 10 cases. ( ) Based on unweighted cases. \*\* Unweighted cases.



**TABLE 6.12 UNDERGONE HIV/AIDS TEST**

Percentage of ever married women aged 15-49 years undergone for HIV/AIDS test and time to be tested for HIV/AIDS, according to selected background characteristics, Nagaland, 2012-13.

Background Characteristics	Who have been tested for HIV	Number of women heard HIV/AIDS**	Percentage who have been tested for HIV		Number of women went for HIV/AIDS test**
			Less than 12 months ago	1 or more than 1 years ago	
<b>Age group</b>					
15-19	(23.3)	60	(21.4)	(78.6)	15
20-24	27.3	392	32.2	67.8	108
25-29	25.2	765	36.0	64.0	193
30-34	24.9	916	15.5	84.5	227
35-39	16.2	970	19.6	80.4	158
40-44	17.5	756	25.8	74.2	134
45-49	13.7	922	17.1	82.9	126
<b>Residence</b>					
Rural	17.1	3469	21.6	78.4	558
Urban	26.1	1312	27.2	72.8	404
<b>Age at consummation of marriage</b>					
Below 18 years	21.5	652	24.2	75.8	142
18 years & above	19.7	3512	23.4	76.6	696
<b>Marital duration</b>					
0-4	27.5	807	33.7	66.3	223
5-9	25.1	680	25.2	74.8	171
10-14	19.5	844	20.3	79.7	164
15+	15.5	2235	20.3	79.7	349
<b>Education</b>					
Non-literate <sup>a</sup>	12.4	449	20.1	79.9	54
Less than 5 yrs	7.2	396	37.9	62.1	29
5-9 years	17.8	2611	25.7	74.3	461
10 or more years	30.3	1325	21.6	78.4	396
<b>Husband's education</b>					
Non-literate <sup>a</sup>	12.8	382	10.2	89.8	48
Less than 5 years	11.1	247	7.2	92.8	28
5-9 years	16.7	2215	27.5	72.5	370
10 or more years	26.1	1937	23.5	76.5	494
<b>Religion</b>					
Hindu	21.8	187	26.5	73.5	40
Muslim	12.3	51	--	--	07
Christian	20.0	4534	23.9	76.1	888
Other	--	09	--	--	05
<b>Castes/Tribes</b>					
Scheduled Castes	16.8	127	13.9	86.1	21
Scheduled Tribes	20.0	4505	24.0	76.0	883
Other Backward Classes	(27.3)	11	--	--	03
Others	23.6	138	30.2	69.8	33
<b>DLHS-4</b>	20.0	4781	23.9	76.1	940

<sup>a</sup>Literate but did not attend school, are also included. ( ) Based on unweighted cases. -- Percentage not shown for less than 10 cases. \*\* Unweighted cases.

**TABLE 6.13 HIV/AIDS INDICATORS BY DISTRICTS**

Percentage of ever married women aged 15-49 years who have heard of HIV/AIDS, know HIV/AIDS prevention, transmission, places where people can go to get tested for HIV /AIDS and who have been tested for HIV/AIDS in the past 12 months, by districts, Nagaland, 2012-13.

Districts	Who have heard of HIV/AIDS	Who know that HIV/AIDS can be prevented by using condom	Who know that HIV/AIDS can be transmitted from mother to her baby	Who know the places where people can go to get tested for HIV /AIDS	Who ever been tested for HIV/AIDS (%)	Who underwent HIV/AIDS test in the past 12 months among ever tested
Mon	59.8	20.4	22.9	22.4	8.4	19.8
Tuensang	84.6	34.6	40.4	40.3	19.4	20.2
Mokokchung	85.9	28.9	26.2	51.2	35.0	17.1
Zunheboto	77.7	24.8	36.6	39.6	15.8	37.5
Wokha	70.6	36.9	33.6	27.2	12.9	25.5
Dimapur	85.8	26.4	37.2	47.3	25.7	18.5
Kohima	83.5	34.7	51.8	59.3	41.0	23.0
Phek	63.9	31.8	40.7	35.2	11.1	14.2
Kiphire	61.8	44.9	48.7	49.9	17.8	66.8
Longleng	81.5	26.8	44.1	38.6	8.0	5.9
Peren	72.7	8.5	13.2	16.6	10.0	16.5
<b>Nagaland</b>	<b>75.7</b>	<b>28.6</b>	<b>36.0</b>	<b>39.9</b>	<b>19.6</b>	<b>23.8</b>



## **PERSONAL HABITS & MORBIDITY**

**TABLE 7.1 PERSONAL HABITS**

Percentage of persons (age 15 years and above) who use any kind of tobacco, smoking and drinking habits by selected background characteristics, Nagaland, 2012-13.

Background Characteristics	Percentage of persons			No. of persons**
	Percentage who use any kind of tobacco <sup>1</sup>	Percentage who use any kind of smoking	Percentage who Consume alcohol	
<b>Age</b>				
15-24	43.2	11.2	15.5	3481
25-29	63.1	21.5	29.4	2218
30-34	61.6	20.1	27.2	2157
35-39	61.6	22.4	26.7	2160
40-44	56.6	23.6	27.8	1932
45-49	56.2	22.6	25.8	2253
50+	42.5	16.5	18.2	8197
<b>Sex</b>				
Male	67.5	35.1	40.0	11144
Female	34.7	1.4	4.5	11145
<b>Residence</b>				
Rural	52.2	19.2	23.0	16814
Urban	48.3	16.1	20.4	5584
<b>Education</b>				
Non-literate <sup>a</sup>	41.5	15.5	15.7	3913
Less than 5 years	48.3	17.7	19.1	3165
5-9 years	51.4	18.1	21.8	8984
10 or more years	57.7	20.4	28.2	6336
<b>Religion</b>				
Hindu	51.1	18.5	23.1	694
Muslim	57.6	21.6	18.6	246
Christian	50.9	18.2	22.2	21428
Others	55.7	4.6	11.9	28
<b>Castes/tribes</b>				
Scheduled castes	49.3	19.9	19.0	526
Scheduled tribes	51.5	18.3	22.4	21102
Other backward classes	36.4	18.1	12.5	43
Others	44.0	16.1	21.4	727
<b>DLHS-4</b>	51.1	18.3	22.2	22398*

<sup>a</sup> Literate but did not attend the school are also included. <sup>1</sup> Includes smoking. \*Missing cases are excluded. \*\*Unweighted cases.

**TABLE 7.2 PERSONAL HABITS-MEN**

Percentage of Men (age 15 years and above) classified as having personal habits by selected background characteristics, Nagaland, 2012-13.

Background characteristics	Percentage of men			Total number of Men covered**
	Using Smokeless Tobacco	Smoking	Consuming Alcohol	
<b>Age of the men</b>				
15-19	39.9	10.8	14.5	806
20-24	68.3	34.5	41.3	764
25-29	75.4	45.6	57.0	941
30-34	76.3	43.8	54.2	938
35-39	81.3	47.2	53.7	955
40-44	76.7	47.0	51.8	942
45 years and above	58.0	31.3	33.6	5798
<b>Residence</b>				
Rural	65.9	36.3	41.0	8441
Urban	60.3	32.2	37.6	2703
<b>Education</b>				
Non-literate <sup>a</sup>	57.4	36.6	33.7	1620
Less than 5 years	63.6	35.7	36.9	1388
5-9 years	64.2	35.2	39.6	4408
10 or more years	67.4	34.1	44.3	3728
<b>Religion</b>				
Hindu	65.2	34.9	42.6	359
Muslim	70.8	41.2	34.5	130
Christian	64.1	35.0	39.9	10644
Others <sup>#</sup>	--	--	--	9
<b>Castes/tribes</b>				
Scheduled castes	66.7	38.8	34.3	269
Scheduled tribes	64.7	35.4	40.4	10470
Other backward classes	(64.3)	(42.9)	(28.6)	20
Others	54.6	28.5	36.7	385
<b>DLHS-4</b>	64.2	35.1	40.0	11144*

<sup>a</sup> Literate but did not attend the school are also included.\*Missing cases are excluded.–Percentage not shown for less than 10 cases. ( ) based on 10-20 unweighted cases. \*\*Unweighted cases.

**TABLE 7.3 PERSONAL HABITS-WOMEN**

Percentage of Women (age 15 years and above) classified as having personal habits by selected background characteristics, Nagaland, 2012-13.

Background characteristics	Percentage of women			Total number of women covered**
	Using Smokeless Tobacco	Smoking	Consuming Alcohol	
<b>Age of the women</b>				
15-19	19.0	1.2	3.0	852
20-24	45.1	2.4	7.6	1034
25-29	49.7	2.0	7.1	1265
30-34	48.7	1.6	6.1	1206
35-39	42.7	1.5	4.0	1194
40-44	34.2	1.6	5.3	984
45 years and above	24.2	0.9	2.7	4610
<b>Residence</b>				
Rural	34.7	1.5	4.5	8299
Urban	33.9	1.2	4.5	2846
<b>Education</b>				
Non-literate <sup>a</sup>	27.3	1.3	3.6	2273
Less than 5 years	31.3	1.6	3.4	1764
5-9 years	35.5	1.1	4.2	4534
10 or more years	40.7	1.9	6.4	2574
<b>Religion</b>				
Hindu	30.7	0.7	1.9	327
Muslim	39.6	0.0	1.1	112
Christian	34.5	1.5	4.7	10687
Others <sup>#</sup>	(50.0)	(0.0)	(0.0)	19
<b>Castes/tribes</b>				
Scheduled castes	26.9	0.4	3.4	254
Scheduled tribes	35.1	1.4	4.6	10537
Other backward classes	15.8	0.0	0.0	22
Others	27.4	2.1	4.0	332
<b>DLHS-4</b>	<b>34.5</b>	<b>1.4</b>	<b>4.5</b>	<b>11145*</b>

<sup>a</sup> Literate but did not attend the school are also included. \*Missing cases are excluded. ( ) based on 10-20 unweighted cases.\*\*Unweighted cases.

**TABLE 7.4 PERSONAL HABITS**

Percentage of all persons (age 15 years and above) classified as having personal habits by districts, Nagaland, 2012-13.

Districts	Percentage of all persons			Total number of all persons covered**
	Using Smokeless Tobacco	Smoking	Consuming Alcohol	
Mon	48.5	32.4	40.3	2405
Tuensang	61.7	20.1	22.5	2058
Mokokchung	47.7	15.2	11.1	2082
Zunheboto	53.7	16.3	25.4	2228
Wokha	38.9	13.6	18.8	2297
Dimapur	47.0	16.1	21.2	2188
Kohima	41.5	13.1	18.0	1920
Phek	46.9	17.1	27.8	1794
Kiphire	43.4	22.7	22.4	2023
Longleng	57.5	24.6	25.7	1900
Paren	50.9	21.0	27.6	1503
<b>DLHS-4</b>	<b>49.3</b>	<b>18.3</b>	<b>22.2</b>	<b>22398</b>

\*\*Unweighted cases.

**TABLE 7.5 PERSONAL HABITS TOBACCO**

Percentage of men and women age 15 years having habits of chewing Tobacco, Nagaland, 2012-13.

Tobacco use	Tobacco chewing						
	Women			Men			Total
	Rural	Urban	Total	Rural	Urban	Total	
<b>Use of Tobacco</b>							
Pan with tobacco	15.5	20.1	16.9	35.5	31.0	34.2	25.6
Guthaka/Pan masala with tobacco	2.4	1.9	2.2	5.4	9.0	6.4	4.3
Other forms of tobacco	16.8	12.0	15.3	25.0	20.3	23.7	19.5
Non-user	64.3	65.2	64.6	33.6	39.2	35.2	49.9
Not known	1.0	0.8	0.9	0.5	0.6	0.5	0.7
<b>DLHS-4</b>	<b>34.7</b>	<b>33.9</b>	<b>34.5</b>	<b>65.9</b>	<b>60.2</b>	<b>64.2</b>	<b>49.3</b>

**TABLE 7.6 PERSONAL HABITS SMOKE**

Percentage of men and women age 15 years having habits of smoking, Nagaland, 2012-13.

Smoking habits	Smoking						
	Women			Men			Total
	Rural	Urban	Total	Rural	Urban	Total	
Usual smoker*	0.5	0.5	0.5	11.8	9.7	11.2	5.8
Occasional smoker	1.1	0.7	1.0	24.5	22.5	23.9	12.4
Ex-smoker	0.7	0.6	0.7	11.8	12.3	11.9	6.3
Non smoker	96.5	97.0	96.7	51.1	55.1	52.2	74.5
Not known	1.3	1.2	1.2	0.8	0.5	0.7	1.0
<b>DLHS-4</b>	<b>1.5</b>	<b>1.2</b>	<b>1.4</b>	<b>36.3</b>	<b>32.2</b>	<b>35.1</b>	<b>18.3</b>

\* At least once every day



<b>TABLE 7.7 PERSONAL HABITS DRINK ALCOHOL</b>							
Percentage of men and women age 15 years having habits of drinking alcohol, Nagaland, 2012-13.							
Smoking habits	Drinking alcohol						
	Women			Men			Total
	Rural	Urban	Total	Rural	Urban	Total	
Usual drinker*	0.2	0.6	0.3	3.6	5.9	4.3	2.3
Occasional drinker	4.3	3.9	4.2	37.3	31.7	35.7	19.9
Ex-drinker	1.8	1.5	1.7	11.6	12.4	11.8	6.8
Non drinker	92.4	93.0	92.6	46.5	49.7	47.5	70.0
Not known	1.3	1.1	1.2	0.9	0.3	0.8	1.0
<b>DLHS-4</b>	4.5	4.5	4.5	41.0	37.6	40.0	22.2

\* At least once every week

<b>TABLE 7.8 MORBIDITY DETAILS</b>			
Prevalence of any injury, acute illness and chronic illness according to place of residence, Nagaland, 2012-13.			
Morbidity	Total	Residence	
		Rural	Urban
<b>Prevalence Rate of Any Injury<sup>1</sup></b>			
Male	3.6	4.1	2.6
Female	3.1	3.5	2.2
Total	3.4	3.8	2.4
<b>Prevalence Rate of Acute Illness<sup>2</sup></b>			
Male	6.8	6.8	7.0
Female	7.5	7.4	7.5
Total	7.1	7.1	7.2
<b>Prevalence Rate of Chronic Illness<sup>1</sup></b>			
Male	2.2	2.0	2.8
Female	2.2	1.8	3.0
Total	2.2	1.9	2.9

<sup>1</sup> During last one year, <sup>2</sup> During last fifteen days

<b>TABLE 7.9 MORBIDITY DETAILS</b>									
Percentage of household population having any form of disability as on the day of survey, Nagaland, 2012-13.									
Type of Disability	Total			Rural			Urban		
	Male	Female	Total	Male	Female	Total	Male	Female	Total
Mental Disability	0.1	0.1	0.1	0.1	0.1	0.1	0.1	0.1	0.1
Visual Disability	1.1	1.0	1.1	1.2	1.1	1.2	0.9	0.8	0.8
Hearing Disability	1.6	1.1	1.4	1.9	1.4	1.6	0.8	0.6	0.7
Speech Disability	0.1	0.1	0.1	0.2	0.2	0.2	0.1	0.1	0.1
Number of persons**	20212	19065	39277	15033	14032	29065	5179	5033	10212

\*\*Unweighted cases & missing/others cases are excluded.

<b>TABLE 7.10 MORBIDITY DETAILS</b>									
Percentage of household population having any injury and received treatment during last one year, Nagaland, 2012-13.									
Type of treatment	Total			Rural			Urban		
	Male	Female	Total	Male	Female	Total	Male	Female	Total
Treated in intensive care unit for any time	1.7	2.6	2.0	1.2	1.4	1.2	3.1	6.6	4.2
Treated as in-patient with stay <1 week	7.2	3.9	6.1	6.4	2.4	5.1	9.4	8.8	9.2
Treated as in-patient with stay 1-2 week	2.4	1.6	2.1	2.0	1.7	1.9	4.2	1.1	3.2
Treated as in-patient with stay >2 week	4.2	2.1	3.5	4.1	2.1	3.4	4.7	2.2	3.9
Other treatment*	84.5	89.8	86.3	86.3	92.5	88.4	78.6	81.3	79.5
Number of persons**	779	381	1160	613	303	916	166	78	244

\*Out patient /traditional healer/at home. \*\*Unweighted cases & missing/others cases are excluded.

**TABLE 7.11 MORBIDITY DETAILS**

Percentage of household population having acute illness during last 15 days, Nagaland, 2012-13.

Type of acute illness	Total			Rural			Urban		
	Male	Female	Total	Male	Female	Total	Male	Female	Total
Diarrhea/ Dysentery	14.0	12.0	13.0	13.7	12.7	13.2	14.7	10.5	12.5
Acute respiratory tract infection	4.9	4.1	4.5	4.5	3.5	3.9	6.0	5.2	5.6
Jaundice with fever	5.4	4.1	4.7	5.6	4.9	5.2	4.8	2.3	3.5
Malaria	9.5	7.5	8.5	10.8	8.3	9.5	6.5	5.7	6.1
Fever of short duration with rashes	12.6	13.6	13.1	12.6	13.6	13.1	12.5	13.7	13.1
Reproductive tract infection	0.4	0.5	0.5	0.6	0.6	0.6	0.0	0.2	0.1
Other type of fever	34.1	36.4	35.2	32.7	34.3	33.5	37.3	40.8	39.1
Other	19.1	21.9	20.5	19.5	22.1	20.9	18.3	21.6	20.0
Number of persons**	1372	1425	2797	1015	1043	2058	357	382	739

\*\*Unweighted cases &amp; missing/others cases are excluded.

**TABLE 7.12 MORBIDITY DETAILS**

Percentage of household population having acute illness during last 15 days and received treatment by type of health facilities, Nagaland, 2012-13.

Place of treatment	Total			Rural			Urban		
	Male	Female	Total	Male	Female	Total	Male	Female	Total
<b>Government health facility</b>									
Sub Health Centre	5.5	6.4	5.9	7.8	9.2	8.5	0.0	0.0	0.0
Primary health centre	4.1	3.4	3.7	5.6	4.7	5.2	0.2	0.7	0.5
Community Health centre	1.8	1.9	1.9	2.3	2.0	2.2	0.7	1.6	1.2
UHC/UHP/UFWC	0.1	0.0	0.1	0.1	0.0	0.1	0.2	0.0	0.1
Dispensary/ clinic	1.5	1.8	1.7	1.7	2.3	2.0	1.2	0.9	1.1
Hospital	12.4	12.2	12.3	10.9	9.7	10.3	15.9	17.8	16.9
AYUSH hospital/clinic	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
<b>Private health facility</b>									
Dispensary/ clinic	9.9	10.0	9.9	7.3	7.8	7.5	16.1	14.8	15.5
Hospital	13.3	11.6	12.4	10.4	9.1	9.8	20.0	17.1	18.5
AYUSH hospital/clinic	0.1	0.3	0.2	0.1	0.0	0.1	0.2	0.9	0.6
NGO/ trust hospital	0.0	0.1	0.1	0.0	0.1	0.1	0.0	0.2	0.1
Other*	37.1	37.8	37.4	39.1	40.7	39.9	32.8	31.1	31.9
Number of persons**	1360	1415	2775	1008	1035	2043	352	380	732

\* DOT centre and at home. \*\*Unweighted cases &amp; missing/others cases are excluded.

**TABLE 7.13 MORBIDITY DETAILS**

Percentage of household population having main symptoms of chronic illness persisting for more than one month and sought medical care and source of treatment, Nagaland, 2012-13.

Place of treatment	Total			Rural			Urban		
	Male	Female	Total	Male	Female	Total	Male	Female	Total
<b>Prevalence Of Chronic Illness</b>									
Disease of respiratory system	10.8	10.4	10.6	10.4	9.2	9.8	11.9	11.9	11.9
Disease of cardiovascular system	4.0	4.1	4.1	3.9	2.9	3.5	4.2	5.1	4.7
Disease of central nervous system	6.3	6.3	6.3	5.4	6.3	5.8	7.7	6.3	7.0
Disease of musculoskeletal system	7.2	6.3	6.7	6.5	6.7	6.6	8.3	5.7	7.0
Disease of gastrointestinal system	9.9	15.4	12.5	10.0	14.6	12.2	8.9	16.5	12.8
Disease of genitourinary system	3.6	4.6	4.1	2.2	2.9	2.5	5.4	6.8	6.1
Skin disease	5.4	3.9	4.6	5.7	5.4	5.6	5.4	1.1	3.2
Goitre	0.7	1.2	0.9	0.7	1.3	1.0	0.6	1.7	1.2
Elephantiasis	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Eye problem	8.5	7.2	7.9	9.3	10.0	9.7	7.7	3.4	5.5
ENT problem	3.8	2.7	3.3	2.5	2.1	2.3	5.4	3.4	4.4
Mouth and dental problem	5.6	5.1	5.3	7.2	7.1	7.1	3.6	2.8	3.2
Other	34.3	33.0	33.7	36.2	31.4	34.0	31.0	35.2	33.1
<b>Sought Medical Care</b>									
Details of Diagnosis/Treatment available	45.5	57.1	51.2	38.8	52.9	45.3	56.3	62.4	59.6
Details of Diagnosis/Treatment not available	21.2	15.2	18.2	21.0	11.8	16.7	21.5	19.1	20.2
Not at all	33.3	27.7	30.6	40.2	35.3	37.9	22.2	18.5	20.2
<b>Source of Treatment</b>									
At government health facility	33.9	33.5	33.7	33.7	50.5	42.0	32.9	15.6	23.8
At private health facility	65.0	63.2	64.1	64.3	45.3	54.9	67.1	82.2	75.0
At home	1.1	1.6	1.4	2.0	3.2	2.6	0.0	0.0	0.0
Other	0.0	1.6	0.8	0.0	1.1	0.5	0.0	2.2	1.2

**TABLE 7.14 MORBIDITY DETAILS**

Percentage of household population diagnosed with chronic illness during last one year, Nagaland, 2012-13.

Diagnosed chronic illness	Total			Rural			Urban		
	Male	Female	Total	Male	Female	Total	Male	Female	Total
Diabetes	4.8	5.1	4.9	3.4	1.8	2.6	7.0	9.5	8.3
Hypertension	4.0	3.5	3.8	2.3	3.5	2.8	7.6	3.6	5.5
Disease related to heart*	5.0	3.0	4.0	5.3	3.9	4.7	4.5	1.2	2.8
Epilepsy	0.7	1.5	1.1	1.1	1.8	1.4	0.0	1.2	0.6
Asthma/chronic respiratory failure	4.3	5.1	4.7	5.3	6.1	5.7	2.5	4.2	3.4
Goitre/ thyroid disorder	1.2	1.5	1.3	1.5	1.8	1.6	0.6	1.8	1.2
Tuberculosis	4.5	2.3	3.4	3.4	1.8	2.6	5.7	3.0	4.3
Leprosy	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0

\* Chronic heart diseases, Myocardial infection/heart attack, stroke cerebro vascular accident.

**TABLE 7.15 MORBIDITY DETAILS**

Percentage of household population aged 60 years and above diagnosed with chronic illness during last one year, Nagaland, 2012-13.

Diagnosed chronic illness	Total			Rural			Urban		
	Male	Female	Total	Male	Female	Total	Male	Female	Total
Diabetes	5.1	8.8	6.6	2.6	3.8	3.1	11.9	20.6	15.8
Hypertension	5.1	4.4	4.8	3.4	5.1	4.1	11.9	2.9	7.9
Disease related to heart*	5.1	6.2	5.5	6.0	6.3	6.1	2.4	5.9	3.9
Asthma/chronic respiratory failure	7.6	5.3	6.6	8.5	6.3	7.7	4.8	2.9	3.9
Goitre/ thyroid disorder	1.9	1.8	1.8	1.7	2.5	2.0	2.4	0.0	1.3
Tuberculosis	4.4	0.9	3.0	3.4	0.0	2.0	9.5	2.9	6.6
Leprosy	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Cataract	0.6	0.0	0.4	0.0	0.0	0.0	2.4	0.0	1.3
Stroke	1.3	0.9	1.1	1.7	1.3	1.6	0.0	0.0	0.0

\* Chronic heart diseases, Myocardial infection/heart attack, stroke cerebro vascular accident.

**TABLE 7.16 TUBERCULOSIS**

Number of persons who have tuberculosis by background characteristics, Nagaland, 2012-13.

Background characteristics	Number of persons suffering from tuberculosis			Number of persons**
	Rural	Urban	Total	
<b>Age</b>				
15-19		00	01	3343
20-34		01	04	9472
35-44		05	01	5033
45-59		04	02	7467
60 and above		04	04	5099
<b>Education</b>				
Non-literate <sup>a</sup>		06	03	8433
Less than 5 years		01	00	6792
5-9 years		03	05	14148
10 or more years		04	04	9925
<b>Religion</b>				
Hindu		00	01	1219
Muslim		00	00	551
Christian		14	11	37431
Others		00	00	64
<b>Castes/tribes</b>				
Scheduled castes		00	01	1041
Scheduled tribes		14	09	36829
Other backward classes		00	00	69
Others		00	02	1359
<b>DLHS-4</b>		14	12	39298

<sup>a</sup> Literate but did not attend the school are also included. \*\*Unweighted cases.

## **HEALTH & NUTRITIONAL STATUS**



**TABLE 8.1 NUTRITIONAL STATUS OF CHILDREN**

Percentage of children under age five years classified as malnourished according to three anthropometric indices of nutritional status: height-for-age, weight-for-height, and weight-for-age, by background characteristics, Nagaland, 2012-13.

Background Characteristics	Height for Age				Weight for Height				Weight for Age				Number of eligible children**
	Below -3SD	Below -2SD	Above +2SD*	Mean Z-score (SD)	Below -3SD	Below -2SD	Above +2SD*	Mean Z-score (SD)	Below -3SD	below -2SD	Above +2SD*	Mean Z-score (SD)	
<b>Age group (month)</b>													
0-6	3.9	3.9	96.1	24.7	15.6	25.0	75.0	10.9	2.6	12.8	87.2	11.8	171
7-12	2.4	9.8	90.2	25.5	.0	24.0	76.0	1.8	.0	4.3	95.7	22.6	213
13-18	14.5	36.1	63.9	5.2	3.0	6.1	93.9	4.9	8.7	20.3	79.7	1.8	197
19-24	47.3	64.9	35.1	9.2	6.8	11.9	88.1	3.6	13.6	39.4	60.6	7.4	159
25-35	26.3	48.5	51.5	8.4	6.2	11.8	88.2	3.1	9.2	30.5	69.5	5.0	416
36 and above	19.1	41.7	58.3	10.1	4.7	8.3	91.7	2.7	7.3	26.8	73.2	3.7	932
<b>Sex of child</b>													
Male	17.8	35.6	64.4	10.2	4.6	10.8	89.2	3.7	5.1	23.2	76.8	5.6	1024
Female	22.3	43.8	56.2	12.3	5.7	10.9	89.1	2.9	9.9	27.8	72.2	6.4	1064
<b>Place of residence</b>													
Rural	21.0	41.8	58.2	10.7	5.1	9.9	90.1	3.1	8.2	26.2	73.8	5.9	1595
Urban	16.7	32.4	67.6	13.3	5.4	14.3	85.7	4.2	4.7	23.0	77.0	6.3	493
<b>Religion</b>													
Hindu	15.2	32.6	67.4	8.0	13.5	24.3	75.7	4.5	7.9	31.6	68.4	1.7	95
Muslim	24.1	48.3	51.7	8.2	4.3	8.7	91.3	6.2	20.0	40.0	60.0	1.6	64
Christian	20.2	39.8	60.2	11.6	4.7	10.2	89.8	3.2	7.1	24.8	75.2	6.3	1926
Others	--	--	--	--	--	--	--	--	--	--	--	--	3
<b>Castes/Tribes</b>													
Scheduled castes	11.6	27.9	72.1	10.7	7.9	18.4	81.6	6.9	15.4	38.5	61.5	4.1	96
Scheduled tribes	20.4	40.1	59.9	11.4	4.7	10.0	90.0	2.9	7.0	24.7	75.3	6.2	1910
Other backward classes	--	--	--	--	--	--	--	--	--	--	--	--	9
Others	22.2	47.2	52.8	9.6	15.4	23.1	76.9	9.3	7.4	33.3	66.7	1.7	73
<b>Nagaland</b>	20.1	39.8	60.2	11.3	5.2	10.8	89.2	3.3	7.5	25.5	74.5	6.0	2,088

Note: reference period: January 1<sup>st</sup>, 2008 to survey date. \* +2SD includes Don't know. -- Percentage not shown for less than 10 cases.\*\* unweighted cases.

**TABLE 8.2 NUTRITIONAL STATUS OF CHILDREN BY DISTRICTS**

Percentage of children under age five years classified as malnourished according to three anthropometric indices of nutritional status: height-for-age, weight-for-height, and weight-for-age, by districts, Nagaland 2012-13.

Districts	Height for Age				Weight for Height				Weight for Age				Number of eligible children**
	below -3SD	below -2SD	above +2SD*	Mean Z-score (SD)	below -3SD	below -2SD	Above +2SD*	Mean Z-score (SD)	Below -3SD	Below -2SD	Percentage above +2SD*	Mean Z-score (SD)	
Mon	22.4	40.3	59.7	14.6	26.8	34.1	65.9	6.5	17.0	36.2	63.8	3.7	211
Tuensang	25.9	49.7	50.3	7.5	2.5	6.0	94.0	2.7	8.7	26.0	74.0	4.6	446
Mokokchung	12.7	26.9	73.1	11.1	0.9	2.8	97.2	2.9	0.8	10.8	89.2	8.3	228
Zunheboto	20.0	30.0	70.0	11.4	14.3	14.3	85.7	2.0	12.5	25.0	75.0	13.8	43
Wokha	23.7	45.3	54.7	10.6	4.6	13.0	87.0	2.8	6.0	32.5	67.5	1.7	220
Dimapur	12.6	30.0	70.0	9.3	6.4	17.9	82.1	4.3	8.7	27.2	72.8	4.0	400
Kohima	27.5	42.5	57.5	13.7	6.9	10.3	89.7	1.9	6.1	24.2	75.8	10.5	181
Phek	3.7	14.8	85.2	37.5	0.0	7.7	92.3	1.9	3.3	10.0	90.0	27.6	64
Kiphire	28.6	50.0	50.0	1.5	0.0	0.0	100.0	2.0	0.0	30.0	70.0	11.3	56
Longleng	15.4	42.3	57.7	9.0	20.0	20.0	80.0	1.8	20.0	46.7	53.3	1.5	81
Paran	17.4	34.8	65.2	51.8	0.0	0.0	100.0	14.0	5.9	35.3	64.7	18.8	158
<b>Nagaland</b>	20.1	39.8	60.2	11.3	5.2	10.8	89.2	3.3	7.5	25.5	74.5	6.0	2,088

Note: reference period: January 1<sup>st</sup>, 2008 to survey date. \* +2SD includes Don't know. \*\* unweighted cases



**TABLE 8.3 BMI (BODY MASS INDEX) OF WOMEN**

Percentage of women age 15-49 average body mass index (BMI), and percentage with specific BMI levels, by background characteristics, Nagaland, 2012-13.

Background characteristics	Mean Height	Mean BMI	Body Mass Index (BMI) in kg/m <sup>2</sup>							Total number of Women**
			18.5-24.9 (normal)	Thin		Overweight/Obese				
				<18.5 (total thin)	17.0-18.4 (mildly thin)	<17.0 (moderately/severely thin)	≥25.0 (overweight or obese)	25.0-29.9 (overweight)	≥30.0 (obese)	
<b>Age</b>										
15-19	150.3	20.0	69.5	28.0	17.4	9.0	2.6	1.2	1.4	506
20-29	152.9	21.8	77.1	16.2	10.2	5.8	6.8	5.5	1.3	1357
30-39	153.6	22.2	76.5	10.9	7.3	3.4	12.6	10.3	2.1	1501
40-49	153.2	24.1	77.0	7.4	5.9	1.3	15.5	11.9	3.6	1315
<b>Place of residence</b>										
Rural	152.8	22.4	78.3	13.4	9.0	4.1	8.3	6.2	2.0	3320
Urban	153.2	22.3	71.7	13.3	8.5	4.1	15.0	12.5	2.6	1359
<b>Education</b>										
Non-literate <sup>a</sup>	152.4	21.7	78.5	13.4	9.0	4.4	8.0	6.6	1.4	520
Less than 5 years	152.8	23.3	81.5	10.4	6.4	3.8	8.1	6.1	1.9	546
5-9 years	152.7	22.1	76.3	13.3	8.8	3.8	10.3	8.3	1.9	2166
10 or more years	153.5	22.6	72.9	14.4	9.7	4.5	12.8	9.8	3.0	1447
<b>Religion</b>										
Hindu	152.4	24.2	64.5	16.5	7.0	9.0	19.1	15.0	4.1	201
Muslim	150.5	21.9	60.0	22.0	11.9	10.1	18.0	16.9	1.1	70
Christian	153.0	22.3	77.1	13.0	8.9	3.8	9.9	7.8	2.1	4398
Others	(152.8)	(23.8)	(29.1)	(16.9)	(16.9)	(0.0)	(54.0)	(41.2)	(12.8)	10
<b>Castes/Tribes</b>										
Scheduled castes	151.4	25.1	65.2	13.1	5.8	7.3	21.7	19.3	2.4	157
Scheduled tribes	153.0	22.3	76.9	13.1	8.9	3.8	10.1	7.9	2.2	4361
Other backward classes	--	--	--	--	--	--	--	--	--	2
Others	151.9	21.5	67.2	20.2	10.7	8.9	12.6	10.0	2.5	159
<b>Nagaland</b>	152.9	22.4	76.0	13.3	8.9	4.1	10.6	8.4	2.2	4,679

Note: reference period: January 1<sup>st</sup>, 2008 to survey date. <sup>a</sup> Literate but did not attend school, are also included. -- Percentage not shown for less than 10 cases. () Based on 10-20 unweighted cases. \*\* unweighted cases.

**TABLE 8.4 BMI (BODY MASS INDEX) OF WOMEN**

Percentage of women age 15-49 average body mass index (BMI), and percentage with specific BMI levels, by district, Nagaland, 2012-13.

District	Mean Height	Mean BMI	18.5-24.9 (normal)	Body Mass Index (BMI) in kg/m <sup>2</sup>						Total number of Women**
				Thin			Overweight/Obese			
				<18.5 (total thin)	17.0-18.4 (mildly thin)	<17.0 (moderately/severely thin)	≥25.0 (overweight or obese)	25.0-29.9 (overweight)	≥30.0 (obese)	
Mon	149.8	23.6	88.6	7.4	4.7	2.7	4.0	2.4	1.5	494
Tuensang	151.3	21.9	81.3	11.6	8.4	2.9	7.1	6.0	1.1	603
Mokokchung	153.1	21.5	65.9	22.1	14.6	6.9	12.0	9.3	2.5	484
Zunheboto	154.4	21.6	85.1	7.8	5.3	2.3	7.0	5.5	1.5	533
Wokha	151.3	22.8	77.4	12.9	9.0	3.7	9.7	7.7	2.0	530
Dimapur	152.2	24.6	64.1	14.8	8.2	5.7	21.1	15.8	5.3	648
Kohima	154.5	21.8	72.3	13.4	10.1	2.9	14.3	12.2	1.9	493
Phek	155.4	22.2	75.3	12.4	9.8	2.1	12.3	9.1	3.2	288
Kiphire	157.4	20.0	77.7	21.9	9.1	12.3	0.5	0.5	0.0	217
Longleng	155.1	21.6	78.5	17.0	13.4	3.6	4.5	3.2	1.4	302
Paran	154.2	22.1	78.4	5.7	3.5	2.2	15.9	15.9	0.0	87
<b>Nagaland</b>	152.9	22.4	76.0	13.3	8.9	4.1	10.6	8.4	2.2	4,679

\*\* unweighted cases

<b>TABLE 8.5 PREVELANCE OF ANEMIA AMONG CHILDREN</b>					
Percentage of children age ( 6-59 months) classified as having iron-deficiency (anaemia) by selected background characteristics, Nagaland, 2012-13.					
<b>Background characteristics</b>	<b>Anaemia status by haemoglobin level</b>				<b>Total number of children &lt;5 years**</b>
	<b>Mild anemia (10.0-10.9 g/dl)</b>	<b>Moderate anemia (7.0-9-9 g/dl)</b>	<b>Severe anemia (&lt; 7g/dl)</b>	<b>Any anemia &lt;11.0 g/dl</b>	
<b>Sex of Child</b>					
Male	20.8	36.4	3.4	60.6	403
Female	21.0	37.1	4.0	62.0	394
<b>Place of residence</b>					
Rural	21.9	35.8	3.6	61.4	654
Urban	17.2	39.9	3.7	60.8	143
<b>Religion</b>					
Hindu	14.6	57.2	10.2	81.9	29
Muslim	11.8	73.3	0.0	85.1	19
Christian	21.3	34.8	3.5	59.6	748
Others#	--	--	--	--	1
<b>Castes/tribes</b>					
Scheduled castes	12.8	57.9	7.7	78.5	38
Scheduled tribes	21.6	34.1	3.5	59.3	742
Other backward classes	--	--	--	--	--
Others	(11.0)	(89.0)	(0.0)	(100.0)	17
<b>Nagaland</b>	20.9	36.7	3.7	61.3	797

Note: reference period: January 1<sup>st</sup>, 2008 to survey date. -- Percentage not shown for less than 10 cases. ( ) Based on 10-20 unweighted cases. \*\* Unweighted cases

<b>TABLE 8.6 ANAEMIA AMONG SCHOOL GOING/ADOLESCENT POPULATION</b>					
Percentage of school going population (age 6-19 years) classified as having iron-deficiency (anaemia) by degree of anaemia and by selected background characteristics, Nagaland, 2012-13.					
<b>Background characteristics</b>	<b>Anaemia status by haemoglobin level</b>				<b>Total number of school going population (age 6-19 years)**</b>
	<b>Mild anaemia (10.0-10.9 g/dl)</b>	<b>Moderate anaemia (7.0-9.9 g/dl)</b>	<b>Severe anemia (&lt; 7g/dl)</b>	<b>Any anaemia &lt;11.0 g/dl</b>	
<b>Age</b>					
6 yrs - 10 yrs	22.9	26.1	3.2	52.2	1293
11 yrs - 14 yrs	20.9	23.1	2.9	46.9	1077
15yrs – 16 yrs	16.9	22.8	3.2	42.9	512
17yrs – 19 yrs	14.9	25.6	3.0	43.6	767
<b>Sex</b>					
Male	18.1	22.3	2.6	43.0	1816
Female	21.3	27.0	3.6	51.9	1833
<b>Residence</b>					
Rural	20.5	24.5	2.9	47.9	2586
Urban	18.2	25.0	3.4	46.7	1063
<b>Education</b>					
Non-literate <sup>a</sup>	25.0	29.0	3.2	57.1	362
Less than 5 years	22.0	26.7	1.9	50.7	1238
5-9 years	18.3	22.5	3.4	44.2	1541
10 or more years	15.1	23.3	4.7	43.1	508
<b>Religion</b>					
Hindu	18.3	44.4	4.4	67.1	136
Muslim	22.0	43.6	1.2	66.9	81
Christian	19.7	23.2	3.1	46.0	3425
Others	--	--	--	--	7
<b>Castes/tribes</b>					
Scheduled castes	21.0	50.4	2.3	73.7	145
Scheduled tribes	19.8	23.3	3.1	46.1	3392
Other backward classes	--	--	--	--	--
Others	15.9	30.0	4.4	50.3	111
<b>Nagaland</b>					
	19.7	24.6	3.1	47.5	3,649

<sup>a</sup> Literate but did not attend school, are also included. -- Percentage not shown for less than 10 cases.

\*\*un weighted cases

<b>TABLE 8.7 ANAEMIA AMONG POPULATION AGED 20 YEARS AND ABOVE</b>												
Percentage of population (age 20 years and above) classified as having iron-deficiency (anaemia) by degree of anaemia and selected background characteristics, Nagaland, 2012-13.												
Background characteristics	Male				Female				Total			
	Mild anemia (10.0-10.9 g/dl)	Moderate anemia (7.0-9.9 g/dl)	Severe anemia (< 7g/dl)	Any anemia (<11.0 g/dl)	Mild anemia (10.0-10.9 g/dl)	Moderate anemia (7.0-9.9 g/dl)	Severe anemia (< 7g/dl)	Any anaemia <11.0 g/dl	Mild anemia (10.0-10.9 g/dl)	Moderate anemia (7.0-9.9 g/dl)	Severe anemia (< 7g/dl)	Any anemia <11.0 g/dl
<b>Age</b>												
20yrs - 29 yrs	13.8	17.3	3.5	34.6	17.1	28.2	4.3	49.6	15.7	23.5	3.9	43.1
30 yrs - 39 yrs	13.9	17.1	3.9	34.8	18.1	27.4	6.0	51.5	16.2	22.8	5.1	44.1
40 yrs – 49 yrs	13.3	19.2	5.2	37.7	17.3	26.2	5.3	48.9	15.4	22.9	5.3	43.5
50 yrs and above	13.6	22.1	6.0	41.7	17.4	27.5	6.6	51.4	15.2	24.4	6.2	45.8
<b>Residence</b>												
Rural	13.2	19.4	4.9	37.5	17.9	27.1	5.5	50.6	15.5	23.2	5.2	43.9
Urban	14.8	20.8	5.4	40.9	16.4	27.9	6.0	50.3	15.6	24.5	5.7	45.8
<b>Education</b>												
Non-literate <sup>a</sup>	15.4	22.8	5.0	43.2	18.7	29.8	4.6	53.1	17.3	26.8	4.7	48.9
Less than 5 years	13.5	23.0	5.9	42.3	18.1	27.0	6.8	51.9	16.0	25.2	.4	47.6
5-9 years	13.9	19.0	5.1	38.1	16.6	26.3	6.6	49.5	15.3	22.7	5.9	43.8
10 or more years	12.5	18.1	4.6	35.1	17.3	27.0	4.3	48.7	14.5	21.8	4.5	40.7
<b>Religion</b>												
Hindu	19.7	27.0	3.9	50.7	15.5	43.5	5.7	64.7	17.7	35.0	4.8	57.5
Muslim	14.6	23.4	4.3	42.4	23.2	47.1	6.1	76.3	18.5	34.2	5.1	57.8
Christian	13.3	19.4	5.1	37.8	17.5	26.5	5.6	49.6	15.4	22.9	5.4	43.7
Others	25.9	13.7	0.0	39.6	25.2	30.7	6.8	62.7	25.4	24.9	4.5	54.9
<b>Castes/tribes</b>												
Scheduled castes	16.7	27.6	6.5	50.8	14.3	44.2	5.8	64.2	15.5	35.7	6.2	57.3
Scheduled tribes	13.4	19.4	5.1	37.8	17.5	26.5	5.6	49.6	15.4	22.9	5.4	43.7
Other backward classes	35.6	0.0	17.2	52.8	15.7	19.6	0.0	35.3	26.3	9.2	9.2	44.6
Others	18.7	23.7	1.2	43.6	18.5	41.3	6.8	66.6	18.6	32.0	3.9	54.5
<b>Nagaland</b>	13.6	19.8	5.0	38.4	17.5	27.4	5.7	50.5	15.5	23.6	5.3	44.4

<sup>a</sup> Literate but did not attend school, are also included.

**TABLE 8.8 ANAEMIA AMONG POPULATION CHILDREN, ADOLESCENTS AGED 20 YEARS AND ABOVE**

Percentage of children aged 6-59 months, adolescents aged 6-19 year and population aged 20 years and above having any and severe anaemia by districts, Nagaland, 2012-13.

District	Children		Adolescents		Aged 20 years and above	
	Any anemia <11.0 g/dl	Severe anemia (< 7g/dl)	Any anemia <11.0 g/dl)	Severe anemia (< 7g/dl)	Any anemia <11.0 g/dl	Severe anemia (< 7g/dl)
Mon	70.9	6.1	54.9	1.9	44.4	1.7
Tuensang	56.4	2.4	37.0	0.6	35.4	1.7
Mokokchung	71.2	3.7	44.6	3.9	44.6	5.3
Zunheboto	55.1	7.8	41.9	6.4	41.5	5.3
Wokha	39.7	1.0	36.8	2.2	39.5	2.5
Dimapur	83.3	9.2	71.3	3.3	61.4	2.9
Kohima	35.7	0.0	32.9	3.0	42.3	6.1
Phek	61.7	0.0	51.1	8.0	47.8	14.6
Kiphire	na	na	63.2	13.2	62.0	15.5
Longleng	33.4	0.0	36.6	1.4	32.7	1.6
Paran	66.8	0.0	61.7	10.8	46.8	20.2
<b>Nagaland</b>	61.3	3.7	47.5	3.0	44.4	5.3

**TABLE 8.9 ANAEMIA AMONG PREGNANT WOMEN**

Percentage of pregnant women (age 15-49 years) classified as having iron-deficiency (anaemia) by degree of anaemia and by selected background characteristics and residence, Nagaland, 2012-13.

Background characteristics	Anaemia status by haemoglobin level				Total number of Pregnant Women**
	Mild anemia (10.0-10.9 g/dl)	Moderate anemia (7.0-9.9 g/dl)	Severe anemia (< 7g/dl)	Any anemia <11.0 g/dl	
<b>Age group (years)</b>					
15-19	4.8	70.8	4.3	79.9	19
20-29	17.3	28.7	5.2	51.1	255
30-39	21.0	25.8	10.4	57.2	109
40-49	14.3	37.6	3.9	55.8	21
<b>Residence</b>					
Rural	18.1	26.3	7.4	51.9	294
Urban	16.4	38.8	4.6	59.7	110
<b>Woman's Education</b>					
Non-literate <sup>a</sup>	19.9	35.3	5.0	60.1	44
Less than 5 years	13.5	27.6	14.1	55.2	47
5-9 years	18.6	31.0	6.9	56.5	180
10 or more years	16.8	28.9	3.9	49.6	133
<b>Religion</b>					
Hindu	17.3	56.2	0.0	73.5	29
Muslim	--	--	--	--	9
Christian	17.5	26.6	7.0	51.1	365
Others	--	--	--	--	1
<b>Castes/tribes</b>					
Scheduled castes	11.3	74.6	0.0	85.9	18
Scheduled tribes	17.6	26.5	6.7	50.8	363
Other backward classes	na	na	na	na	0
Others	22.0	47.6	9.3	78.9	23
<b>Nagaland</b>	17.6	30.3	6.5	54.4	404

<sup>a</sup> Literate but did not attend school, are also included. --percentage not shown for less than 10 cases.  
na= Not applicable .\*\* Unweighted cases.

<b>TABLE 8.10 PREVALENCE OF DIABETES</b>				
Percentage of men (age 18 years and above) classified as having sugar by selected background characteristics and residence, Nagaland, 2012-13.				
<b>Background characteristics</b>	Any type of blood sugar level			Total number of men Tested**
	Below (<140)	Mild (140-160)	Moderate/High (>160)	
<b>Age group</b>				
18 - 29	95.3	2.5	2.2	1959
30 - 39	91.4	5.8	2.8	1841
40 - 49	87.3	8.2	4.5	1965
50 - 59	84.1	9.4	6.6	2019
60 +	81.0	10.3	8.7	2635
<b>Residence</b>				
Rural	87.2	7.4	5.4	7951
Urban	87.8	7.4	4.8	2468
<b>Education</b>				
Non-literate <sup>a</sup>	83.6	9.1	7.3	1566
Less than 5 years	86.3	8.2	5.5	1339
5-9 years	87.1	7.9	5.0	4041
10 or more years	89.6	5.9	4.4	3473
<b>Religion</b>				
Hindu	88.3	5.4	6.3	331
Muslim	88.1	5.8	6.1	109
Christian	87.3	7.5	5.2	9969
Others	(89.4)	(10.6)	(0.0)	10
<b>Castes/tribes</b>				
Scheduled castes	89.6	5.3	5.1	246
Scheduled tribes	87.4	7.4	5.2	9810
Other backward classes	(86.9)	(0.0)	(13.1)	16
Others	87.2	12.8	0.0	26
<b>Nagaland</b>	87.4	7.4	5.2	10,419

<sup>a</sup> Literate but did not attend school, are also included. ( ) based on 10-20 unweighted cases \*\* Unweighted cases.



<b>TABLE 8.11 PREVALENCE OF DIABETES</b>				
Percentage of men aged 18 years and above classified with level of any type of blood sugar by districts, Nagaland, 2012-13.				
<b>Districts</b>	Any type of blood sugar level			Total number of men Tested**
	Below (<140)	Mild (140-160)	Moderate/High (>160)	
Mon	91.6	5.0	3.4	1178
Tuensang	96.0	3.1	0.8	974
Mokokchung	86.3	5.9	7.8	856
Zunheboto	84.4	9.5	6.1	1050
Wokha	83.7	10.3	6.0	1016
Dimapur	89.2	5.0	5.8	901
Kohima	86.0	7.4	6.6	880
Phek	82.2	10.3	7.5	876
Kiphire	88.0	8.0	4.0	1026
Longleng	86.4	8.9	4.7	945
Paren	84.9	8.8	6.3	717
<b>Nagaland</b>	87.4	7.4	5.2	10,419

\*\* Unweighted cases.

<b>TABLE 8.12 PREVALENCE OF DIABETES</b>				
Percentage of Women (age 18 years and above) classified as having Sugar by selected background characteristics and residence, Nagaland, 2012-13.				
<b>Background characteristics</b>	Any type of blood sugar level			Total number of women Tested**
	Below (< 140)	Mild (140-160)	Moderate/High (>160)	
<b>Age group</b>				
18 - 29	96.3	2.7	1.0	2533
30 - 39	92.5	5.0	2.5	2341
40 - 49	88.8	7.1	4.2	2125
50 - 59	83.8	9.5	6.7	1778
60 +	79.1	11.2	9.7	1578
<b>Residence</b>				
Rural	89.7	6.1	4.1	7753
Urban	87.9	7.5	4.6	2602
<b>Education</b>				
Non-literate <sup>a</sup>	85.2	8.6	6.2	2202
Less than 5 years	86.9	7.3	5.8	1710
5-9 years	90.1	6.3	3.6	4094
10 or more years	92.7	4.6	2.7	2349
<b>Religion</b>				
Hindu	88.7	5.4	5.8	289
Muslim	93.5	5.3	1.2	96
Christian	89.2	6.6	4.2	9952
Others	(77.3)	(10.6)	(12.0)	18
<b>Castes/tribes</b>				
Scheduled castes	90.8	5.2	4.0	226
Scheduled tribes	89.2	6.5	4.2	9809
Other backward classes	(100.0)	(0.0)	(0.0)	19
Others	(87.0)	(13.0)	(0.0)	15
<b>Nagaland</b>	89.2	6.5	4.3	10,355

<sup>a</sup> Literate but did not attend school, are also included. ( ) based on 10-20 unweighted cases \*\* Unweighted cases.

<b>TABLE 8.13 PREVALENCE OF DIABETES</b>				
Percentage of women aged 18 years and above classified with level of any type of blood Sugar by districts, Nagaland, 2012-13.				
<b>Districts</b>	Any type of blood sugar level			Total number of women Tested**
	Below (<140)	Mild (140-160)	Moderate/High (>160)	
Mon	92.7	5.0	2.3	1092
Tuensang	96.9	1.7	1.4	888
Mokokchung	85.7	8.3	6.0	1004
Zunheboto	87.2	7.9	4.9	1060
Wokha	86.0	7.7	6.3	1119
Dimapur	89.2	5.6	5.2	983
Kohima	90.5	5.6	3.9	942
Phek	87.1	7.5	5.4	826
Kiphire	91.1	6.9	2.0	920
Longleng	90.2	7.0	2.8	846
Paren	84.8	8.2	6.9	675
<b>Nagaland</b>	89.2	6.5	4.3	10,355

\*\* Unweighted cases

**TABLE 8.14 BLOOD PRESSURE**

Percentage of men (age 18 years and above) classified as having Blood Pressure by selected background characteristics, Nagaland, 2012-13.

Background characteristics	Status of Blood Pressure						Number of men blood pressure measured**	Number of men Covered**
	1	2	3	4	5	6		
<b>Age group</b>								
18 - 29	69.0	14.3	12.5	3.2	0.7	0.3	2014	2031
30 - 39	52.9	17.4	21.0	5.3	1.9	1.5	1882	1893
40 - 49	42.6	17.1	28.0	6.9	3.2	2.2	1997	2004
50 - 59	36.2	14.4	30.5	10.2	5.4	3.3	2046	2052
60 +	31.7	11.3	27.4	14.5	8.7	6.4	2679	2684
<b>Residence</b>								
Rural	45.4	14.7	24.1	8.6	4.1	3.0	8101	8129
Urban	46.8	14.6	23.6	7.8	4.4	2.9	2517	2535
<b>Education</b>								
Non-literate <sup>a</sup>	42.4	13.8	23.9	9.5	6.5	3.9	1601	1612
Less than 5 years	38.3	15.9	25.2	10.5	6.1	4.0	1359	1362
5-9 years	45.0	14.4	25.7	8.0	4.0	2.8	4112	4123
10 or more years	50.9	14.9	21.6	7.6	2.7	2.3	3546	3567
<b>Religion</b>								
Hindu	51.5	19.0	17.9	7.0	3.6	0.9	338	340
Muslim	61.7	11.9	18.9	2.4	3.3	1.8	114	116
Christian	45.3	14.5	24.3	8.5	4.3	3.1	10156	10197
Others	(37.8)	(20.0)	(42.2)	(0.0)	(0.0)	(0.0)	10	11
<b>Castes/tribes</b>								
Scheduled castes	54.0	16.2	17.6	5.5	4.3	2.4	250	251
Scheduled tribes	45.1	14.6	24.4	8.6	4.3	3.0	9996	10036
Other backward classes	(65.7)	(6.2)	(21.4)	(0.0)	(0.0)	(6.8)	18	18
Others	50.6	12.6	32.5	4.3	0.0	0.0	28	29
<b>Nagaland</b>	45.8	14.7	24.0	8.4	4.2	3.0	10,618	10,664

<sup>a</sup> Literate but did not attend school, are also included. ( ) based on 10-20 unweighted cases. \*\* unweighted cases

Average Systolic	Average Diastolic					
	≤84	85-89	90-99	100-109	110-119	≥120
≤ 129	1	2	3	4	5	6
130-139	2	2	3	4	5	6
140-159	3	3	3	4	5	6
160-179	4	4	4	4	5	6
180-209	5	5	5	5	5	6
≥ 210	6	6	6	6	6	6

**TABLE 8.15 BLOOD PRESSURE**

Percentage of men (age 18 years and above) classified as having Blood Pressure by districts, Nagaland, 2012-13.

Districts	Status of Blood Pressure						Number of men blood pressure measured**	Number of men aged 18 years & above**
	1	2	3	4	5	6		
Mon	53.6	15.4	20.4	6.5	2.3	1.8	1181	1183
Tuensang	62.4	9.0	17.9	6.3	2.7	1.7	993	1002
Mokokchung	48.1	12.7	20.6	9.7	3.6	5.3	918	925
Zunheboto	40.2	14.1	31.0	8.4	4.8	1.4	1060	1062
Wokha	40.4	16.6	26.8	8.5	4.2	3.4	1031	1032
Dimapur	59.9	15.6	14.7	5.1	2.4	2.4	937	948
Kohima	42.0	11.6	23.5	11.5	6.8	4.6	890	892
Phek	31.8	14.8	30.8	11.8	7.8	3.0	884	892
Kiphire	40.3	19.1	27.1	7.1	2.4	4.0	1034	1034
Longleng	43.3	15.2	26.4	8.7	4.5	1.9	960	961
Paran	34.1	17.1	26.5	11.3	6.9	4.1	730	733
<b>Nagaland</b>	<b>45.8</b>	<b>14.7</b>	<b>24.0</b>	<b>8.4</b>	<b>4.2</b>	<b>3.0</b>	<b>10,618</b>	<b>10,664</b>

\*\* unweighted cases

Average Systolic	Average Diastolic					
	≤84	85-89	90-99	100-109	110-119	≥120
≤ 129	1	2	3	4	5	6
130-139	2	2	3	4	5	6
140-159	3	3	3	4	5	6
160-179	4	4	4	4	5	6
180-209	5	5	5	5	5	6
≥ 210	6	6	6	6	6	6

**TABLE 8.16 BLOOD PRESSURE**

Percentage of women (age 18 years and above) classified as having Blood Pressure by selected background characteristics, Nagaland, 2012-13.

Background characteristics	Status of Blood Pressure						Number of women blood pressure measured**	Number of women aged 18 year & above**
	1	2	3	4	5	6		
<b>Age group</b>								
18 - 29	77.5	9.3	10.3	1.5	0.6	0.8	2620	2628
30 - 39	63.2	12.8	17.7	3.9	1.4	1.0	2391	2400
40 - 49	49.6	14.4	23.6	6.6	3.3	2.4	2162	2167
50 - 59	40.6	14.0	26.4	10.2	5.0	3.7	1804	1810
60 +	32.7	11.0	25.5	13.3	9.7	7.7	1614	1617
<b>Residence</b>								
Rural	55.2	12.2	19.7	6.2	3.8	2.9	7930	7954
Urban	58.2	12.2	19.0	6.2	2.4	2.1	2661	2668
<b>Education</b>								
Non-literate <sup>a</sup>	47.3	12.0	20.7	8.9	6.0	5.0	2248	2259
Less than 5 years	46.8	13.3	24.0	8.3	4.4	3.1	1738	1742
5-9 years	57.9	11.8	19.8	5.7	2.8	2.0	4184	4191
10 or more years	66.9	12.1	15.0	3.3	1.4	1.4	2421	2430
<b>Religion</b>								
Hindu	67.2	10.7	12.1	6.8	1.0	2.2	301	301
Muslim	79.6	6.4	9.6	2.9	0.7	0.9	103	103
Christian	55.3	12.3	19.9	6.2	3.5	2.7	10169	10200
Others	(71.3)	(11.4)	(6.7)	(10.6)	(0.0)	(0.0)	18	18
<b>Castes/tribes</b>								
Scheduled castes	70.1	7.1	11.4	7.4	2.1	1.9	233	233
Scheduled tribes	55.4	12.3	19.9	6.3	3.5	2.7	10031	10060
Other backward classes	(75.4)	(6.1)	(12.3)	(6.1)	(0.0)	(0.0)	20	20
Others	(86.1)	(6.8)	(7.2)	(0.0)	(0.0)	(0.0)	15	15
<b>Nagaland</b>	56.1	12.2	19.5	6.2	3.4	2.7	10,591	10,622

<sup>a</sup> Literate but did not attend school, are also included. ( ) based on 10-20 unweighted cases \*\* unweighted cases.

Average Systolic	Average Diastolic					
	≤84	85-89	90-99	100-109	110-119	≥120
≤ 129	1	2	3	4	5	6
130-139	2	2	3	4	5	6
140-159	3	3	3	4	5	6
160-179	4	4	4	4	5	6
180-209	5	5	5	5	5	6
≥ 210	6	6	6	6	6	6

**Table 8.17 BLOOD PRESSURE**

Percentage of women (age 18 years and above) classified as having Blood Pressure by districts, Nagaland, 2012-13.

Districts	Status of Blood Pressure						Number of women blood pressure measure**	Number of women aged 18 years & above**
	1	2	3	4	5	6		
Mon	65.9	11.2	16.5	4.3	1.5	0.6	1097	1097
Tuensang	70.7	9.6	10.4	4.0	2.8	2.5	921	925
Mokokchung	61.6	8.4	13.7	7.0	4.6	4.7	1070	1072
Zunheboto	46.7	15.0	25.9	5.7	4.5	2.2	1072	1072
Wokha	50.5	12.4	22.2	7.8	3.9	3.3	1132	1132
Dimapur	74.2	8.1	10.9	4.1	1.4	1.3	1046	1052
Kohima	51.8	12.0	19.4	8.6	4.1	4.0	951	953
Phek	42.1	13.4	25.5	8.1	5.9	5.0	824	837
Kiphire	50.2	16.1	25.7	5.2	1.8	1.1	925	927
Longleng	48.3	16.2	24.3	5.8	3.6	1.8	853	854
Paran	45.4	13.0	23.8	8.5	4.9	4.4	700	701
<b>Nagaland</b>	56.0	12.2	19.5	6.2	3.4	2.7	10,591	10,622

\*\* unweighted cases

**Table 8.18 PRESENCE OF IODIZED SALT IN HOUSEHOLD**

Percent distribution of household with salt tested for iodine content, by level of iodine in salt ( Parts Per Million ) according to background characteristics, Nagaland, 2012-13.

Districts	Iodine content of salt				Number of Households**
	None 0 ppm	Inadequate ( < 15 ppm )	Adequate ( 15 + ppm )	Not Tested/Missing*	
<b>Age of head of Household</b>					
Less than 30	5.7	49.3	42.5	2.5	845
30 - 44	2.7	41.1	54.7	1.4	3132
45 - 59	1.9	44.5	52.2	1.5	3975
60 +	4.1	49.5	44.9	1.5	3323
<b>Residence</b>					
Rural	2.5	47.4	48.8	1.3	8464
Urban	4.6	40.2	53.1	2.2	2811
<b>Education of head of Household</b>					
Non-literate <sup>a</sup>	4.7	54.4	39.6	1.3	2115
Less than 5 years	4.5	46.1	48.0	1.4	1622
5-9 years	2.1	42.2	54.4	1.3	4410
10 or more years	2.7	43.5	51.8	2.1	3128
<b>Religion</b>					
Hindu	9.1	33.7	56.1	1.0	332
Muslim	7.6	25.3	67.1	--	140
Christian	2.8	46.1	49.6	1.6	10789
Others	13.3	26.7	60.0	--	14
<b>Castes/Tribes</b>					
Scheduled castes	10.7	35.3	52.5	1.5	290
Scheduled tribes	2.8	45.8	49.9	1.6	10597
Other backward classes	9.1	27.3	63.6	--	22
Others	4.6	42.8	52.1	0.5	366
<b>Nagaland</b>	<b>3.1</b>	<b>45.3</b>	<b>50.0</b>	<b>1.5</b>	<b>11275</b>

Note; PPM: parts per million. \* includes salt not at home, salt not tested, refused and missing cases. \*\* unweighted cases



**Table 8.19 PRESENCE OF IODIZED SALT IN HOUSEHOLD**

Percent distribution of household with salt tested for iodine content, by level of iodine in salt ( Parts Per Million ) by districts, Nagaland, 2012-13.

Districts	Iodine content of salt				Number of Households**
	None 0 ppm	Inadequate ( < 15 ppm )	Adequate ( 15 + ppm )	Not Tested/Missing*	
Mon	2.4	48.4	49.1	0.1	1090
Tuensang	2.5	66.6	28.3	2.6	1036
Mokokchung	2.7	35.4	61.5	0.4	1034
Zunheboto	0.4	47.2	51.2	1.2	1025
Wokha					
Dimapur	6.4	38.6	52.8	2.3	1019
Kohima	6.5	28.7	63.9	1.0	1044
Phek	10.4	38.2	48.6	3.0	1018
	0.4	43.6	52.9	3.1	977
Kiphire					
Longleng	0.2	50.9	48.6	0.3	1111
Paran	0.8	54.4	43.7	1.1	953
	0.1	50.3	47.8	1.9	968
<b>Nagaland</b>	<b>3.0</b>	<b>45.6</b>	<b>49.9</b>	<b>1.5</b>	<b>11275</b>

Note; PPM: parts per million. \*includes salt not at home, salt not tested, refused and missing cases. \*\* unweighted cases

# **HEALTH FACILITY**



<b>TABLE 9.1: AVERAGE POPULATION COVERED BY HEALTH FACILITY BY DISTRICTS, NAGALAND, 2012-13.</b>			
District	Average population covered by		
	Sub-Health Centre	PHC	CHC
Mon	1441	3222	29362
Tuensang	2303	8469	142125
Mokokchung	1841	3933	26000
Zunheboto	1265	4519	16871
Wokha	2357	4824	10072
Dimapur	7255	8032	25289
Kohima	2322	22701	32303
Phek	1558	3517	36193
Kiphire	1182	7323	30000
Longleng	2363	3474	NA
Paren	2337	3167	43637
Nagaland	2180	6327	38312

PHC= Primary Health Centre; CHC= Community Health Centre. \* NA: Not available.

<b>TABLE 9.2: STATUS OF INFRASTRUCTURE AT SUB-HEALTH CENTRE FUNCTIONING IN GOVERNMENT BUILDING BY DISTRICTS, NAGALAND, 2012-13.</b>							
District	Number of Sub-Health Centre					Number of Sub-Health Centre with govt. Building	Total number of Sub-Health Centre
	Regular Electricity	Water#	Toilet	Labor room	Labor room in current use <sup>1</sup>		
Mon	47.4	73.7	68.4	0.0	NA	19	20
Tuensang	33.3	60.0	80.0	46.7	14.3	15	17
Mokokchung	28.6	92.9	92.9	35.7	75.0	14	15
Zunheboto	26.7	66.7	93.3	13.3	100.0	15	19
Wokha	25.0	50.0	75.0	50.0	50.0	12	14
Dimapur	62.5	25.0	87.5	25.0	50.0	08	10
Kohima	25.0	37.5	75.0	0.0	NA	08	08
Phek	53.3	66.7	100.0	33.3	60.0	15	15
Kiphire	90.9	100.0	81.8	0.0	NA	11	13
Longleng	40.0	60.0	80.0	40.0	50.0	05	07
Paren	41.7	58.3	100.0	25.0	100.0	12	12
Nagaland	42.5	65.7	85.1	23.9	54.8	134	150

# Includes piped, bore well, well hand pump and other source of water. <sup>1</sup> Percentage calculated from number of labor room available.

District	Citizen's Charter displayed	VHNSC Facilitated*	Untied Fund Received	Total number of Sub-Health Centres
Mon	85.0	80.0	90.0	20
Tuensang	70.6	93.8	100.0	17
Mokokchung	100.0	100.0	100.0	15
Zunheboto	84.2	84.2	94.7	19
Wokha	78.6	91.7	78.6	14
Dimapur	90.0	100.0	90.0	10
Kohima	100.0	100.0	100.0	08
Phek	60.0	100.0	100.0	15
Kiphire	100.0	100.0	92.3	13
Longleng	42.9	83.3	100.0	07
Paren	91.7	100.0	91.7	12
Nagaland	82.7	93.4	94.0	150

VHSC= Village Health and Sanitation Committee.  
\*Based on availability of VHNSC.

District	Percentage of PHCs having			Total number of SHCs
	ANM	MHW	Additional ANM	
Mon	100.0	0.0	60.0	20
Tuensang	100.0	35.3	76.5	17
Mokokchung	100.0	0.0	86.7	15
Zunheboto	100.0	15.8	63.2	19
Wokha	100.0	35.7	71.4	14
Dimapur	90.0	60.0	88.9	10
Kohima	87.5	37.5	85.7	08
Phek	100.0	46.7	86.7	15
Kiphire	100.0	7.7	84.6	13
Longleng	100.0	0.0	85.7	07
Paren	100.0	41.7	83.3	12
Nagaland	98.6	24.0	77.0	150

ANM= Auxiliary Nurse Midwife. MHW= Male health Worker.

**TABLE 9.5: AVAILABLE HUMAN RESOURCES AT PRIMARY HEALTH CENTRES BY DISTRICTS, NAGALAND, 2012-13.**

District	Percentage of PHCs having				Total number of PHCs
	Medical officer	Lady Medical Officer**	AYUSH Doctor**	Pharmacist	
Mon	100.0	10.0	20.0	100.0	10
Tuensang	40.0	0.0	25.0	80.0	10
Mokokchung	90.9	0.0	0.0	100.0	11
Zunheboto	77.8	0.0	0.0	77.8	09
Wokha	50.0	20.0	0.0	90.0	10
Dimapur	100.0	50.0	50.0	83.3	06
Kohima	100.0	42.9	28.6	100.0	07
Phek	91.7	0.0	0.0	66.7	12
Kiphire	75.0	0.0	33.3	75.0	04
Longleng	100.0	0.0	0.0	100.0	02
Paren	100.0	28.6	0.0	100.0	07
Nagaland	81.8	13.8	12.5	87.5	88

\*\* Out of total medical officer

**TABLE 9.6: AVAILABLE INFRASTRUCTURE AT PRIMARY HEALTH CENTRES BY DISTRICTS, NAGALAND, 2012-13.**

District	Percentage of PHCs having					Total number of PHCs
	Residential Quarter for MO	Functioning PHC 24 hours	At least 4 beds	Regular power supply	Having functional vehicle	
Mon	50.0	20.0	70.0	100.0	100.0	10
Tuensang	60.0	40.0	66.7	40.0	80.0	10
Mokokchung	63.6	81.8	90.9	27.3	45.5	11
Zunheboto	55.6	66.7	100.0	33.3	66.7	09
Wokha	60.0	50.0	70.0	40.0	40.0	10
Dimapur	66.7	66.7	80.0	33.3	16.7	06
Kohima	85.7	71.4	85.7	42.9	42.9	07
Phek	66.7	41.7	83.3	50.0	50.0	12
Kiphire	50.0	0.0	75.0	50.0	75.0	04
Longleng	100.0	100.0	100.0	0.0	100.0	02
Paren	57.1	71.4	42.9	42.9	28.6	07
Nagaland	62.5	53.4	77.6	45.5	56.8	88

MO= Medical Officer.

**TABLE 9.7: SPECIFIC HEALTH FACILITIES AVAILABLE AT PRIMARY HEALTH CENTRES BY DISTRICTS, NAGALAND, 2012-13.**

District	Percentage of PHCs having			Total number of PHCs
	New born care services*	Referral services for delivery**	Conducted at least 10 deliveries	
Mon	75.0	0.0	0.0	10
Tuensang	100.0	0.0	0.0	10
Mokokchung	88.9	33.3	0.0	11
Zunheboto	100.0	33.3	0.0	09
Wokha	50.0	20.0	0.0	10
Dimapur	100.0	25.0	25.0	06
Kohima	83.3	0.0	0.0	07
Phek	80.0	20.0	0.0	12
Kiphire	NA	NA	NA	04
Longleng	50.0	0.0	0.0	02
Paran	85.7	20.0	0.0	07
Nagaland	84.4	19.2	2.0	88

\* Services based on during last one month. \*\* Based on PHC functioning on 24 hours basis. NA: No cases

**TABLE 9.8: NUMBER OF PRIMARY HEALTH CENTRES HAVING DIFFERENT ACTIVITIES BY DISTRICTS, NAGALAND, 2012-13**

District	Percentage of PHCs				Total number of PHCs
	Citizen's Charter displayed	RKS constituted	Received untied fund*	Utilized untied fund**	
Mon	90.0	100.0	100.0	100.0	10
Tuensang	80.0	100.0	100.0	100.0	10
Mokokchung	100.0	90.9	90.9	100.0	11
Zunheboto	88.9	100.0	88.9	85.7	09
Wokha	90.0	60.0	60.0	100.0	10
Dimapur	83.3	83.3	100.0	100.0	06
Kohima	100.0	71.4	100.0	100.0	07
Phek	83.3	83.3	91.7	100.0	12
Kiphire	100.0	50.0	100.0	100.0	04
Longleng	50.0	100.0	100.0	100.0	02
Paran	100.0	85.7	100.0	100.0	07
Nagaland	89.8	85.2	92.1	98.8	88

RKS = Rogi Kalyan Samiti. \* Untied fund for previous financial year \*\* it includes full and partial utilization of fund.

**TABLE 9.9: HUMAN RESOURCES AVAILABLE AT COMMUNITY HEALTH CENTRES BY DISTRICTS, NAGALAND, 2012-13.**

District	Number of CHCs having:				Total number of CHCs
	Obstetric Gynecologist	Pediatrician	Anesthetist	Public Health Manager	
Mon	00	NA	00	00	02
Tuensang	00	NA	00	00	02
Mokokchung	01	NA	00	00	03
Zunheboto	00	NA	00	00	02
Wokha	00	NA	00	00	02
Dimapur	00	NA	00	00	02
Kohima	00	NA	00	01	03
Phek	00	NA	01	00	03
Kiphire	00	NA	00	01	01
Longleng	NA	NA	NA	NA	NA
Paren	00	NA	01	00	01
Nagaland	01	NA	02	02	21

NA: No cases.



**TABLE 9.10: SPECIFIC HEALTH CARE FACILITIES AVAILABLE AT COMMUNITY HEALTH CENTRES BY DISTRICTS, NAGALAND, 2012-13.**

District	Number of CHCs having:				Total number of CHCs
	Functional OT	Designated as FRU	New born care services <sup>1</sup>	Blood storage facility	
Mon	00	02	01	00	02
Tuensang	01	01	02	01	02
Mokokchung	03	03	03	NA	03
Zunheboto	01	02	02	00	02
Wokha	00	02	00	NA	02
Dimapur	02	01	02	NA	02
Kohima	02	02	03	NA	03
Phek	02	02	03	00	03
Kiphire	00	01	00	NA	01
Longleng	NA	NA	NA	NA	NA
Paren	01	01	01	NA	01
Nagaland	12	17	17	01	21

OT= Operation Theatre; FRU= First Referral Unit. <sup>1</sup> Based on last one month services, NA = not available

**TABLE 9.11: NUMBER OF COMMUNITY HEALTH CENTRES HAVING DIFFERENT ACTIVITIES BY DISTRICTS, NAGALAND, 2012-13.**

District	Number of CHCs having:				Total number of CHCs
	Citizen's charter displayed	RKS constituted	RKS Monitored regularly*	Utilized untied fund**	
Mon	01	01	01	01	02
Tuensang	02	02	02	02	02
Mokokchung	03	03	03	03	03
Zunheboto	02	02	02	02	02
Wokha	02	02	02	02	02
Dimapur	02	02	02	01	02
Kohima	03	03	03	03	03
Phek	02	03	03	03	03
Kiphire	01	01	01	01	01
Longleng	NA	NA	NA	NA	NA
Paren	01	01	01	01	01
Nagaland	19	20	20	19	21

\*RKS monitored regularly is from number of RKS constituted.\*\* Including full and partial utilization. NA = No facility available

**TABLE 9.12: HUMAN RESOURCES & OTHER SERVICES AVAILABLE AT DISTRICT HOSPITALS BY DISTRICTS, NAGALAND, 2012-13.**

District	Number of DHs having:							Total number of DHs
	Pediatrician	Radiographer	2D Echo facility	Ultrasound facility	three phase connection	critical care area	suggestion and complaint box	
Mon	00	00	00	00	01	01	01	01
Tuensang	00	00	00	01	00	00	01	01
Mokokchung	01	00	01	01	01	00	00	01
Zunheboto	00	00	01	01	00	00	01	01
Wokha	01	00	00	01	01	00	01	01
Dimapur	01	00	00	01	01	00	01	01
Kohima	01	01	00	01	01	01	01	01
Phek	01	01	00	01	00	00	01	01
Kiphire	00	00	00	01	01	00	00	01
Longleng	00	00	00	00	00	00	01	01
Paran	00	00	00	00	00	00	01	01
<b>Nagaland</b>	<b>05</b>	<b>02</b>	<b>02</b>	<b>08</b>	<b>06</b>	<b>02</b>	<b>09</b>	<b>11</b>

## APPENDIX - A

### LIST OF CONTRIBUTORS

<b>Dr. L. Ladu Singh</b>	Professor and Head, Department of Mathematical Demography & Statistics, International Institute for Population Sciences, Govandi Station Road, Deonar, Mumbai-400088.
<b>Dr. Chander Shekhar</b>	Professor, Department of Fertility Studies, International Institute for Population Sciences, Govandi Station Road, Deonar, Mumbai-400088.
<b>Mr. Junaid Khan</b>	Project officer, DLHS-4, International Institute for Population Sciences, Govandi Station Road, Deonar, Mumbai-400088.
<b>Miss. Rati Parihar</b>	Project Officer, DLHS-4, International Institute for Population Sciences, Govandi Station Road, Deonar, Mumbai-400088.

## APPENDIX - B

### FIELD AGENCY INVOLVED IN DATA COLLECTION OF DLHS-4 IN NGALAND

Nielsen India Pvt. Ltd.	7 <sup>th</sup> Floor, 404-405, ILab Info Technology Centre Near Country Inns and Suites, Udyog Vihar, Phase III Gurgaon – 122016 Haryana
-------------------------	--

## APPENDIX - C

### AGENCY DEVELOPED CAPI SOFTWARE

Tech Mahindra Limited	Satyam Infocity, Unit-12, Plot 35/36, Hi-Tech City Layout, Survey No 64, Madhapur, Hyderabad-500081.
-----------------------	--

## APPENDIX - D

### MEMBER OF COORDINATION COMMITTEE FOR DLHS-4

Addl. DG, Chief Director Representative Prof. F. Ram, Coordinators Representative Director	Statistics Division, Ministry of Health & Family Welfare, New Delhi, Chairman Statistics Division, Ministry of Health & Family Welfare, New Delhi Office of Registrar General Director & Senior Professor, IIPS, Mumbai DLHS-4, IIPS, Mumbai NIHFW, New Delhi Statistics Division, MoHFW, Govt. of India, New Delhi, Member Secretary
--	---

## APPENDIX - E

### MEMBER OF STEERING COMMITTEE OF DLHS-4

Shri K. Chandramouli, Shri Naved Masood, Shri P. K. Pradhan, Smt. Madhu Bala, Shri R. C. Sethi, Dr. Shiv Lal, Shri Ambrish Kumar, Dr. Rattan Chand, Prof. F. Ram, Prof. Arvind Pandey, Prof. Deoki Nandan, Shri Bhaskar Mishra,	Former Secretary (H&FW), Govt. of India, New Delhi, Chairman SS & FA, MoHFW, Govt. of India, New Delhi S & MD, (NRHM), MoHFW, Govt. of India, New Delhi Former ADG (Stats.), MoHFW, Govt. of India, New Delhi Addl. RGI, Office of RGI, Govt. of India, New Delhi Former Spl. DG & Advisor (PH), DGHS, MoHFW, Govt. of India, New Delhi Advisor (Health), Planning Commission, Govt. of India, New Delhi Chief Director (Stats.), MoHFW, Govt. of India, New Delhi Director & Senior Professor, IIPS, Mumbai Director, NIMS, ICMR, New Delhi Director, NIHFW, New Delhi Deputy RGI, Office of RGI, Govt. of India, New Delhi
--	---

Shri Pravin Srivastava,	DDG, MoHFW, Govt. of India, New Delhi
Shri V. Parameswaran,	DDG, CSO, MoS&PI, Govt. of India, New Delhi
Dr. Pavitra Mohan,	Health Specialist, UNICEF, New Delhi
Shri Shantanu Gupta,	M & E Officer, UNICEF, New Delhi
Shri K. D. Maiti,	Planning, Monitoring & Evaluation Specialist, UNICEF, New Delhi
Prof. M. M. Misro,	Professor, NIHFW, New Delhi
Prof. K. Kalaivani,	Professor, NIHFW, New Delhi
Shri Rajesh Bhatia,	Director (Stats.), MoHFW, Govt. of India, New Delhi
Shri Aditya Prakash,	Statistical Advisor MoWCD, Govt. of India, New Delhi
Dr. A. K. Harit,	CMO, DGHS, MoHFW, Govt. of India, New Delhi
Smt. Kmkum Marwah,	Joint Technical Advisor, MoWCD, Govt. of India, New Delhi
Dr. Paul Fancis,	WHO, New Delhi
Smt. Anagha Khot,	NPO, WHO, New Delhi
Dr. Subodh S. Gupta,	NPO, WHO, New Delhi
Shri Ramesh Babu,	Sr. Programme Manager, USAID, New Delhi
Shri Sathyanaraynan,	Sr. NPO, UNFPA, New Delhi
Dr. S. C. Agrawal,	AD, MoHFW, Govt. of India, New Delhi

#### **APPENDIX -F**

#### **MEMBER OF ADMINISTRATIVE AND FINANCIAL MANAGEMENT COMMITTEE OF DLHS-4**

Addl. Secretary & Financial Advisory	Ministry of Health & Family Welfare, Chairman
Addl. DG	Statistics Division, Ministry of Health & Family Welfare
Chief Director	Statistics Division, Ministry of Health & Family Welfare
Dy. Secretary (IFD)	Ministry of Health & Family Welfare
Director	IIPS, Mumbai
Coordinators	DLHS-4, IIPS, Mumbai
Director	Statistics Division, Ministry of Health & Family Welfare, Member Secretary

#### **APPENDIX - G**

#### **MEMBERS OF SUB-COMMITTEE ON SAMPLING OF DLHS-4**

Shri G. C. Manna,	DDG, CSO, MoSPI, New Delhi, Chairman
Dr. U. C. Sud,	Director, IASRI, New Delhi
Dr. J. P. Bhattacharjee,	DDG, SDRD, NSSO, Kolkata
Prof. L. Ladu Singh,	Professor & DLHS-4 Coordinator, IIPS, Mumbai
Shri Bhaskar Mishra,	Deputy RGI, Office of RGI, Govt. of India, New Delhi
Dr. Rattan Chand,	Chief Director (Stats), MoHFW, Govt of India, New Delhi
Shri Rajesh Bhatia,	Former Director (Stats.), MoHFW, Govt. of India, New Delhi

#### **APPENDIX -H**

#### **MEMBERS OF TECHNICAL ADVISORY COMMITTEE (TAC) FOR DLHS-4**

Dr. N. S. Shastry,	Former DG & CEO, NSSO, Govt. of India, New Delhi, Chairman
Addl. DG	Statistics Division, MoHFW, Govt. of India, New Delhi
Prof. Arvind Pandey,	Director, NIMS, ICMR, New Delhi
P. M. Kulkarni	JNU, New Delhi
DG	National Sample Survey Organisation (NSSO)
Chief Director	Statistics Division, Ministry of Health Family Welfare
DDG	Statistics Division, Ministry of Health Family Welfare
Programme Officer	Ministry of Health Family Welfare

Representative	Office of Registrar General, GOI
Representative	Ministry of Women & Child Development
Prof. F. Ram,	Director Senior Professor, IIPS, Mumbai
Coordinator	DLHS-4, IIPS, Mumbai
Representatives	World Bank, UNICEF, UNFPA, WHO, DFID and USAID
Shri Rajesh Bhatia,	Former Director (Stats.), MoHFW, Govt. of India, New Delhi, Member Secretary

#### APPENDIX - I

##### MEMBERS OF SUB-COMMITTEE TO TAC OF DLHS-4 TO EXAMINE THE DATA

Dr. N. S. Shastry,	Former DG & CEO, NSSO, Govt. of India, New Delhi, Chairman
Dr. Rattan Chand,	Chief Director (Stats.), MoHFW, Govt. of India, New Delhi
Representative	Office of Registrar General
Prof. P. M. Kulkarni	JNU, New Delhi
Prof. F. Ram,	Director & Senior Professor, IIPS, Mumbai
Director	NIHFW, New Delhi
Representative	USAID
Representative	UNFPA
Representative	UNICEF
Director	Statistics Division, MoHFW, Govt. of India, New Delhi, Member Secretary

#### APPENDIX - J

##### CAB COMPONENTS NODAL AGENCY OF DLHS-4

National Institute for Health & Family Welfare (NIHFW)	Baba Gang Nath Marg, Murnika, New Delhi
--	---

#### APPENDIX-K

##### LIST OF THE PARTNER INSTITUTES FOR CAB COMPONENTS INVOLVED IN DLHS-4

Name of the Partner Institute	States
Sher-E Kashmir Institute of Medical Sciences	Kashmir and Ladakh Region
Dr. R.P. Govt. Medical College, Tanda, Himachal Pradesh	Jammu region and Himachal Pradesh
PGIMER, Chandigarh	Punjab, Chandigarh and Haryana
NIHFW, New Delhi	Delhi
NIOH, Ahmedabad	Gujarat, Daman & Diu and Dadra Nagar Haveli
NIRRH, Mumbai	Maharashtra (excluding Vidharbha) and Goa
MGIMS, Sewagram	Only Vidharbha, Maharashtra
RMRC, Dibrugarh	Sikkim and Arunachal Pradesh
RIMS, Imphal	Manipur, Mizoram & Nagaland
NEIGRIHMS, Shillong	Meghalaya
Government Medical College, Agartala	Tripura
Gandhi Medical College, Hyderabad	Andhra Pradesh & Telangana
NIE, Chennai	Tamil Nadu, Puducherry and Andaman & Nicobar Island
JN Medical Collage, Belgaum	North Karnataka
Kasturba Medical College, Manglore	South Karnataka
Thiruvananthapuram Medical College,	Kerala & Lakshadweep
NICED, Kolkata	West Bengal

**APPENDIX - L**

**PROCUREMENT OF CAB EQUIPMENTS FOR DLHS-4**

HLL Life Care Limited, B-14, A, Sector-62, Noida

**APPENDIX - M**

**STAFF INVOLVED IN DLHS-4**

**International Institute for Population Sciences, Mumbai**

**Coordinators**

Prof. F. Ram  
Prof. L. Ladu Singh  
Prof. B. Paswan  
Prof. S. K. Singh  
Prof. H. Lhungdim  
Prof. T. V. Sekher  
Prof. P. K. Murthy  
Prof. Chander Shekhar  
Dr. Manoj Alagarajan

**Project Coordinator**

Dr. Gopal Singh Kshetrimayum  
Dr. Akash N. Wankhede  
Dr. G. P. Kumar

**Health Coordinator**

Dr. Mithilesh Verma

**IT & Data Manager**

Mr. Dnyaneshwar Kale  
Mr. Prabhu Ponnusamy  
Ms. Rojalin Behura

**Project Officer (Office)**

Mr. L. Priyananda Singh (IT)	Mr. Mahadev Digambar Bhise
Mr. Ashish Kumar Upadhyay	Mr. Ashish Pardhi
Mr. Imran Ahmad	Mr. Junaid Khan
Mr. Mohd Usman	Mr. N. Brahmanandam
Mr. Mukesh Ranjan	Ms. Rati Parihar
Ms. Ragini Mishra	Ms. Swati Srivastava
Mr. Santosh Bhagwanrao Phad	Mr. Raj Kr. Verma
Mr: Shrikant D. Kuntla	Ms. Shalini Meshram
Ms. Arpita Paul	Mr. Manish Singh
Mr. P. R. A. Nair	Mr. AnupamVerma
Mr. Satish Kumar Chauhan	Mr. Rahul Koli
Ms. Renu Sisodia	Ms. Preetam D. Gaikwad
Ms. Kakoli Brokotoky	Mr. Ajit Kumar Yadav
Mr. Ankit Anand	Mr. Prakash Chand D. Meher
Mr. Satish Kumar Chauhan	Ms. Mamta Rajbhar

**Project Officer (Field)**

Mr. Zabenthung Enny

**ADMINISTRATIVE STAFF**

**Project Coordinator (Adm. & Finance)**

C. A. Gurudutt Belhekar

**ACCOUNTANT CUM OFF. ASSISTANT**

Mr. Jay Kavashik Davda  
Ms. Pratidnya Kasare  
Mr. Roshan D'souza  
Ms. Sumita Bohra

**OFFICE ASSISTANT**

Ms. Namarta Thorat  
Ms. Ranjita Nimbalkar  
Mrs. Remya Pradeep

**OFFICE ATTENDANTS**

Mr. Prakash Kandra  
Mr. Vishal P. Patil  
Mr. Ravindra P. Gawade

Mr. Nitin M. Dekhane  
Mr. Asif D. Kokane

# NAGALAND