NATIONAL FAMILY HEALTH SURVEY (NFHS-2)

INDIA

1998–99

KARNATAKA

International Institute for Population Sciences
Mumbai, India

MEASURE *DHS*+, ORC MACRO
Calverton, Maryland, USA

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NFHS-2 data sets for this state can be obtained from the website listed above.

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PREFACE

The success of the first National Family Health Survey, conducted in 1992–93, in creating an important demographic and health database in India has paved the way for repeating the survey. The second National Family Health Survey (NFHS-2), undertaken in 1998–99, is designed to strengthen the database further and facilitate implementation and monitoring of population and health programmes in the country. As in the earlier survey, the principal objective of NFHS-2 is to provide state and national estimates of fertility, the practice of family planning, infant and child mortality, maternal and child health, and the utilization of health services provided to mothers and children. In addition, the survey provides indicators of the quality of health and family welfare services, women's reproductive health problems, and domestic violence, and includes information on the status of women, education, and the standard of living.

Another feature of NFHS-2 is measurement of the nutritional status of women. Height and weight measurements, which were available only for young children in the earlier survey, were extended to cover all eligible women in NFHS-2. In addition, ever-married women and their children below age three had their blood tested for the level of haemoglobin, using the HemoCue instrument. Through these blood tests, for the first time the survey provides information on the prevalence of anaemia throughout India. In two metropolitan cities, Delhi and Mumbai, a further test was done for children below age three to measure the lead content in their blood. The survey also measured the extent to which households in India use cooking salt that has been fortified with iodine.

The NFHS-2 survey was funded by the United States Agency for International Development (USAID) through ORC Macro, USA. UNICEF provided additional financial support for the nutritional components of the survey. The survey is the outcome of the collaborative efforts of many organizations. The International Institute for Population Sciences (IIPS) was designated as the nodal agency for this project by the Ministry of Health and Family Welfare, Government of India, New Delhi. Thirteen reputed field organizations (FOs) in India, including five Population Research Centres, were selected to carry out the houselisting operation and data collection for NFHS-2. The field organization for Karnataka was the Population Research Centre, Institute for Social and Economic Change, Bangalore. ORC Macro, Calverton, Maryland, USA, and the East-West Center, Honolulu, Hawaii, USA, provided technical assistance for all survey operations.

The NFHS-2 survey covered a representative sample of more than 90,000 eligible women age 15–49 from 26 states that comprise more than 99 percent of India's population. The data collection was carried out in two phases, starting in November 1998 and March 1999. The survey provides state-level estimates of demographic and health parameters as well as data on various socioeconomic and programmatic factors that are critical for bringing about desired changes in India's demographic and health situation. The survey provides urban and rural estimates for most states, regional estimates for five states (Bihar, Jammu and Kashmir, Madhya Pradesh, Rajasthan, and Uttar Pradesh), separate estimates for three metro cities (Chennai, Kolkata, and Mumbai), and estimates for slum areas in Mumbai.

The survey used uniform questionnaires, sample designs, and field procedures to facilitate comparability of the data and to achieve a high level of data quality. Preliminary reports

with selected results were prepared earlier for each state and presented to policymakers and programme administrators responsible for improving health and family welfare programmes in most states.

The final state reports are based on a standard tabulation plan developed at a workshop held in Kodaikanal on 15–17 January 1999. IIPS finalized the tabulation plan according to the recommendations of the NFHS-2 Technical Advisory Committee and produced the tables and figures for the final reports. In most states, the final state reports were written by representatives of the Population Research Centres, faculty members from IIPS, representatives from ORC Macro and the East-West Center, and reputed researchers from other organizations in the field of population and health in India. Each report has been reviewed by an Indian expert in the field of population sciences.

We are happy to present the final NFHS-2 state report for Karnataka, which was covered in the second phase of the survey. We hope that the report will provide helpful insights into the changes that are taking place in the state and will provide policymakers and programme managers with up-to-date estimates of indicators that can be used for effective management of health and family welfare programmes, with an emphasis on reproductive health dimensions. The report should also contribute to the knowledge of researchers and analysts in the fields of population, health, and nutrition.

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The second National Family Health Survey was successfully completed due to the efforts and involvement of numerous organizations and individuals at different stages of the survey. We would like to thank everyone who was involved in the survey and made it a success.

First of all, we are grateful to the Ministry of Health and Family Welfare, Government of India, New Delhi, for its overall guidance and support during the project. Mr. Y.N. Chaturvedi and Mr. K.S. Sugathan, the then Secretary and Joint Secretary, respectively, at the Department of Family Welfare deserve special thanks. They initiated the project and designated the International Institute for Population Sciences (IIPS) as the nodal agency for the survey. They also formed the Steering Committee, the Administrative and Financial Management Committee, and the Technical Advisory Committee for the smooth and efficient functioning of the project. Special thanks are due to Mr. A.R. Nanda, the present Secretary of the Department of Family Welfare, who continued to take an active interest in the project and provided timely guidance and support. The contributions of Mr. Vijay Singh, Joint Secretary (FA), Ms. Meenakshi Dutta Ghosh, Joint Secretary (S), Mr. Gautam Basu, Joint Secretary (RCH), Mr. P.K. Saha, Chief Director (S), and Dr. K.V. Rao, Chief Director (S), are acknowledged with gratitude.

We gratefully acknowledge the immense help received from the Office of the Registrar General, India, New Delhi (particularly Dr. M. Vijayanunni, the then Registrar General of India, Mr. J.K. Banthia, the present Registrar General of India, Mr. S.P. Sharma, Consultant, and Mr. S.K. Sinha, Deputy Registrar General, Vital Statistics) in implementing the sample design and making the latest SRS results available to cite in the reports. We thank all the expert participants in the series of workshops to finalize the questionnaire design, the sample design and tabulations plans for the survey. Special mention and thanks are due to Dr. Vijay Verma for his expert advice on the sample design and the calculation of sample weights.

We are grateful to the Directorate of Census Operations, Director of Health Services, and Office of the Integrated Child Development Scheme, Maharashtra, for their support in conducting training of the trainers for the houselisting operation and health investigators.

We are thankful to the Department of Health and Family Welfare, Government of Karnataka, for helping the field organization by providing logistic assistance, whenever possible. Special thanks go to the local officials in all of the sample areas for facilitating the data collection.

The United States Agency for International Development (USAID) provided generous funding for NFHS-2. USAID's contribution to the project is sincerely acknowledged. Special thanks are due to Mr. William Goldman, the former Director of the Office of Population, Health and Nutrition (PHN), USAID, New Delhi, Ms. Sheena Chhabra, Team Leader, Policy, Research, Evaluation, and Marketing (PHN), and Dr. Victor K. Barbiero, current Director of PHN, for their initiative and involvement in the project. Many thanks are due to UNICEF for providing additional funding for the nutrition component of the project and the most modern medical equipment for carrying out the height-weight measurements and anaemia testing. Special thanks are due to Dr. Sanjiv Kumar, Project Officer (Health), UNICEF, New Delhi, for his earnest cooperation in this respect.

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Thanks are due to all the members of the Steering Committee, Administrative and Financial Management Committee, and Technical Advisory Committee for participating in various meetings and providing valuable guidance for the successful execution of the project.

Dr. K.B. Pathak was the Director of IIPS during the development of the project and throughout the first phase of data collection. His immense interest and great assistance to NFHS-2 are gratefully acknowledged. We also acknowledge the invaluable contribution and continuing interest of Dr. Arvind Pandey who helped coordinate the NFHS-2 project for most of the project period.

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The difficult task of data collection and data processing in the state of Karnataka was successfully carried out by Population Research Centre, Institute for Social and Economic Change (ISEC), Bangalore. Our special thanks are due to Dr. M. Govinda Rao, Director, ISEC, Dr. K.N.M. Raju, Survey Administration Coordinator, Dr. Ramesh Kanbargi, Senior Demographer, Dr. C.S. Veermatha, Health Specialist, and other coordinators for successfully coordinating the fieldwork and data processing for the state. Special thanks go to Mr. M.N. Murthy, IIPS Research Officer, NFHS-2, for assisting during the training of the field staff and monitoring the data collection in Karnataka. This acknowledgement cannot be concluded without expressing appreciation for the hard work put in by the interviewers, health investigators, supervisors, and field editors in collecting data in Karnataka.

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Last but not the least, credit goes to the 4,374 ever-married women of Karnataka and the household respondents who spent their time and responded to the rather lengthy questionnaires with tremendous patience and without any expectation from NFHS-2.

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