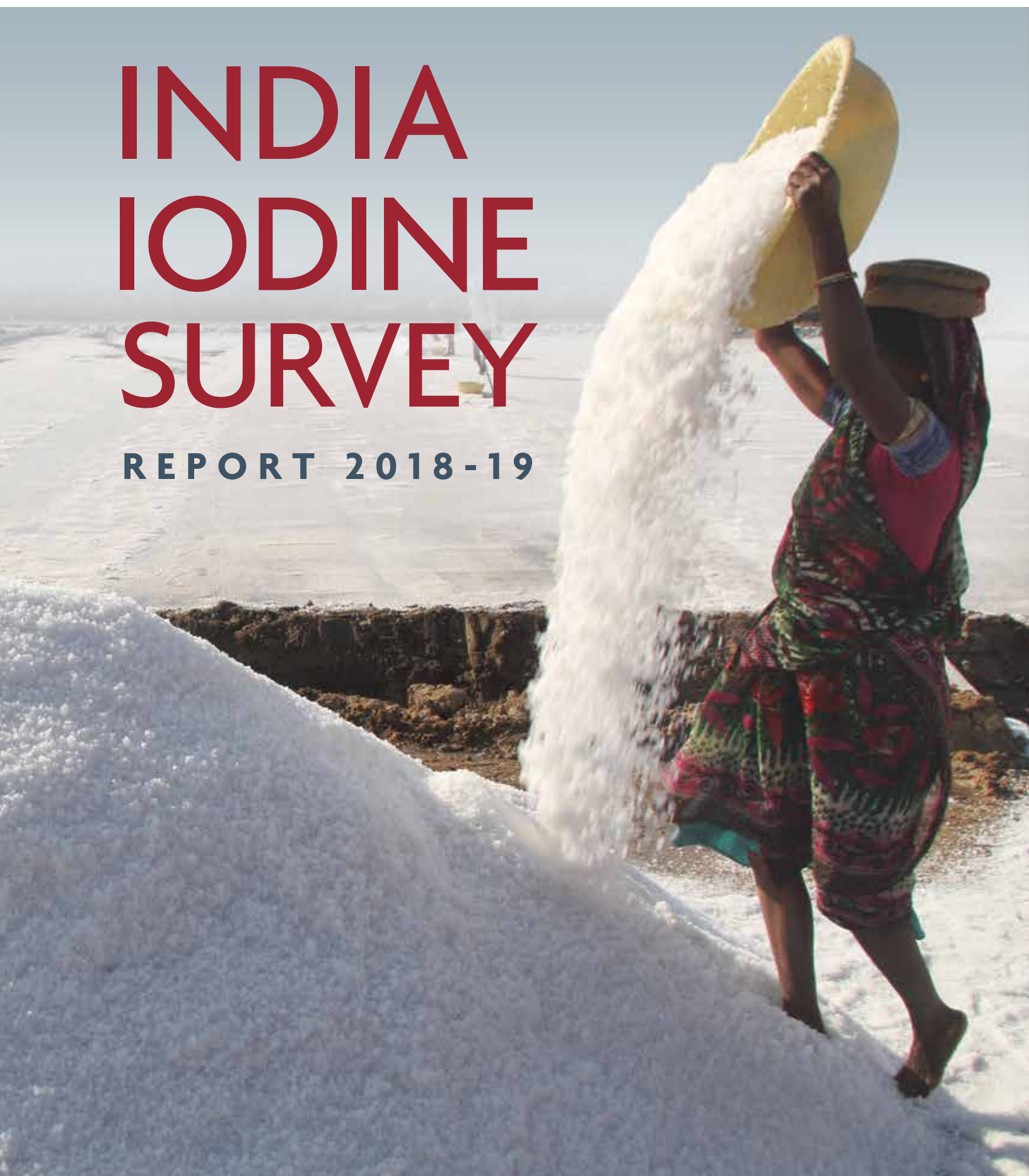


INDIA IODINE SURVEY

REPORT 2018-19



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2018-19

NATIONAL REPORT

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For additional information about the India Iodine Survey 2018-19, Please contact:



Nutrition International
B-28, Second floor, Tara Crescent
Qutab Institutional Area
New Delhi – 110016, India
+91 11 46862000 +91 11 46862048
www.nutritionintl.org

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FOREWORD

A country is only as strong as her people – people need good nutrition to determine good public health, this, in turn, determines the overall economic development of the nation. Nutrition is only half-understood if not wholly neglected. Households comprehend the importance of macronutrients but micronutrients, the foot soldiers of nutrition that ensure protection against most illnesses and congenital problems, are overlooked.

Iodine is a micronutrient that is essential for optimal mental and physical development and is needed in daily doses throughout the life of an individual. Studies have shown that children born in areas where the soil is deficient in iodine have 13.5 IQ points less than those in iodine sufficient areas. Deficiency of iodine is also the single largest cause of preventable brain damage. Salt, with a uniform uptake amongst all income groups, including the poorest, serves as the most suitable vehicle to deliver iodine to an entire population. To address the Iodine Deficiency Disorders (IDD) in the population, the Government of India initiated National Goitre Control Program (NGCP) in 1962, which was renamed as National IDD Control Program (NIDDCP) in 1992. Significant progress has been made in improving the availability of adequately Iodized salt at the household level in all states and Union Territories (UTs).

Nutrition International (NI) along with the Association for Indian Coalition for the Control of Iodine Deficiency Disorders (ICCIDD) commissioned the ‘India Iodine Survey 2018-19’ across all 29 states and seven Union Territories (UTs) in India. The study provides state-level estimates of household coverage of iodised salt and estimates of urinary iodine status of the three major population groups – pregnant women, lactating mothers and non-pregnant and non-lactating women of reproductive age.



The survey findings provide significant insights that have the potential to impact policy and influence government programmes to reduce IDD across the country. We are certain that the results of this survey will be widely used for strengthening the salt iodisation programme in India and will reinforce the discussions and efforts among various stakeholders including government, academia, industry, development partners and media. We hope it will enable the scale-up of sustainable efforts to achieve Universal Salt Iodisation (USI), which will then lead to the reduction and elimination of IDD.

We would like take this opportunity to congratulate and thank all the stakeholders – national and state governments, development partners, academic experts, and researchers, who contributed towards making this survey a success. They have played a critical role in the development of this study and we look forward to continuing our collaboration with them to achieve and sustain USI and to shape the future of the IDD control program in the country. We are also thankful to all participants and respondents who have dedicated their time and consented to provide requisite details and samples for the successful completion of the study.

Andrew O' Connell



Regional Director Asia,
Nutrition International

Chandrakant Pandav



President, Association for
Indian Coalition for Control
of Iodine Deficiency Disorders
(ICCIDD) and Former
Professor and Head – Centre
for Community Medicine,
AIIMS, New Delhi





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Finally, and most importantly, we extend our appreciation for the cooperation of all the survey respondents including pregnant women, lactating women, and non-pregnant/non-lactating women of reproductive age in the 29 states and 7 UTs. We thank them for supporting us with their time, responding to the questionnaire, and consenting to the collection of salt and urine samples that has made this survey possible.

ABBREVIATIONS

AAY	Antyodaya Anna Yojana
ANM	Auxiliary Nurse Mid-Wife
APL	Above Poverty Line
ASHA	Accredited Social Health Activist
AWW	Anganwadi Worker
BPL	Below Poverty Line
CAPI	Computer Assisted Personal Interviewing
HH	Household
HoH	Head of the Household
ICCIDD	The Association for Indian Coalition for Control of Iodine Deficiency Disorders
ID	Identification Details
IDD	Iodine Deficiency Disorders
IQC	Internal Quality Control
LW	Lactating Women
MIS	Management Information System
NISI	National Iodine and Salt Intake Survey
NFHS	National Family Health Survey
NGCP	National Goitre Control Programme
NPNLW	Non-Pregnant Non-Lactating Women
PAPI	Pen and Paper Personal Assisted Interviewing
PSU	Primary Sampling Unit
PW	Pregnant Women
STK	Salt Test Kit
SSU	Secondary Sampling Unit
UIC	Urinary Iodine Concentration
UNICEF	United Nation's Children Fund
USI	Universal Salt Iodisation
WHO	World Health Organisation
WRA	Women of Reproductive Age

EXECUTIVE SUMMARY





Iodine is an important micronutrient required for optimal mental and physical development in human beings. Iodine Deficiency Disorders (IDD) encompass a range of disabilities and disorders such as goitre, hypothyroidism, cretinism, abortion, still-birth, mental retardation and psychomotor defects. A majority of these consequences are invisible and irreversible but are fully preventable.

Globally, iodine deficiency is the single-largest cause of preventable brain damage. Children born in areas where the soil is deficient in iodine have 13.5 IQ points less than those in iodine sufficient areas.

Based on the results from a study conducted in Kangra valley (Himachal Pradesh)¹, India became one of the first countries to initiate a National Goitre Control Program (NGCP), a public health program in 1962 which was renamed in 1992 as National Iodine Deficiency Disorders Control Program (NIDDCP). Universal Salt Iodisation (USI) was adopted as a strategy to ensure more than 90 per cent of the population has access to adequately iodised salt available at the household level.

Nutrition International (NI) along with the Association for the Indian Coalition for the Control of Iodine Deficiency Disorders (ICCIDD) commissioned a first-of-its kind of national level survey titled 'India Iodine Survey 2018-19' across all 29 states and 7 Union Territories (UTs) in India to estimate the household coverage of iodised salt and iodine status of the Indians, wherein women in the reproductive age (15-49 years) were considered as a proxy for the population. Kantar was chosen to conduct this survey.

1. Soodh SS, Ramalingaswami V. Preliminary Report of An Experiment in the Kangra valley for The Prevention of Himalayan Endemic Goitre With Iodized Salt. *Bull World Health Organ.* 1965; (3):299–315. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2555234/>



Key objectives

The primary objective of the survey was to:

- Estimate the coverage of adequately iodised salt at the household level.

The secondary objectives of the survey were to:

- Assess the iodine status among pregnant women, lactating women with an infant less than 6 months, and non-pregnant non-lactating women of reproductive age (15 to 49 years) by measuring their median Urinary Iodine Concentration (UIC) levels;
- Assess knowledge and practices regarding IDD and iodised salt amongst respondents;
- Use the survey findings for strengthening the iodine deficiency disorder control program.

The survey covered a total of 21,406 households in 702 Primary Sampling Units (PSUs) across 29 states and 7 UTs in India. The survey followed a multi-stage cluster sampling with clusters selected using a probability proportional to size (PPS) method. The fieldwork was undertaken between October, 2018 and March, 2019. Salt samples were collected to estimate the iodine content at the household level through iodimetric titration in the laboratory and urine samples were collected to estimate the status of urinary iodine concentration among pregnant, lactating and non-pregnant non-lactating women in the reproductive age of 15 to 49 years.

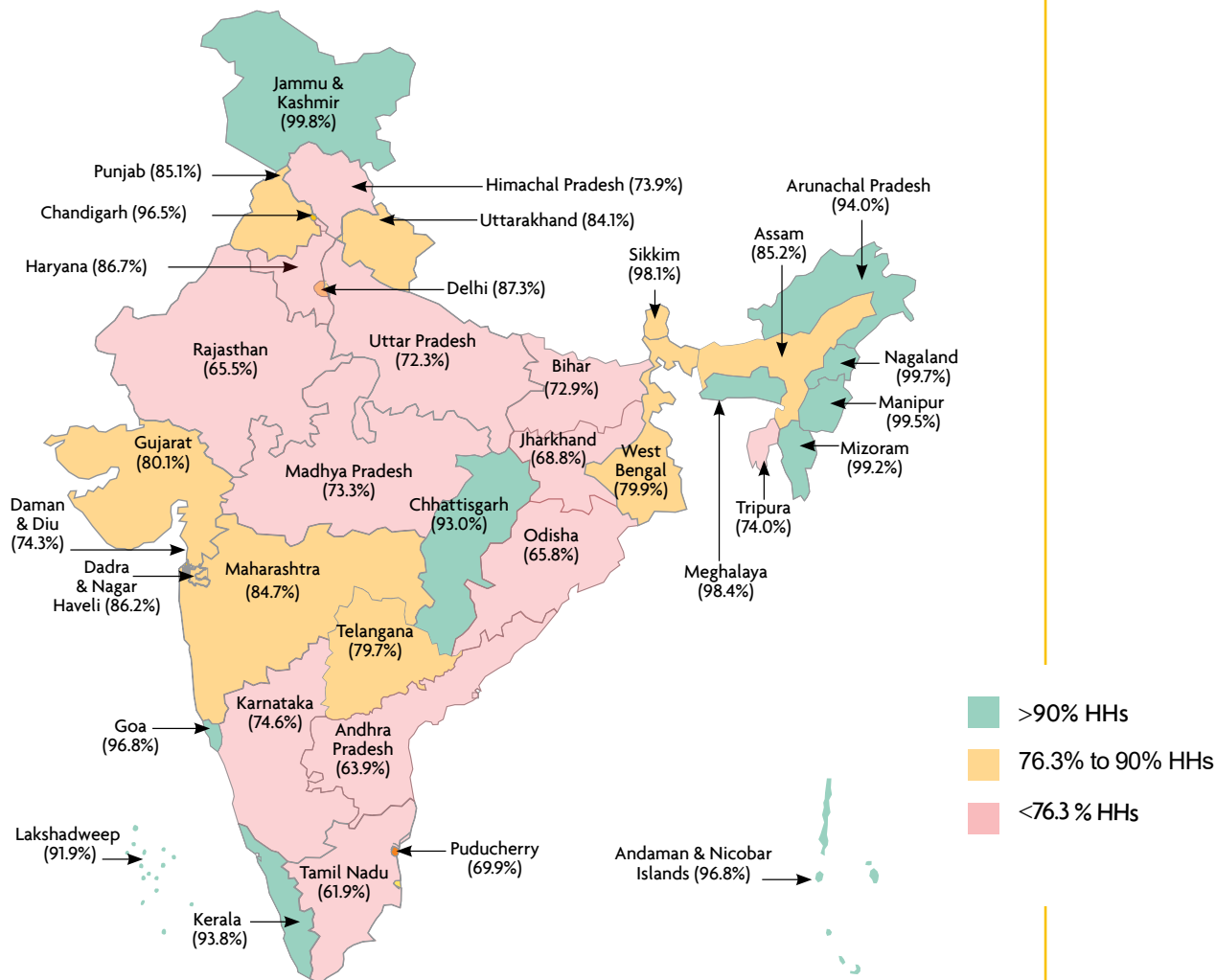


Key findings

- At the national level, the household coverage with iodine content equal to or more than 15 Parts Per Million (ppm) was 76.3 per cent. Salt iodised with some iodine, equal to or more than 5 ppm at the household level was 92.4 per cent.
- Among 29 states and 7 UTs, the front runner states with the highest household coverage with iodine content more than and equal to 15 ppm were Jammu & Kashmir (99.8%), Nagaland (99.7%), Manipur (99.5%), Mizoram (99.2%) and Meghalaya (98.4%).
- The aspirational states and UTs with lowest household coverage with iodine content more than and equal to 15 ppm were Tamil Nadu (61.9%), Andhra Pradesh (63.9%), Rajasthan (65.5%), Odisha (65.8%), Jharkhand (68.8%) and Puducherry (69.9%).
- The percentage of households consuming refined salt was 82.1.

The state and UT wise household coverage of iodised salt has been presented in the map below:

Household coverage of iodised salt (≥ 15 ppm)² by state/UT (%)



- At the national level, the median Urinary Iodine Concentration (UIC) for pregnant women was 173.4 µg/L, for lactating women was 172.8 µg/L and for non-pregnant non-lactating women it was 178.0 µg/L. Across place of residence, the median UIC in urban areas was slightly higher (180.2 µg/L) as compared to rural areas (168.9 µg/L).
- Across place of residence, the median UIC in urban areas for all three respondent groups was slightly higher as compared to rural areas.
- More than half of the respondents (55%) reportedly had heard about iodised salt and 61.4 per cent of them mentioned prevention of goitre as the primary benefit.
- Among 55 per cent of the respondents who had heard about iodised salt, major identifiers reported by them were the word 'iodised' (55.3%), brand

2. The recommended daily intake of iodine for adolescents (above 12 years) and adults is 150 µg. Considering an average per capita daily salt consumption of 10 grams, the salt standard is fixed at 15 parts per million (ppm) or 150 mg per 1 kg of iodised salt (https://www.who.int/nutrition/publications/en/idd_assessment_monitoring_elimination.pdf).

name (48.5%), information from the shopkeeper (21.1%) and the Smiling Sun logo (20.5%).

- Awareness about iodised salt among urban respondents (62.2%) was higher than rural respondents (50.5%).
- The head of the household (51.8%) was found to be the primary decision maker for purchasing cooking salt.
- About 74.4% of the respondents found electronic mass media (TV and Radio) and 41.1% identified formal interpersonal communication channels as major sources of information on iodised salt.
- The two most important factors in decision making for purchase of cooking salt were found to be price (41%) and brand (40.9%).

Based on this survey findings, the report suggests the following way forward:

- The data shows that 13 states/UTs have achieved USI and so it is recommended that the successful strategies from these states could be contextualized and replicated in the remaining states/UTs to achieve and sustain USI nationally.
- Enforcement and monitoring of iodised salt quality needs to be prioritised by government agencies at state level.
- Inclusion of estimation Urinary Iodine Concentration (UIC) at national surveys, as an indicator to report the iodine status of the population along with household coverage of adequately iodised salt tested through iodometric titration could be considered by Ministry of Health and Family Welfare, GoI.
- The survey also reveals that a larger proportion of refined salt is adequately iodised and hence efforts are needed to promote production and consumption of refined iodised salt.

It is envisaged that this survey will be quite useful for researchers, programmers and policy makers to engage in further discussions to craft a road map to achieve universal salt iodisation. The evidence from this survey could be taken into consideration, while treading the path towards reaching the last mile to achieve and sustain USI in the country.



CHAPTER - 1

INTRODUCTION



Background of the survey

Vitamin and mineral deficiencies have a significant impact on human welfare and the economic development of communities and nations. These deficiencies can lead to serious health problems, including reduced resistance to infectious disease, blindness, lethargy, reduced learning capacity, mental retardation and, in some cases, to death. Globally, the three deficiencies of greatest public health significance are those of vitamin A, iron and iodine. These nutrients are referred to as micronutrients because the body needs them in minute quantities for growth, development and maintenance³.

Iodine is an element that is needed for the production of thyroid hormone, which in turn regulates many functions in the body, including the development of the brain⁴. The body does not synthesis iodine, so it is an essential part of our diet. If we do not have enough iodine in our body, our body can not synthesis enough thyroid hormone. Thus, iodine deficiency can lead to enlargement of the thyroid glands (hypothyroidism) and mental retardation, especially in infants and children whose mothers were iodine deficient during pregnancy⁵.

Iodine Deficiency Disorders (IDD) are due to deficiency in iodine in the soil. Many of consequences of IDD are invisible and irreversible but at the same time preventable. Worldwide, iodine deficiency is the single most important preventable cause of brain damage⁶. Iodine deficiency is a significant public health problem for many populations throughout the world, particularly for pregnant women and young children. Disorders caused by severe iodine deficiency before or during pregnancy, ranging from decreased fertility to trophoblastic or embryonic damage, miscarriage or increased infant mortality, cretinism, and psychomotor defects. Severe deficiency causes both maternal and foetal hypothyroidism and is associated with poor obstetric outcomes like spontaneous abortion, prematurity, stillbirth or congenital anomalies.

3. http://www.fao.org/ag/agn/nutrition/household_micronutrients_en.stm

4. Institute of Medicine (US) Panel on Micronutrients. *Dietary Reference Intakes for Vitamin A, Vitamin K, Arsenic, Boron, Chromium, Copper, Iodine, Iron, Manganese, Molybdenum, Nickel, Silicon, Vanadium, and Zinc*. Washington (DC): National Academies Press (US); 2001. Chapter 8, Iodine. Available from: <https://www.ncbi.nlm.nih.gov/books/NBK222323/>

5. American Thyroid Association (2007) Retrieved on 15 July, 2011 from www.thyroid.org

6. Assessment of iodine deficiency disorders and monitoring their elimination: a guide for programme managers, World Health Organization; 2007. ICCIDD, UNICEF, WHO. Geneva.

Globally two billion people are at risk of iodine deficiency disorders due to insufficient iodine intake⁷. WHO, UNICEF, and ICCIDD⁸ recommend that the daily intake of iodine should be as follows:

TABLE 1.1: WHO RECOMMENDED DAILY INTAKE OF IODINE

Population group	Daily dose of iodine intake (µg/day)
<i>Pregnant women</i>	250
<i>Lactating women</i>	250
<i>Women of reproductive age (15-49 years)</i>	150
<i>Children <2 years</i>	90

Universal Salt Iodisation (USI) is the main strategy to eliminate iodine deficiency. Over the past decades, national salt iodisation programs have been introduced and scaled up in many countries. The basic concept of USI implies that all edible salt (all salt for human consumption and animal) should be iodised. However, to be fully effective in correcting iodine deficiency, salt must not only reach the entire affected population—in particular those groups that are the most susceptible; pregnant women and young children—but it also needs to be adequately iodised.

The programming and monitoring of iodine reach have focused mainly on iodised salt purchased and consumed within households and iodine status has been measured through urinary iodine concentration (UIC) in school-age children⁹.

In India, according to NFHS-3, 2005-06, 76.1 per cent of households reported the availability of any iodised salt tested by using STKs. The National Iodine and Salt Intake (NISI), 2014-15 reported the household coverage of iodised salt (any iodine) was 92.0 per cent as tested by iodometric titration, while the coverage of households with adequately iodised salt (iodine \geq 15 ppm) was 78.1 per cent. Fourteen per cent of households were using inadequately iodised salt (5 to 14.9 ppm), while the remaining 8.0 per cent of households were using salt that had no iodine (< 5 ppm). NFHS-4, 2015-16, revealed that 93.1 per cent of the households had the availability of iodised salt, tested through Spot Test Kits (STKs).

Realising the magnitude of the problem, India was among one of the first countries in the world to initiate a public health programme on salt iodisation

7. de Benoist B, McLean E, Andersson M, Rogers L. Iodine deficiency in 2007: global progress since 2003. *Food Nutr Bull.* 2008; 29:195–202

8. WHO, UNICEF, ICCIDD. Recommended iodine levels in salt and guidelines for monitoring their adequacy and effectiveness. Geneva, World Health Organization, 1996 (unpublished document WHO/NUT/96.13; available on request from Department of Nutrition for Health and Development, World Health Organization, 1211 Geneva 27, Switzerland)

9. http://ign.org/newsletter/idd_nov12_iodine_nutrition_landscape_analysis.pdf

to address iodine deficiency disorders, which dates back to the '50s. As one of the most successful initiatives, the government of India established The National Goitre Control Programme (NGCP) in 1962 with the objectives to supplement the intake of iodine to the entire population. This program was revised to the National Iodine Deficiency Disorder Program (NIDDCP) in 1992. As per the surveys conducted by the Directorate General of Health Services, Indian Council of Medical Research, health institutions and the state health directorates, out of 414 districts surveyed in all the 29 states and 7 UTs, 337 districts are endemic, i.e. where the prevalence of IDD is more than 5.0 per cent¹⁰. There is an increased demand for iodine during pregnancy and lactation; thus, there is a need for additional iodine in these high-risk population to prevent iodine deficiency and its associated disorders. Hence, this survey was undertaken to determine the iodine status at the household level and especially among all women of reproductive age (15 to 49 years) including pregnant women, lactating women and non-pregnant non-lactating women in India at the state/UT level.

The rationale of the survey

The rationale for this survey was to generate national and sub-national level representative data on iodine content in cooking salt and iodine status of the population as a measure of the performance of the salt iodisation programme in India and to ensure that the whole population in India is protected from IDD.

Survey objectives¹¹

The primary objective of the survey was to

- Estimate the coverage of adequately iodised salt at the household level.

The secondary objectives of the survey were to

- Assess the iodine status among pregnant women (PW), lactating women (LW) with an infant less than six months, and non-pregnant non-lactating women (NPNLW) of reproductive age (15 to 49 years) by measuring their median UIC levels;
- Assess the knowledge and practices regarding IDD and iodised salt amongst respondents;
- Use the survey findings for improvement in iodine deficiency disorder control program.

10. <http://www.saltcomindia.gov.in/>

11. At the time, the survey was conducted, India comprised of 29 states, one national capital territory of Delhi and six union territories. According to the Gazette of India notification dated, August 9, 2019 of The Jammu and Kashmir Reorganization Act, 2019, two union territories of Jammu and Kashmir and Ladakh have been formed, which makes the tally to 28 states, one national capital territory of Delhi and eight union territories.

Respondent groups

The urine sample was collected from women of reproductive age (15 to 49 years) as they were considered as a proxy for the population, with special focus on the pregnant and lactating women considering their additional requirement for iodine. Salt samples were collected from the household of the selected respondent group.

The target population groups are:

1. Pregnant women (PW)
2. Lactating women (LW) (with an infant less than six months)
3. Non-Pregnant Non-Lactating Women (NPNLW)

Information regarding demographic and socio-economic characteristics, knowledge about iodised salt and IDD were obtained in a structured questionnaire administered to the adult member¹² of the target population households as per the following order of preferences:

1. **Preference 1:** Wife of the head of household or female head of the household
2. **Preference 2:** Other adult female member having decision making capacity
3. **Preference 3:** Any adult member in the household

Geographic coverage

The survey covered all 29 states and 7 UTs in India (both rural and urban areas). All the states/UTs were categorised into 6 zones, i.e. South, West, Centre, North, East and North-East according to the state's reorganisation act, 1956.

12. Adult member: Member of the HH who is 18 years of age and above

India - Zonal Map



TABLE 1.2: ZONE¹³ WISE LIST OF STATES/UTs

Zones	North	Central	East	North-East	West	South
States/UTs	1. Chandigarh 2. Delhi 3. Haryana 4. Himachal Pradesh 5. Jammu & Kashmir 6. Punjab 7. Rajasthan	1. Chhattisgarh 2. Madhya Pradesh 3. Uttar Pradesh 4. Uttarakhand	1. Bihar 2. Jharkhand 3. Odisha 4. West Bengal	1. Arunachal Pradesh 2. Assam 3. Manipur 4. Meghalaya 5. Mizoram 6. Nagaland 7. Sikkim 8. Tripura	1. Dadra & Nagar Haveli 2. Daman & Diu 3. Goa 4. Gujarat 5. Maharashtra	1. Andaman & Nicobar Islands 2. Andhra Pradesh 3. Karnataka 4. Kerala 5. Lakshadweep 6. Puducherry 7. Tamil Nadu 8. Telangana

13. The states are categorized into zones according to the state Reorganisation Act, 1956 (<https://mha.gov.in/zonal-council>)

CHAPTER - 2

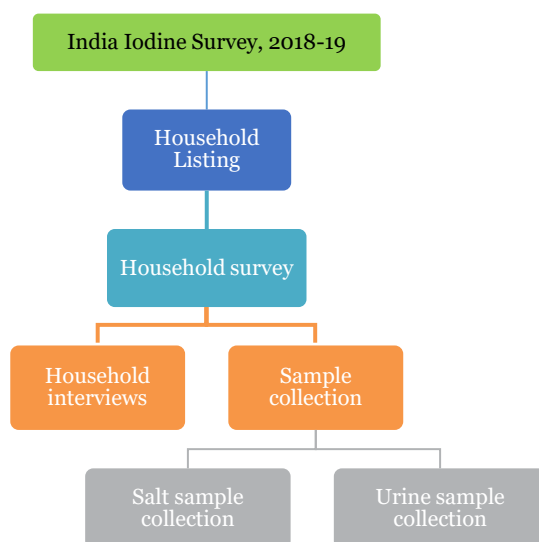
METHODOLOGY



Study design

A cross-sectional study design using quantitative data collection method was adopted to conduct the survey. The quantitative method comprised of (1) household listing exercise and (2) sample household survey which were conducted on Computer Assisted Personal Interviewing (CAPI) platform. In addition to the interview, salt samples were collected from the sampled households, and urine samples were collected from selected eligible women within the same household.

Figure 2.1: Research components



Sample design

The current survey was designed to generate representative information on survey parameters at the state/ UT level, which includes both rural and urban areas within the state/UT.

Sample size estimation

The sample size was estimated using the following formula:

$$N = Deff \times \frac{Z_{1-\alpha/2}^2}{d^2} \times p \times (1 - p)$$

Where,

N refers to the minimum sample size

Deff refers to design effect, considered to be 2.0

$Z_{1-\alpha/2}$ refers to the critical value of Z at the desired confidence level (at 95% confidence level the value is 1.96)

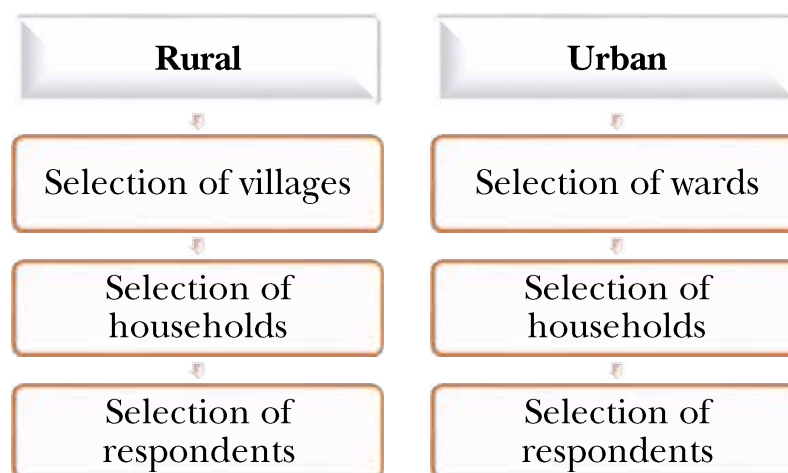
p is the expected proportion of key indicator in the population (proportion of households with adequately iodised (≥ 15 ppm) salt measured at 0.781 as per the *National Iodine and Salt Intake (NISI) Survey, 2014-15*)

d refers to the absolute margin of error or precision, considered to be 0.05

By using the above assumptions and a probable response rate of 90% (considering a niche target group), the sample size comes out to be 584 which rounded up to 600 (for operational feasibility) in each state. In order to obtain adequate sample sizes of women at the national level for the three categories of women, from whom urine samples were collected, the sample size was allocated equally into three categories of women; namely, pregnant women (PW), lactating women (LW) (with an infant less than six months), and non-pregnant non-lactating women (NPNLW) (200 women in each category in each state/UT to allow for at least 900 women in a zone¹⁴) to be collected from across 20 primary sampling units in each state/UT and overall 21,600 women across all 29 states and 7 UTs in India.

Sampling methodology

A multi-stage stratified cluster sampling methodology was used in rural and urban areas for all states/UTs. The census villages in rural areas and census wards in urban areas were considered as Primary Sampling Units (PSUs), and households constituted the Secondary Sampling Units (SSUs).



Selection of wards and villages in rural and urban areas

In each of the 36 states/UTs, a separate sampling frame was constituted for rural and urban areas. The PSUs were selected using Probability Proportional to Size (PPS) sampling technique with in urban and rural areas separately. A minimum of 10per cent buffer was sampled in each state (both for rural and urban) except Lakshadweep¹⁵ due to less than twenty clusters in this UT.

14. For the secondary objective, to obtain a sample size for an assumed 50% women with urinary iodine below the median UIC of 158µg/l according to the National Iodine and Salt Intake Survey (NISI, 2014-15), a sample size of 854 rounded up to 900 per domain was estimated with a ±5% absolute precision, adjusted for a design effect of 2.0 to account for multi-stage cluster sampling design and incremented for a probable response rate of 90%. Hence, the data on median urinary iodine concentration (MUIC) are being presented at the zonal level and not at the state level.

15. In Lakshadweep, all the PSUs were sampled as the population size of PSUs with household equal to or less than 50 was very low



Selection of households

A complete listing of the entire PSU was conducted if the size of the PSU was ≤ 150 households. PSUs with more than 150 households were segmented into 2 or more segments of equal size, and one segment was randomly selected with the help of CAPI for listing. All of the households falling under the segment were listed using the right-hand approach starting from the north-east corner of the segment, in case of shortfall, listing was continued in another segment until the required sample was achieved. i.e. 12 households with PW, 12 households with LW, 12 households with NPNLW. Post which, 10 mutually exclusive households from each category were selected using systematic random sampling from the sampling frame of 12 households in each category.

A snapshot of the quantitative samples is presented in the table below:

In total, 21,406 households were included across India covering interviews among 7,140 pregnant women, 7,142 lactating women and 7,124 non-pregnant non-lactating women.

Overall response rate was 83.3 per cent, which was found to be same for all three components of the survey i.e. respondent interviews, salt collection and urine collection because we had selected only those households who gave their consent for all three components.

TABLE 2.1: STATE-WISE NUMBER OF SAMPLES ACHIEVED AGAINST SAMPLES ALLOCATED

Zone	State	Sample allocation				
		Rural PSU	Urban PSU	PSU per state	Sample size per state/ UT	PW
Zone-1 (North zone)	Chandigarh	1	19	20	600	200
	Delhi	1	19	20	600	200
	Haryana	13	7	20	600	200
	Himachal Pradesh	18	2	20	600	200
	Jammu & Kashmir*	15	5	20	600	200
	Punjab	12	8	20	600	200
	Rajasthan	15	5	20	600	200
Zone-2 (Central zone)	Chhattisgarh	15	5	20	600	200
	Madhya Pradesh	14	6	20	600	200
	Uttar Pradesh	16	4	20	600	200
	Uttarakhand	14	6	20	600	200
Zone-3 (East zone)	Bihar	18	2	20	600	200
	Jharkhand	15	5	20	600	200
	Odisha	17	3	20	600	200
	West Bengal	14	6	20	600	200
Zone-4 (North-east zone)	Arunachal Pradesh	15	5	20	600	200
	Assam	17	3	20	600	200
	Manipur	14	6	20	600	200
	Meghalaya	16	4	20	600	200
	Mizoram	10	10	20	600	200
	Nagaland	14	6	20	600	200
	Sikkim	15	5	20	600	200
	Tripura	15	5	20	600	200
Zone-5 (West zone)	Dadra and Nagar Haveli	11	9	20	600	200
	Daman & Diu	5	15	20	600	200
	Goa	8	12	20	600	200
	Gujarat	11	9	20	600	200
	Maharashtra	11	9	20	600	200
Zone-6 (South zone)	Andaman & Nicobar Islands	12	8	20	600	200
	Andhra Pradesh	14	6	20	600	200
	Karnataka	12	8	20	600	200
	Kerala	10	10	20	600	200
	Lakshadweep	4	6	10	600	200
	Puducherry	6	14	20	600	200
	Tamil Nadu	10	10	20	600	200
	Telangana	12	8	20	600	200
All Zone	All India	440	270	710	21600	7200

Note: * Due to some unforeseen circumstances, beyond the control of the survey team, the data collection could only be completed in 12 out of 20 PSUs in Jammu & Kashmir state. These 12 PSUs belong to Kashmir area.

		Sample achieved						
LW	NPNLW	Rural PSU	Urban PSU	PSU per state	Sample size per state/ UT	PW	LW	NPNLW
200	200	1	19	20	600	200	200	200
200	200	1	19	20	611	200	210	201
200	200	13	7	20	601	201	200	200
200	200	18	2	20	600	200	200	200
200	200	8	4	12	355	120	117	118
200	200	12	8	20	600	200	200	200
200	200	15	5	20	604	200	204	200
200	200	15	5	20	600	200	200	200
200	200	14	6	20	603	202	201	200
200	200	16	4	20	600	200	200	200
200	200	14	6	20	600	200	200	200
200	200	18	2	20	600	200	200	200
200	200	15	5	20	600	200	200	200
200	200	17	3	20	601	201	200	200
200	200	14	6	20	600	200	200	200
200	200	15	5	20	603	202	200	201
200	200	17	3	20	601	200	200	201
200	200	14	6	20	600	200	200	200
200	200	16	4	20	600	200	200	200
200	200	10	10	20	605	202	203	200
200	200	14	6	20	600	200	200	200
200	200	15	5	20	600	200	200	200
200	200	15	5	20	608	202	204	202
200	200	11	9	20	601	200	201	200
200	200	5	15	20	600	200	200	200
200	200	8	12	20	601	200	201	200
200	200	11	9	20	600	200	200	200
200	200	11	9	20	600	200	200	200
200	200	12	8	20	600	200	200	200
200	200	14	6	20	600	200	200	200
200	200	12	8	20	601	201	200	200
200	200	10	10	20	601	201	200	200
200	200	4	6	10	600	200	200	200
200	200	6	14	20	600	200	200	200
200	200	10	10	20	610	208	201	201
200	200	12	8	20	600	200	200	200
7200	7200	433	269	702	21406	7140	7142	7124

Selection of respondents

The survey questionnaire was administered to any adult member of the target household and data were collected using the following tools.

Survey component	Tools for data collection	Target respondent
Household Listing	Household listing tool	Any adult member of the household
Main survey	<ol style="list-style-type: none"> 1. Structured household questionnaire 2. Consent forms for questionnaire 	<p>Preference 1: Wife of the head of household (HoH) or female head of the household</p> <p>Preference 2: Other adult female member having decision making capacity</p> <p>Preference 3: Any adult member in the household</p>
Sample collection	<ol style="list-style-type: none"> 1. Consent forms for salt and urine samples 2. Transmittal sheets for salt and urine sample 	<ol style="list-style-type: none"> 1. Salt sample collection from household 2. Urine sample collection from women in the age group of 15 to 49 years and with below mentioned status <ol style="list-style-type: none"> I. Pregnant Women (PW) II. Lactating Women (LW) (with infant less than six months) III. Non-Pregnant and Non-Lactating Women (NPNLW)

In case there were more-than-one eligible women in the same category (PW, LW or NPNLW) available in the household, the interviewer used a Kish Grid table to choose only one eligible woman for urine sample collection.

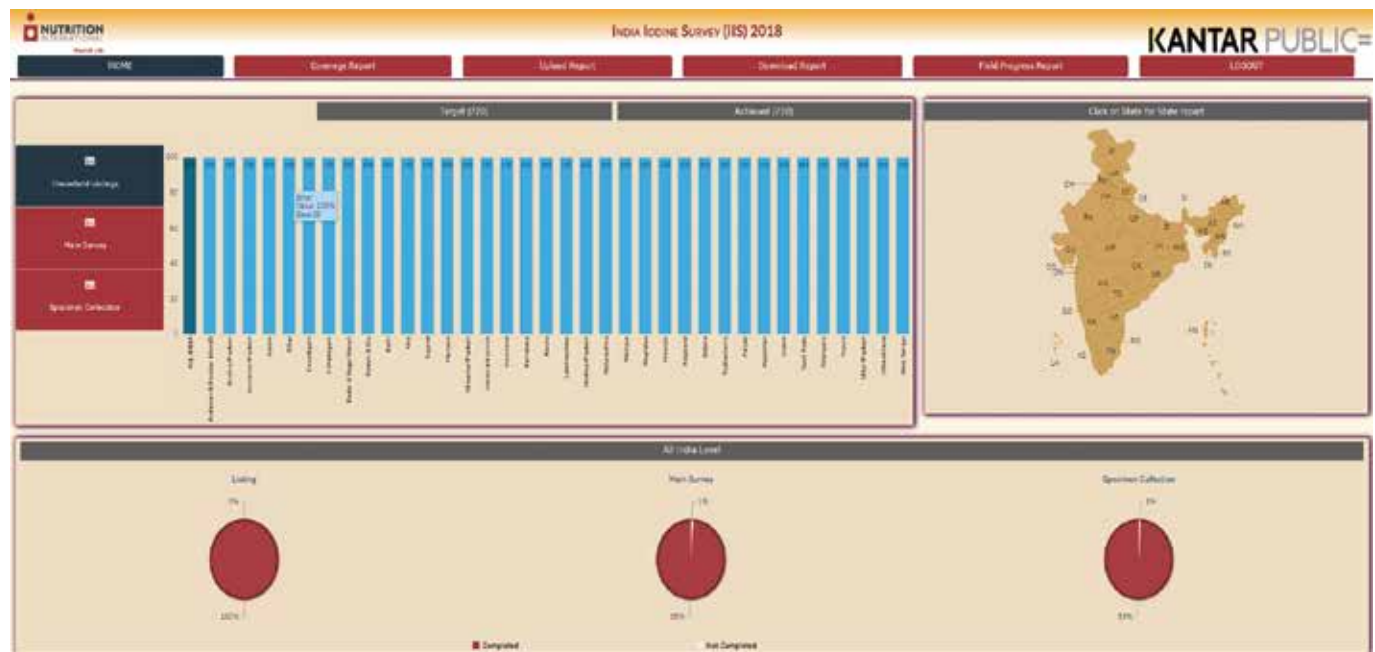
Implementation of the survey

Preparatory activities

All the research tools, including questionnaire, consent forms, transmittal sheet and unique ID stickers for salt and urine samples, were developed by Kantar in consultation with Nutrition International. These tools were pre-tested in one PSU in Hindi speaking state (Haryana) using Pen and Paper Assisted Personal Interviewing (PAPI) platform as per complete process planned for the original fieldwork to check the correctness of survey tools. Based on the feedback received from the pre-test, modifications were made in the tools. The finalised tools were then translated into the local vernaculars for the respective state and were independently back translated.

Post finalisation of the tools, the CAPI programming was initiated. Post-development of tools in CAPI, a pre-test was then conducted in one PSU in the non-Hindi speaking state (West Bengal) on CAPI to ensure the feasibility of the platform. In parallel, during the process of CAPI development, a dashboard was developed to monitor real-time survey progress through a dedicated server as shown in Figure 2.2.

Figure 2.2: Snapshot of India Iodine Survey dashboard



Data collection and management

Both listing and main survey were conducted using CAPI to ensure real-time data access and data quality. Data for survey was collected in two steps, first was the household listing exercise, and the second was the main survey. During main survey first, the target respondents for both the components, i.e. household questionnaire and sample collection were identified, and consent was obtained separately, and the interview was conducted followed by the collection of salt and urine samples. Fieldwork was conducted in two phases, wherein Phase I, complete fieldwork was executed in Haryana as a pilot state and in Phase II, fieldwork was initiated in all remaining 28 states and 7 UTs.

Iodine estimation from salt and urine sample

In each surveyed household, at least 50 gm of cooking salt was collected along with 20-25 ml urine sample from either PW, LW or NPNLW for which the particular household was sampled.

The following steps were carried out for the purpose of sample collection:

Salt sample collection:

- Requesting the respondent to bring salt which was used for cooking the last meal and to avoid touching the inside of the zip pouch to decrease the risk of unrecognized iodine contamination.
- Pouring the salt in sterile dry zipped pouch using a dry spoon.
- Label the specimen packet properly with the unique identification code allotted to that respondent.





Urine sample collection

- The urine sample donors were requested to collect 20-25 ml urine (half-filled container) in a sterile plastic graduated container with air tight lid (50 ml) by directing the donor to pass urine for a few seconds, and then to hold the cup in the urine stream for a few seconds to catch a midstream urine sample to decrease the risk of contamination from organisms living in the urethra;
- The donor was directed to avoid touching the inside or rim of the plastic cup with the skin of the hands, legs or external genitalia to decrease the risk of contamination from skin organisms;
- After receiving urine sample from the donor, sample collector added few drops (2ml per container) of Toluene (A.R. Grade) in the specimen wearing gloves, the container was then placed in a zippered bag, which was labelled properly with the unique identification code allotted to that respondent.

Further, the salt and urine samples were transported to ICCIDD laboratory in Delhi for testing the iodine content in salt and urine samples from each PSU from each state/UT.



The iodine content of iodised salt samples was measured through iodometric titration, as described by DeMaeyer, Lowenstein, and Thilly, (1979). Urinary iodine was measured using the Sandell-Kolthoff reaction. Details for each are included in Appendix 3.

Data reporting

Real-time progress of fieldwork along with the sample achievement status, was monitored through the designated dashboard. In addition to monitoring, from the designated dashboard, both listing and main survey raw data was available for download on real-time basis. Post completion of fieldwork raw data was then checked for outliers, which was validated with the field teams, and necessary cleaning was done through a systematic process. Unique ID (UID) codes were

used to identify and map the household in the survey with the labelled salt and urine sample results. Status of samples collected, dispatched and received by laboratory, was also monitored through the dashboard.

Data analysis

As a part of data analysis, post completion of data collection, the complete data set was downloaded from the server and checked and cleaned for key indicators and the final cleaned data set was used for analysis. A detailed chapter and analysis plan were further developed and finalised. The complete data set was converted into SPSS format (version 23.0) with variables labels and value labels as per questionnaire, which was further used to populate the tables specified in the analysis plan. The data was analysed using SPSS software. SPSS syntax was developed to generate the tables by creating a separate syntax file for each tab in the analysis plan.

In order to account for clustering, weighting, the Complex Samples (CS) Module in SPSS was used to calculate 95% confidence intervals of percentages for the weighted data of iodine level in salt. The CSA (Complex Samples Analysis) plan file was developed to include the strata, the PSU, the probability of selection for the PSU, the probability of selection for a household within the PSU, and the weights adjusted for non-response. Using complex samples procedure, 95% confidence intervals were computed for varying levels of iodine in salt samples. The sampling errors for selected indicated were also computed and presented.

All results produced were based on weighted data. Cross-tabulations and frequencies were also generated. The median was calculated for the urinary iodine concentration. When presenting results, cells where the un-weighted count was less than 25 responses were presented by an asterisk (*); cells where

the un-weighted count was between 25 and 49 were presented in parenthesis, e.g. () following the Demographic and Health Surveys convention.

Ethical consideration, Institutional Review Board (IRB) and informed consent

Ethical clearance for the survey was obtained from the SRI-IRB (Institutional Review Board of Social Research Institute). Written/informed consents were obtained from all the participants in the local language. Participation of respondents was limited to answering a set of standardised questions, and to providing salt samples and urine samples only upon providing their voluntary consent. Survey and sample collection were done only from consenting respondents. Ethical clearance for third party monitoring was also obtained by Kantar, where in Karvy Insights had been selected as third party for the survey monitoring.

No respondent at any level was exposed to any risk, and no direct benefits were provided to the respondents. However, in lieu of collecting more than 50 grams of the salt sample, a compensation of INR 10/- was provided to all respondents as cost of salt which they would have paid at the time of purchase of salt from the retailer.

It was ensured that the information obtained was kept confidential for which all personal identifiers were removed from survey and biological data. The data was analysed at the administrative unit level (state and union territory) only. No personal identifiers were used for mapping sample result with data; instead unique ID was used for this purpose. No personal identification details were shared with Karvy Insights for third party monitoring. It was ensured that respondents were not re-contacted, post-interview and sample collection either for internal or external validation, as data quality was ensured during data collection process.

Quality and reliability of data

Quality assurance was a proactive and continuous process of systematic monitoring and evaluation of the various aspects of a project to maximise the standards of quality attained by the survey process. Quality checks were carried out on all the key-activities of the project-recruitments, field training, data collection, team movement, data compilation etc.

Internal monitoring mechanism

A three-tier monitoring structure was followed throughout the survey. The quality control plan envisaged quality check mechanisms at the following stages:

a. Inputs stage

Quality check mechanisms were placed right from recruitment to CAPI application testing followed by trainings by ensuring the standardisation and consistency during the field trainings.

b. Data collection stage

The quality at the data collection stage was primarily determined by coverage of PSU, comprehensiveness of coverage, the correctness of information and adherence to protocol in each of the phases of data collection. .

- Supervisors conducted accompaniment/spot checks in 15 per cent of the interviews covering all interviewers;
- State field controllers conducted targeted backchecks and accompanied checks in 5 per cent of the PSUs;
- In case any issue was observed during supervisory accompaniment/spot checks related to data quality, immediately a debriefing session was organised, and all the doubts were clarified.

The dashboard developed for the survey helped maintain transparency of the data collection process monitoring.

c. Data validation

A robust data monitoring and validation system were placed at various levels to ensure the quality of data being collected throughout the survey.

- IT manager ensured that a backup of the uploaded data was taken regularly
- IT manager maintained a clean copy of all raw data uploaded in case of need to return after cleaning
- Server team cleaned the data/outlier based on variance report and converted it into SPSS.

External monitoring mechanism

The external monitoring mechanism is a process by which the quality of data is ensured by an external independent agency. Karvy Insights was appointed as an external independent agency for this study to independently validate the reliability of data collected within the lines of ethical considerations, where the team observed the data collection process in about 86.0 per cent of all PSUs covered without interfering the interview process.



Challenges faced during data collection

1. During the early stages of the survey, post-selection of households for the main survey within a PSU, teams faced difficulty in conducting interviews, due to unavailability of either the respondent or the sample donor and/or refusals. Therefore, during phase I and phase II fieldwork, in case of shortfall/unavailability/refusal in any target category, field teams continued the listing exercise in the adjacent segment or in linking village till the shortfall was covered which further lead to change in the listing method which required an additional 20 per cent households to be covered with eligible respondents and advance appointment/intimation was taken with households for main survey.
2. In phase I, the team-maintained log sheets in hardcopies to record eligible household and manually checked whether or not these households were mutually exclusive. Since it was a manual process, there were chances of calculation errors while calculating mutually exclusive households. Hence in phase II, the calculation was made available in the CAPI application and was done with no human intervention. An automated programme was used at the backend for a sampling of household and data was pushed back for the main survey teams from the server itself.



3. The problem of attrition was faced during phase I fieldwork in Haryana due to which the duration of actual fieldwork increased than planned. Therefore, while planning fieldwork for phase II, additional teams were recruited and trained in each state to take care of dropouts and avoid any delay in fieldwork caused by it.
4. All salt and urine samples were tested in Delhi based laboratory- Association for Indian Coalition for the Control of Iodine Deficiency Disorders (ICCIDD). Therefore, both salt and urine samples from each state/UT had to be submitted to the laboratory within a week from the date of collection. This resulted in logistic constraints, which led to some delay in sample submission.



CHAPTER - 3

DEMOGRAPHIC AND SOCIO-ECONOMIC PROFILE





This chapter presents information on the demographic and socio-economic characteristics of the survey respondent and household covered in this survey.

The sampled household population covered in this survey was proportionate to the rural and urban population of the respective states and UTs. 61.3 per cent were from rural areas, while 38.7 per cent were from urban areas across India. In total 21,406, households were covered across all 29 states, and 7 UTs. Among the surveyed households in urban areas, 62.8 per cent households were from the two highest (fourth and highest) wealth quintiles. Whereas, more than half of the rural households (53.3%), by contrast, were from the two lowest (second and lowest) wealth quintiles.

Demographic and socio-economic characteristics of the survey respondents

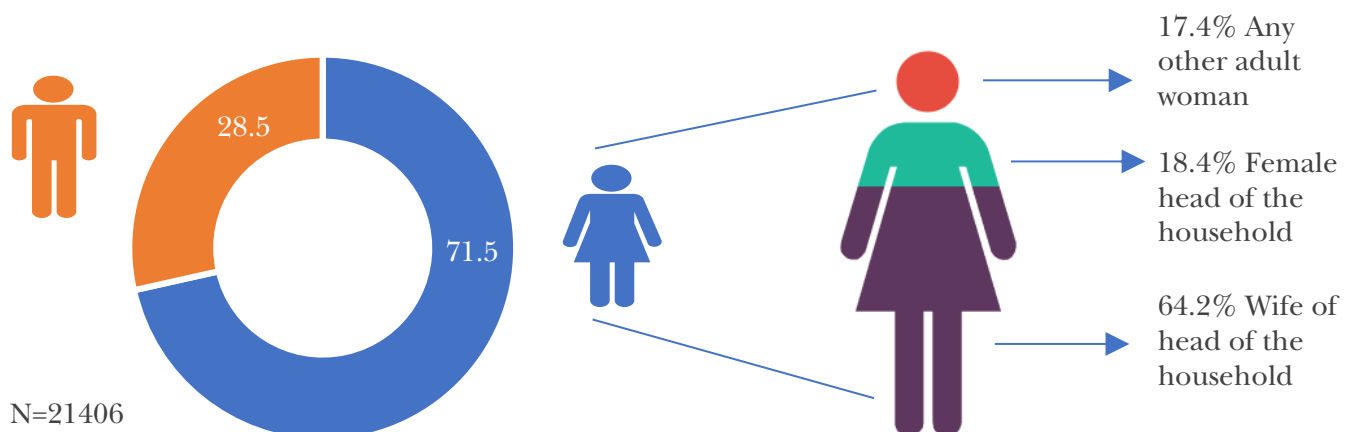
As mentioned in earlier chapters, as per the protocol of the survey the respondent in a selected household was to be the person, most likely to know about the demographic, socio-economic characteristics of the households. They would also have knowledge pertaining to iodised salt and the type of salt used for cooking, hence priority was given to the female adult member of the household.

As depicted in figure 3.1, out of the total households surveyed, 71.5 per cent of the respondents were female adult member (either wife of the head of household (HoH) or, female head of the household or any other adult female member having decision making capacity) and 28.5 per cent were an adult member of the household (i.e. male member). The distribution of respondents was similar across rural and urban areas across all states/UTs. While the urine sample across all households were collected from women of reproductive age (15 to 49 years), which was then further classified into households with pregnant women (PW), lactating women (LW) (with an infant less than six months) and non-pregnant non-lactating women (NPNLW).

Age Distribution

The age distribution shows the majority of the respondents (62.7%) covered in the survey were from the age group of 18- 24 years. The age distribution of the respondents was similar in the rural and urban areas across all states/UTs.

Figure 3.1: Sex of the respondent and type of respondent (%)



Similarly, in the case of the sample donor (i.e. women in the reproductive ages 15-49 years) majority (61.1%) were covered from the age group of 18-24 years.

Marital status of the respondent

Overall, 90.9 per cent of the respondents were married at the time of the survey, while only 9.1 per cent of the respondents were unmarried.

Education status of the respondent

The education status was determined for all the respondents covered in the survey. Across all states/ UTs, nearly 75.1 per cent of the respondents (rural 70.9% and urban 81.7%) had received formal education, i.e. attended schooling. The percentage of respondents who received no schooling was 24.9 per cent at the national level, while the percentage of respondents with no schooling was significantly higher in rural (29.1%) than the urban (18.2%) areas. Among the respondents covered in the survey, 34.9 per cent completed schooling up to 10th class; 22.9 per cent received ≥ 12 years of formal education. The proportion of respondents who have completed formal education of ≥ 12 years of schooling and above were found to be higher in the urban areas (27.9%) as compared to the rural areas (19.7%).

Figure 3.2: Age distribution of the respondent (%)

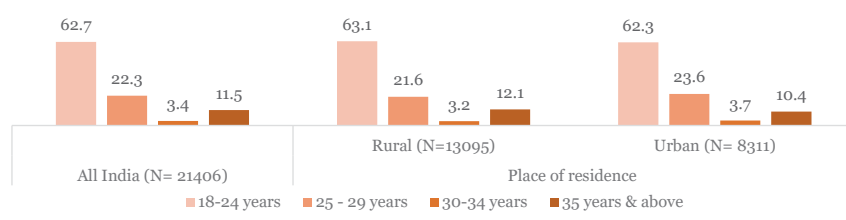


Figure 3.3: Age distribution of the urine sample donor (%)

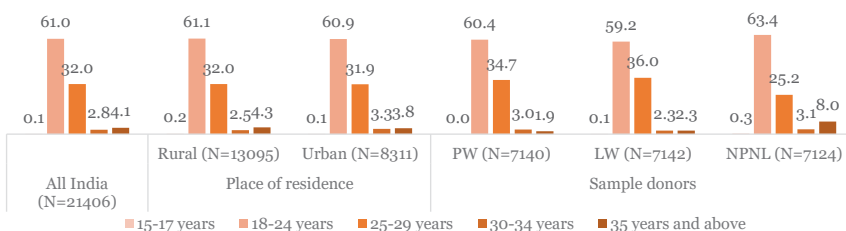


Figure 3.4: Marital status of the respondent (%)

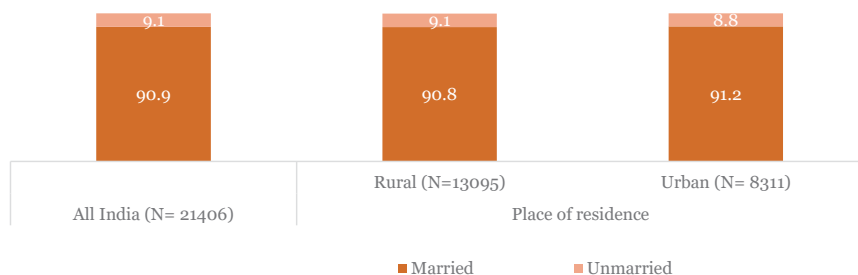
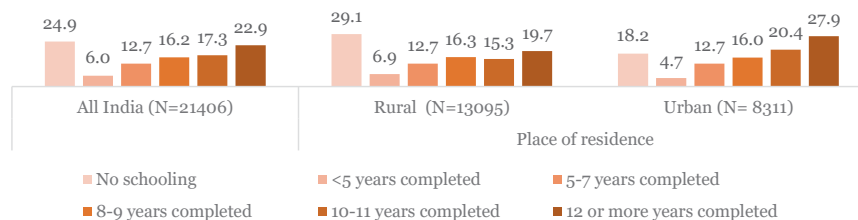


Figure 3.5: Education status of the respondent (%)



Household profile

Wealth quintile

To compute the wealth quintile, households were given scores based on the number and kinds of household amenities they own, ranging from a television to a bicycle or car, and household characteristics such as source of drinking water, toilet facilities, and flooring materials. These scores were derived using principal component factor analysis. National wealth quintiles were compiled by assigning the household score and then dividing the distribution into five equal categories, each with 20 per cent of the population, which is similar to how it has been calculated in National Family Health Survey (NFHS).

Among the surveyed households, the highest quintile households were concentrated in urban areas. 62.8 per cent of the urban households were in the two highest wealth quintiles, while just 5.6 per cent of the households fall under the lowest quintile. By contrast, more than half of the rural population (53.3%) was from the two lowest wealth quintiles, and only 26.4 per cent of the households fall under the two highest wealth quintiles.

Access to improved drinking water sources and various sources of drinking water

It was observed that across all states/UTs almost all urban households (96.5%) and rural households (94.0%) have access to improved drinking water sources which includes piped water, public taps, standpipes, tube wells, boreholes, protected dug wells and springs, rainwater, and community reverse osmosis (RO) plants.

The main sources of drinking water for urban households were water piped into their dwelling (40.9%), tube wells or boreholes (21.1%) and public taps or standpipes (17.1%). More than one-third of the rural households rely on tube wells or boreholes (35.8%), followed by public taps or standpipes (23.5%) and water piped into their dwelling (18.9%). In rural areas, 62.2 per cent of households have a water source located in their dwelling/yard/plot, compared with 75.2 per cent in urban areas.



Usage of improved sanitation and various types of toilets

More than two-third of the households (76.0%) across all states/ UTs were using improved sanitation (i.e. toilet of the following types: flush/pour flush toilets to piped sewer systems, septic tanks, and pit latrines; ventilated improved pit (VIP)/biogas latrines; pit latrines with slabs; and twin pit/composting toilets), as depicted in figure 3.8, the proportion of households using improved sanitation in urban areas was higher than rural areas.

Among households using improved sanitation, only 14.6 per cent of the households were found to be sharing the toilet facility with others, while the rest 85.4 per cent of the households do not share the toilet facility with others. One-sixth (16.8%) of the total households do not use any toilet facility.

Access to health facilities

The survey also tried to understand household's access to the health facility. The below graph depicts that overall, 56.1 per cent of the households usually visit a public health facility while 43.9 per cent visit a private health facility. It was found to be similar across rural and urban at the national level, as shown in figure 3.9.

Health schemes/ insurance coverage

Less than one-sixth (13.6%) of the households have at least one usual member (i.e. any member who has been living in the household for the past 30 days), who was covered under health

Figure 3.6: Household wealth quintile by residence (%)

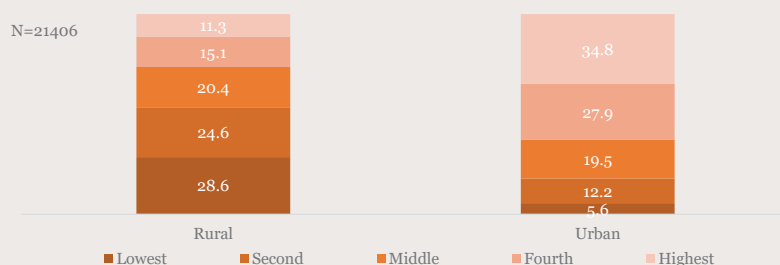


Figure 3.7: Access to improved drinking water by residence (%)

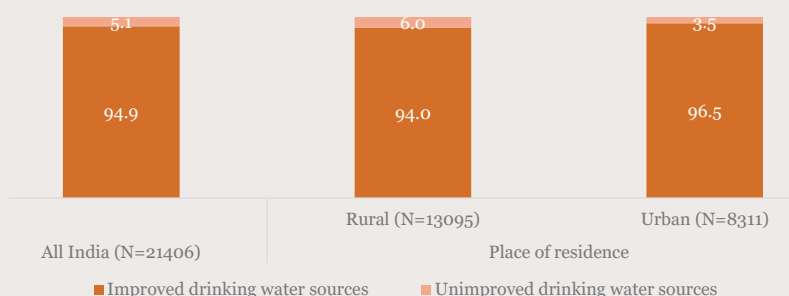


Figure 3.8: Access to improved sanitation by residence (%)

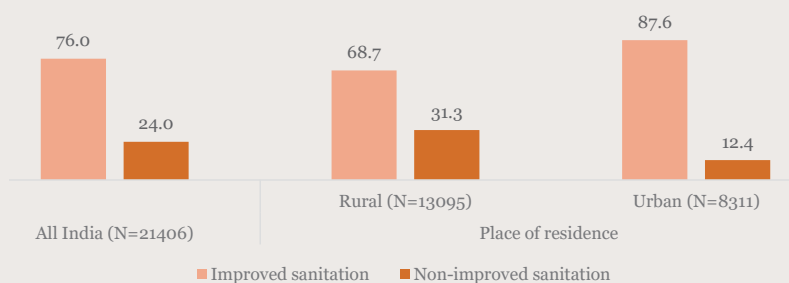


Figure 3.9: Access to health facilities by residence (%)

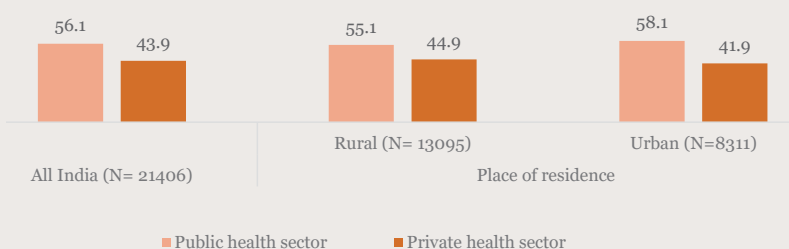


Figure 3.10: Household covered under any health insurance/scheme (%)

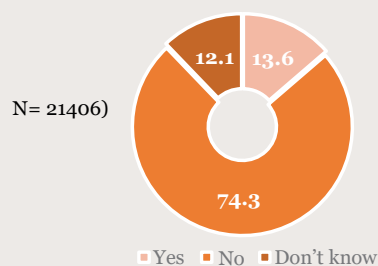


Figure 3.11: Access to health scheme or health insurance by residence (%)

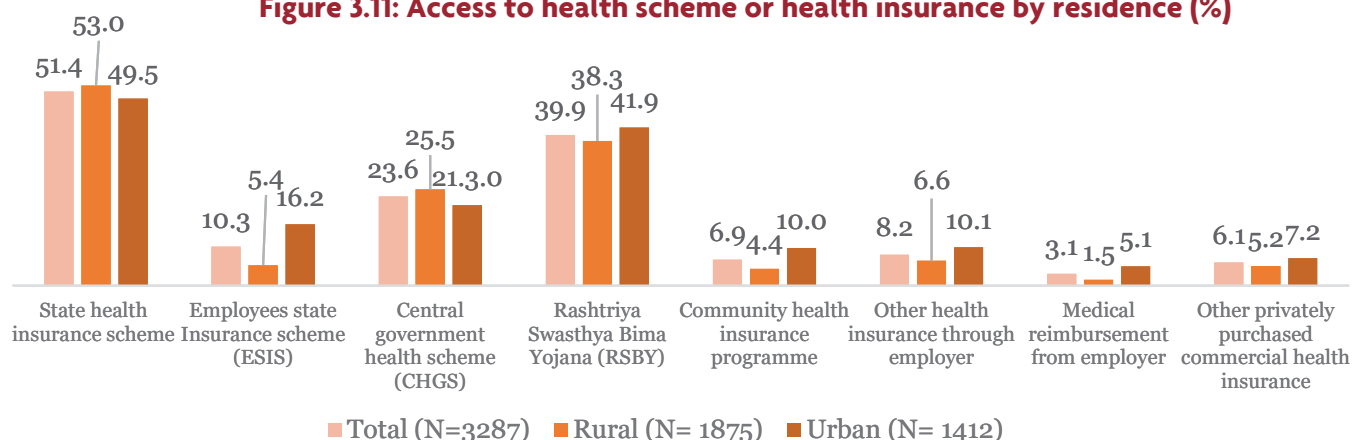


Figure 3.12: Households having ration card (%)

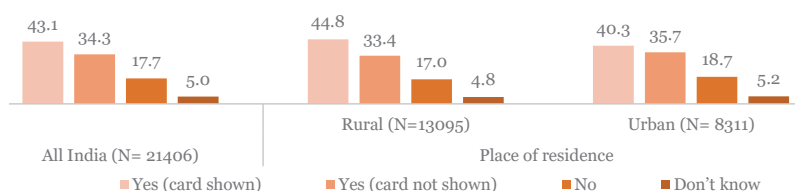


Figure 3.13: Category of ration card (%)

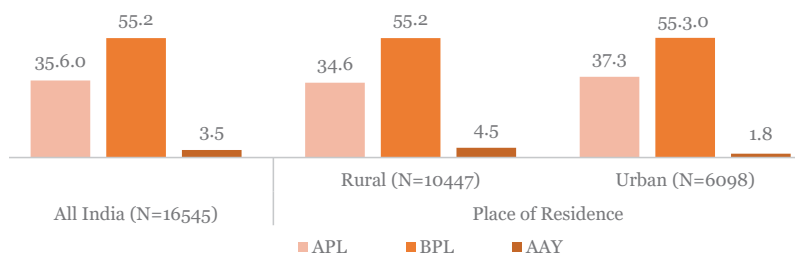
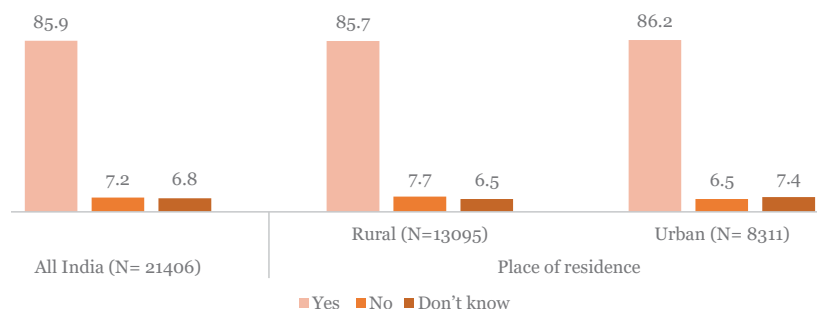


Figure 3.14: Households having a bank /post office account (%)



insurance or health scheme across all states/UTs, while it was slightly higher among urban households (15.7%) compare to rural households (12.2%).

Overall, among those households having some coverage under health insurance or health scheme, the most availed one was state health insurance scheme (51.4%) followed by Rashtriya Swasthya Bima Yojana (RSBY) at 39.9 per cent.

Availability of ration card

More than three fourth of the surveyed households (77.4%) have a ration card. Among the households having ration cards, more than half (55.2%) of those have BPL ration card, 35.6 per cent of the households have APL ration card while only 3.5 per cent have AAY ration card.

Access to bank account / Post office account

Majority of the surveyed households (85.9%) have at least one usual member having a bank account or a post office account. More than half (55.0%) of the households where both male and female members had a bank or post

office account, while about a quarter of the households had only the male member with a bank or post office account and close to one-tenth household had only female member as a primary bank or post account holder.

Summary

Overall, 61.3 per cent rural and 38.7 per cent urban households were covered across India, in this survey.

The age distribution shows that more than three-fifth respondents and sample donor were from the age group of 18-24 years, with 90.0 per cent being married at the time of the survey. It was observed that respondents in urban areas (81.7%) were more likely to attend school as the level of illiteracy observed in rural areas (29.1%) was higher than urban areas (18.2%).

In India, almost all households (96.5 per cent urban households and 94 per cent rural households) have access to improved drinking water sources. More than two-third of all the households (76.0%) across all states/UTs use improved toilet facilities, among whom almost two-third households do not share their toilet facility with other households.

More than three-fourths of the surveyed households (77.4%) have a ration card. More than half (55.2%) of the households have a BPL ration card. More than out of eight households (85.9%) have at least one usual member having a bank account or a post office account. More households in rural areas (60.3%) were found to have both male and female members having a bank account or a post office account.



Annexures for Chapter 3

TABLE 3.1: TYPE OF RESIDENCE

Per cent distribution of type of residence across all India, wealth quintile and states across all zones			
	Unweighted N	Rural	Urban
Unweighted N	21406	13095	8311
All India Wealth quintile	21406	61.3	38.7
Lowest	2692	89.0	11.0
Second	3657	76.1	23.9
Middle	4271	62.4	37.6
Fourth	5112	46.2	53.8
Highest	5674	33.9	66.1
North zone	3971	58.5	41.5
Chandigarh	600	2.9	97.1
Delhi	611	1.4	98.6
Haryana	601	51.1	48.9
Himachal Pradesh	600	86.3	13.7
Jammu & Kashmir	355	56.3	43.7
Punjab	600	47.7	52.3
Rajasthan	604	76.5	23.5
Central zone	2403	72.4	27.6
Chhattisgarh	600	70.0	30.0
Madhya Pradesh	603	70.5	29.5
Uttarakhand	600	62.9	37.1
Uttar Pradesh	600	74.3	25.7
East zone	2401	72.9	27.1
Bihar	600	86.0	14.0
Jharkhand	600	76.9	23.1
Odisha	601	71.0	29.0
West Bengal	600	58.8	41.2
North-East zone	4817	77.0	23.0
Arunachal Pradesh	603	71.4	28.6
Assam	601	81.1	18.9
Manipur	600	61.1	38.9
Meghalaya	600	86.1	13.9
Mizoram	605	48.7	51.3
Nagaland	600	67.0	33.0
Sikkim	600	70.0	30.0
Tripura	608	68.6	31.4
West zone	3002	48.8	51.2
Dadra & Nagar Haveli	601	33.3	66.7
Daman & Diu	600	16.4	83.6
Goa	601	32.1	67.9

Per cent distribution of type of residence across all India, wealth quintile and states across all zones			
	Unweighted N	Rural	Urban
Maharashtra	600	50.5	49.5
South zone	4812	49.4	50.6
Andaman & Nicobar Island	600	57.3	42.7
Andhra Pradesh	600	63.5	36.5
Karnataka	601	57.7	42.3
Kerala	601	40.2	59.8
Lakshadweep	600	21.4	78.6
Puducherry	600	24.5	75.5
Tamil Nadu	610	37.8	62.2
Telangana	600	45.1	54.9

TABLE 3.2: TYPE OF RESPONDENTS

Per cent distribution of type of respondents across all India, type of residence and states across all zones					
	Unweighted N	Head of the household (in case of female)	Wife of the head of the household	Any other adult woman who has been living continuously for the past months in the household	Any other adult member in the household who has been living continuously for the past 3 months
Unweighted N	21406	1783	10861	2630	6132
All India Type of residence	21406	13.2	45.9	12.4	28.5
Rural	13095	13.3	43.9	13.5	29.4
Urban	8311	13.0	49.2	10.7	27.1
North zone	3971	10.0	49.4	14.4	26.2
Chandigarh	600	2.0	60.7	11.6	25.8
Delhi	611	2.6	64.4	5.8	27.1
Haryana	601	8.0	59.0	19.1	13.8
Himachal Pradesh	600	3.9	52.9	6.3	36.9
Jammu & Kashmir	355	0.6	34.2	43.3	21.8
Punjab	600	11.6	47.9	6.3	34.1
Rajasthan	604	13.9	45.2	14.0	26.9
Central zone	2403	7.1	42.0	16.4	34.5
Chhattisgarh	600	24.7	40.0	11.4	23.9
Madhya Pradesh	603	0.5	50.3	19.7	29.5
Uttarakhand	600	2.1	48.7	14.5	34.7
Uttar Pradesh	600	7.1	38.2	16.0	38.8
East zone	2401	4.1	47.0	17.8	31.1
Bihar	600	6.3	46.1	19.4	28.2
Jharkhand	600	0.8	53.8	15.9	29.6

Per cent distribution of type of respondents across all India, type of residence and states across all zones					
	Unweighted N	Head of the household (in case of female)	Wife of the head of the household	Any other adult woman who has been living continuously for the past months in the household	Any other adult member in the household who has been living continuously for the past 3 months
West Bengal	600	3.8	46.6	17.0	32.7
North-East zone	4817	4.6	46.7	18.0	30.7
Arunachal Pradesh	603	5.0	43.3	17.6	34.1
Assam	601	3.8	42.6	21.7	31.8
Manipur	600	1.8	53.6	16.7	27.9
Meghalaya	600	9.5	54.6	1.0	34.9
Mizoram	605	5.1	48.7	18.5	27.7
Nagaland	600	7.8	66.1	0.6	25.5
Sikkim	600	4.1	66.2	3.6	26.0
Tripura	608	6.1	51.8	17.1	25.0
West zone	3002	41.3	32.9	3.0	22.8
Dadra & Nagar Haveli	601	5.3	73.3	1.6	19.9
Daman & Diu	600	4.2	60.3	4.4	31.1
Goa	601	1.7	71.7	-	26.6
Gujarat	600	12.6	49.9	3.4	34.1
Maharashtra	600	59.7	21.6	2.8	15.9
South zone	4812	10.3	55.2	8.8	25.7
Andaman & Nicobar Island	600	2.6	51.3	15.3	30.9
Andhra Pradesh	600	10.9	60.2	4.4	24.5
Karnataka	601	9.8	54.3	10.2	25.6
Kerala	601	11.3	35.9	22.2	30.7
Lakshadweep	600	14.7	21.3	35.4	28.7
Puducherry	600	1.0	64.7	4.6	29.7
Tamil Nadu	610	5.4	59.9	7.9	26.8
Telangana	600	19.4	58.2	1.4	20.9

TABLE 3.3: AGE GROUP OF RESPONDENTS

Per cent distribution of type of respondents across all India, type of residence and states across all zones								
	18-19 years	20-24 years	25-29 years	30-34 years	35-39 years	40-49 years	>50 Years	>50 Years
Unweighted N	21406	131	12499	5255	892	706	877	1046
All India Type of Residence	21406	0.5	62.2	22.3	3.4	2.9	3.4	5.2
Rural	13095	0.6	62.5	21.6	3.2	3.0	3.7	5.4
Urban	8311	0.4	61.9	23.6	3.7	2.7	3.0	4.8

TABLE 3.4: AGE GROUP OF SAMPLE DONOR

Per cent distribution of age of sample donor across all India and type of residence							
	Unweighted N	15-19 years	20-24 years	25-29 years	30-34 years	35-39 years	40-49 years
Unweighted N	21406	245	12521	6589	828	604	619
All India Type of Residence	21406	1.2	59.9	32.0	2.8	2.0	2.1
Rural	13095	1.5	59.8	32.0	2.5	2.1	2.1
Urban	8311	0.8	60.2	31.9	3.3	1.8	2.0

TABLE 3.5: MARITAL STATUS OF RESPONDENTS

Per cent distribution of marital status of respondents across all India and type of residence			
	Unweighted N	Married	Unmarried
Unweighted N	21406	19345	2036
All India Type of Residence	21406	90.9	9.1
Rural	13095	90.8	9.2
Urban	8311	91.2	8.8

Married: Currently married

Unmarried: Married but Gauna not performed, widowed, divorced, separated, deserted, never married
Don't know

() Based on 25-49 unweighted cases

3.6 EDUCATION OF RESPONDENTS

Per cent distribution of education of respondents across all India and type of residence							
	Unweighted N	No schooling	<5 years complete	5-7 years complete	8-9 years complete	10-11 years complete	≥12 years complete
Unweighted N	21406	4121	1386	2764	3372	3934	5829
All India Type of Residence	21406	24.9	6.0	12.7	16.2	17.3	22.9
Rural	13095	29.1	6.9	12.7	16.3	15.3	19.7
Urban	8311	18.2	4.7	12.7	16.0	20.4	27.9

TABLE 3.7: WEALTH QUINTILE

Per cent distribution of wealth quintile across all India, type of residence and states across all zones						
	Unweighted N	Lowest	Second	Middle	Fourth	Highest
Unweighted N	21406	2692	3657	4271	5112	5674
All India Type of residence	21406	19.7	19.8	20.0	20.0	20.4
Rural	13095	28.7	24.6	20.4	15.1	11.3
Urban	8311	5.6	12.2	19.5	27.9	34.9
North zone	3971	7.0	8.5	17.4	26.7	40.4
Chandigarh	600	1.1	8.7	14.0	26.7	49.4
Delhi	611	2.2	11.6	27.2	26.8	32.2
Haryana	601	2.6	12.0	20.7	24.9	39.7
Himachal Pradesh	600	1.3	6.1	16.8	30.5	45.3
Jammu & Kashmir	355	0.2	1.4	15.8	25.1	57.5
Punjab	600	0.3	1.7	6.6	19.4	72.1
Rajasthan	604	14.3	10.9	18.9	30.2	25.7
Central zone	2403	27.4	24.3	16.6	14.6	17.2
Chhattisgarh	600	19.0	32.7	20.9	14.0	13.5
Madhya Pradesh	603	37.9	22.4	11.8	12.9	14.9
Uttarakhand	600	4.7	13.9	16.8	17.6	47.0
Uttar Pradesh	600	25.5	24.1	17.9	15.4	17.1
East zone	2401	40.1	27.3	14.1	12.3	6.1
Bihar	600	50.1	26.2	10.1	9.9	3.7
Jharkhand	600	52.3	24.4	11.5	7.9	3.9
Odisha	601	44.5	21.4	16.9	10.6	6.6
West Bengal	600	23.2	32.2	18.0	17.3	9.2
North-East zone	4817	14.4	30.8	23.4	18.7	12.7
Arunachal Pradesh	603	12.5	26.6	23.3	21.9	15.7
Assam	601	13.7	31.9	23.0	20.2	11.3
Manipur	600	2.7	18.5	34.7	22.5	21.6
Meghalaya	600	28.8	41.8	19.6	5.3	4.6
Mizoram	605	0.1	0.6	7.1	26.8	65.4
Nagaland	600	4.4	27.5	38.6	14.3	15.2
Sikkim	600	1.6	4.9	36.5	52.6	4.3
Tripura	608	26.2	37.4	18.8	11.8	5.8
West zone	3002	13.1	17.6	28.8	23.1	17.5
Dadra & Nagar Haveli	601	6.3	11.4	19.7	46.4	16.2
Daman & Diu	600	1.0	10.0	18.0	46.7	24.3
Goa	601	0.1	1.2	10.7	38.1	49.9
Gujarat	600	17.8	13.7	24.1	23.1	21.2
Maharashtra	600	10.5	20.3	32.0	22.7	14.6

South zone	4812	8.6	15.8	23.0	25.7	27.0
Andaman & Nicobar Island	600	0.6	6.9	12.5	35.7	44.4
Andhra Pradesh	600	8.3	16.5	35.3	25.0	14.9
Karnataka	601	19.2	16.4	22.9	28.7	12.7
Kerala	601	0.3	3.7	6.7	30.6	58.7
Lakshadweep	600	1.0	5.8	11.0	22.5	59.7
Puducherry	600	2.4	11.0	25.1	34.3	27.3
Tamil Nadu	610	4.3	23.4	26.9	24.2	21.2
Telangana	600	2.8	10.0	15.1	18.5	53.7



TABLE 3.8: DRINKING WATER SOURCES

Per cent distribution of drinking water sources across all India, type of residence, wealth quintile, states across all zone						
	Improved drinking water sources					
	Piped					
	Unweighted N	Into dwelling	Into yard	Public tap	Tube well	Well
Unweighted N	21406	7617	1893	4147	3870	1698
All India Type of residence	21406	27.4	6.2	21.1	30.1	6.8
Rural	13095	18.9	4.9	23.5	35.8	6.8
Urban	8311	40.9	8.4	17.1	21.1	6.7
Wealth quintile						
Lowest	2692	7.1	4.3	26.7	45.8	4.1
Second	3657	15.1	3.8	30.1	38	4.6
Middle	4271	29.5	7.3	23.2	23.8	8.1
Fourth	5112	36.3	8.0	14.7	24.3	9.0
Highest	5674	48.3	7.7	10.9	19.3	8.1
North zone	3971	60.1	1.7	14.7	11.2	5.4
Chandigarh	600	80.5	1.8	15.8	1.5	-
Delhi	611	83.3	1.8	10.3	4.5	-
Haryana	601	36.9	1.1	20.1	34.3	0.5
Himachal Pradesh	600	48.9	4.5	27.6	7.0	0.1
Jammu & Kashmir	355	97.8	0.8	0.2	0.2	0.4
Punjab	600	56.8	3.1	19.2	20.7	0.1
Rajasthan	604	59.4	1.2	12.8	2.7	12.1
Central zone	2403	12.4	3.1	30.3	48.7	0.5
Chhattisgarh	600	36.3	5.5	44.2	10.3	0.6
Madhya Pradesh	603	11.4	4.8	25.1	42.6	1.5
Uttarakhand	600	36.0	21.1	13.3	25.3	0.6
Uttar Pradesh	600	6.8	0.8	30.9	60.5	-
East zone	2401	7.0	2.0	18.9	62.8	1.7
Bihar	600	0.1	0.7	1.2	97.1	-
Jharkhand	600	4.0	2.3	36.5	23.2	0.0
Odisha	601	4.0	2.8	24.5	52.5	6.8
West Bengal	600	16.6	2.8	28.1	46.8	1.8
North-East zone	4817	7.7	6.2	12.0	47.4	11.8
Arunachal Pradesh	603	37.1	20.5	8.6	18.9	8.9
Assam	601	3.0	5.3	3.0	64.5	14.1
Manipur	600	5.8	19.5	9.5	4.3	-
Meghalaya	600	7.6	2.0	65.6	8.0	3.3
Mizoram	605	18.8	6.3	9.1	1.2	-
Nagaland	600	15.7	10.2	29.9	6.1	30.2

			Non-improved drinking water sources					
Protected				Unprotected				
Spring	Rain wate	Community RO plant	Well	Spring	Tanker truck	Cart with small tank	Surface water	Bottled water
114	40	673	564	192	204	27	127	227
0.2	0.4	2.6	2.7	0.2	0.4	0.2	0.3	1.3
0.3	0.6	3.1	4.1	0.2	0.4	0.2	0.5	0.5
0.2	0.1	1.9	0.5	-	0.3	0.1	0.1	2.5
0.3	0.8	0.9	8.5	0.1	0.2	0.2	0.8	0.3
0.3	1.1	1.6	3.1	0.2	0.6	0.2	0.4	0.8
0.4	0.2	4.3	1.5	0.3	0.3	0.2	0.1	0.8
0.1	-	4.2	0.6	0.1	0.3	0.1	0.2	2.0
0.1	0.1	2.3	0.2	0.1	0.4	0.1	0.1	2.4
0.1	0.8	1.2	1.8	0.5	0.8	0.5	0.1	1.2
-	-	0.5	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-
-	-	0.3	-	-	-	-	-	6.8
2.6	-	0.2	0.4	8.1	-	-	0.8	-
0.2	0.2	-	0.2	-	-	-	-	-
-	-	-	-	-	-	-	-	-
-	1.7	2.6	4.1	0.3	1.7	1.1	0.1	0.3
0.2	0.1	0.4	4.1	-	-	-	0.2	-
0.5	-	1.1	1.2	-	-	-	0.3	-
-	0.3	-	13.6	-	0.2	-	0.5	0.2
3.6	-	-	-	-	-	-	0.2	-
-	-	0.4	0.6	-	-	-	-	-
-	-	0.2	5.9	0.1	0.1	0.1	0.2	1.0
-	-	0.3	0.4	-	-	0.2	-	0.1
-	-	-	32.7	0.2	-	-	0.4	0.2
-	-	0.8	7.3	0.2	-	0.1	0.6	-
-	-	-	1.0	-	0.4	-	-	2.6
0.9	-	2.3	4.8	1.6	1.4	-	3.6	0.3
0.2	-	-	4.5	0.8	-	-	0.5	-
0.4	-	-	4.7	0.1	-	-	4.6	0.3
6.4	-	-	0.5	24.3	21.6	0.7	7.4	-
3.4	-	1.3	7.0	0.6	0.3	-	0.9	-
0.2	0.1	62.6	-	-	1.7	-	-	-
-	0.4	0.2	5.6	-	0.7	-	-	0.9

**Per cent distribution of drinking water sources across all India,
type of residence, wealth quintile, states across all zone**

	Improved drinking water sources					
	Piped					Well
	Unweighted N	Into dwelling	Into yard	Public tap	Tube well	
West zone	3002	38.8	19.3	11.6	11.1	16.2
Dadra & Nagar Haveli	601	35.4	45.5	12.8	3.9	0.1
Daman & Diu	600	31.2	34.3	19.3	2.4	-
Goa	601	81.5	12.5	0.5	0.4	0.1
Gujarat	600	21.5	50.1	15.9	1.3	5.8
Maharashtra	600	48.6	0.6	9.0	17.3	22.9
South zone	4812	34.9	6.2	25.8	7.6	10.2
Andaman & Nicobar Island	600	89.4	6.8	3.4	-	-
Andhra Pradesh	600	28.6	5.6	34.4	17.0	0.2
Karnataka	601	24.6	6.6	13.8	12.5	3.9
Kerala	601	17.3	2.9	4.4	3.1	71.8
Lakshadweep	600	6.1	-	6.1	-	87.1
Puducherry	600	58.1	4.1	37.8	-	-
Tamil Nadu	610	31.2	8.7	53.4	2.5	0.8
Telangana	600	82.9	4.6	5.9	0.4	0.6

-Based on 0 percentage



			Non-improved drinking water sources					
Protected				Unprotected				
Spring	Rain wate	Community RO plant	Well	Spring	Tanker truck	Cart with small tank	Surface water	Bottled water
-	0.3	0.7	0.4	-	0.2	0.1	0.2	0.8
-	-	0.2	-	-	-	-	-	2.2
-	-	1.5	-	-	0.1	-	0.1	10.5
-	-	-	-	-	3.5	1.2	0.2	-
-	0.8	1.1	0.7	-	0.4	0.3	-	2.1
-	-	0.4	0.3	-	-	-	0.4	-
0.6	1.1	8.8	0.7	0.1	0.6	0.2	0.2	3.1
-	-	-	-	-	-	-	-	0.4
0.2	0.1	4.2	0.4	-	0.1	-	0.3	8.7
1.6	3.6	27.0	1.6	0.3	1.8	0.6	0.5	1.6
-	-	0.1	0.4	-	-	-	-	-
0.2	0.5	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-
0.1	-	-	-	-	0.2	-	-	3.1
0.2	0.2	1.9	0.6	-	-	0.4	0.3	2.1



TABLE 3.9: TOILET FACILITIES

Per cent distribution of toilet facilities across all India, type of residence, wealth quintile, states across all zones						
	Unweighted N	Flush to a piped sewer	Flush to a septic tank	Flush to a pit latrine	Flush to somewhere else	
Unweighted N	21406	3370	8562	3551	184	
All India Type of residence	21406	15.4	32.1	15.5	0.8	
Rural	13095	11.2	27.2	15.9	0.8	
Urban	8311	22.1	39.8	14.9	0.6	
Wealth quintile						
Lowest	2692	3.2	11.9	14.2	1.2	
Second	3657	8.7	25.5	18.4	1.1	
Middle	4271	18.5	30.7	15.6	0.8	
Fourth	5112	23.9	41.2	15.1	0.4	
Highest	5674	22.3	50.3	14.3	0.3	
North zone	3971	50.3	29.0	10.6	1.1	
Chandigarh	600	62.9	19.6	9.8	5.4	
Delhi	611	82.1	10.9	1.1	3.2	
Haryana	601	42.6	43.4	10.8	0.5	
Himachal Pradesh	600	25.1	26.3	30.8	5.3	
Jammu & Kashmir	355	80.4	0.4	18.0	0.6	
Punjab	600	34.7	38.1	24.3	0.5	
Rajasthan	604	50.2	29.0	3.6	0.6	
Central zone	2403	3.9	31.1	16.3	0.5	
Chhattisgarh	600	11.1	34.5	35.3	2.4	
Madhya Pradesh	603	2.9	33.4	29.5	0.7	
Uttarakhand	600	12.8	40.0	43.6	1.3	
Uttar Pradesh	600	2.4	28.9	4.9	-	
East zone	2401	2.8	27.7	20.9	0.3	
Bihar	600	0.2	40.0	7.2	-	
Jharkhand	600	-	27.8	12.2	1.0	
Odisha	601	1.1	8.1	-	-	
West Bengal	600	7.3	24.0	48.0	0.3	
North-East zone	4817	2.5	33.8	15.7	2.3	
Arunachal Pradesh	603	1.0	42.3	16.9	0.1	
Assam	601	2.6	24.4	16.4	3.4	
Manipur	600	1.4	48.0	24.2	-	
Meghalaya	600	0.3	67.6	12.1	-	
Mizoram	605	-	99.7	0.1	-	
Nagaland	600	15.7	10.2	29.9	6.1	
Nagaland	600	2.3	73.4	21.5	0.1	

Flush don't know where	Ventilated improved	Pit (VIP)/	Community RO plant	Well	Spring	Tanker truck	Cart with small tank
369	164	172	1744	190	486	670	1909
3.7	0.9	0.9	7.1	0.6	4.1	2.0	16.8
3.8	0.8	1.2	7.2	0.7	5.2	2.1	23.9
3.6	1.1	0.4	6.9	0.5	2.3	1.9	5.6
1.9	0.3	0.5	5.1	0.7	3.0	3.4	54.4
3.4	0.5	1.4	8.9	0.9	5.9	2.6	22.6
7.5	1.0	1.1	10.6	0.4	5.4	1.0	7.4
4.9	1.0	1.2	7.1	0.4	3.5	0.4	0.7
0.9	1.8	0.4	3.8	0.6	2.5	2.8	-
1.0	-	0.1	0.3	0.5	0.5	1.9	4.7
2.1	-	-	-	-	-	-	0.2
0.3	-	-	-	-	-	-	2.4
0.4	-	0.2	0.1	-	0.9	-	1.1
7.9	0.3	0.2	0.4	1.1	0.3	0.4	1.9
0.2	-	-	0.2	-	-	0.2	-
0.2	-	0.3	0.6	1.3	-	-	-
1.0	-	0.1	0.4	0.5	0.7	4.2	9.6
1.0	1.6	1.7	0.5	0.1	15.0	0.5	27.7
6.0	0.3	0.5	0.1	0.1	1.5	2.6	5.5
-	-	0.2	1.3	-	4.6	0.7	26.7
-	-	-	-	-	0.1	-	2.3
0.6	2.7	2.7	0.3	0.2	23.4	-	34.0
0.1	-	1.6	10.5	0.4	0.2	1.7	33.8
-	-	0.1	-	-	0.3	2.8	49.2
0.4	-	0.3	5.2	1.0	0.2	4.0	47.7
-	-	9.2	31.0	0.3	0.4	-	49.9
-	-	-	13.8	0.7	-	0.4	5.2
3.4	1.4	3.2	23.8	4.3	7.4	0.2	1.5
0.9	2.8	0.3	24.7	2.2	6.3	-	2.4
5.1	1.7	4.5	24.0	5.0	10.8	0.3	1.6
-	-	-	25.5	0.4	0.5	-	-
-	-	1.5	12.4	2.6	2.0	-	1.4
-	-	-	-	0.2	-	0.1	-
30.2	-	0.4	0.2	5.6	-	0.7	-
-	-	0.2	2.3	-	0.1	-	-

Per cent distribution of toilet facilities across all India, type of residence, wealth quintile, states across all zones

	Unweighted N	Flush to a piped sewer	Flush to a septic tank	Flush to a pit latrine	Flush to somewhere else	
Sikkim	600	27.7	60.2	11.1	-	
Tripura	608	1.7	15.7	11.6	0.3	
West zone	3002	13.4	22.4	12.1	0.2	
Dadra & Nagar Haveli	601	3.8	34.1	27.6	-	
Daman & Diu	600	10.2	26.3	24.6	-	
Goa	601	7.3	11.1	-	-	
Gujarat	600	29.2	11.6	27.2	0.6	
Maharashtra	600	3.9	29.0	3.1	-	
South zone	4812	20.0	44.3	15.3	1.3	
Andaman & Nicobar Island	600	0.3	94.3	4.9	-	
Andhra Pradesh	600	4.6	56.9	12.8	0.8	
Karnataka	601	51.7	11.2	14.9	2.5	
Kerala	601	1.0	63.5	30.9	0.1	
Lakshadweep	600	0.4	84.6	14.6	-	
Puducherry	600	31.4	59.1	3.6	0.2	
Tamil Nadu	610	10.6	54.7	3.2	1.0	
Telangana	600	7.7	59.4	29.3	1.2	



Flush don't know where	Ventilated improved	Pit (VIP)/	Community RO plant	Well	Spring	Tanker truck	Cart with small tank
-	-	-	1.0	-	-	-	-
0.8	1.6	1.2	50.9	7.7	0.1	-	3.0
17.7	2.1	0.1	16.7	1.2	0.6	4.7	8.9
-	1.9	0.4	17.2	1.8	4.4	-	8.8
-	5.7	4.1	13.3	0.7	13.9	0.2	1.0
-	-	0.5	-	-	0.8	80.0	0.2
0.8	1.7	0.2	11.5	2.2	1.4	0.4	13.2
28.4	2.3	-	20.2	0.6	-	6.0	6.4
1.4	0.8	0.3	4.9	0.3	1.2	2.3	7.7
-	-	-	-	-	-	-	0.5
0.2	0.5	0.8	20.2	0.4	0.3	0.3	2.3
3.5	1.6	0.4	3.3	0.5	1.5	7.6	1.3
0.3	1.2	-	2.7	0.1	0.3	-	-
-	-	-	-	-	-	0.4	-
0.2	0.7	0.1	0.7	0.5	0.8	0.3	2.3
1.1	0.4	-	0.4	0.2	2.1	0.2	25.5
0.1	-	0.3	0.9	0.2	0.8	0.1	0.1



TABLE 3.10: ACCESS TO THE HEALTH FACILITY

Per cent distribution of access to health facility across all India, type of residence, wealth quintile, states across all zones				
	Unweighted N	Public health sector	Private health sector	Others
Unweighted N	21406	13742	7457	207
All India Wealth quintile	21406	56.1	43.0	0.9
Rural	13095	55.0	43.8	1.2
Urban	8311	57.9	41.7	0.4
Wealth quintile				
Lowest	2692	54.4	44.0	1.6
Second	3657	57.3	41.6	1.1
Middle	4271	61.2	38.2	0.6
Fourth	5112	56.8	42.6	0.7
Highest	5674	51.1	48.2	0.7
North zone	3971	29.5	48.2	2.0
Chandigarh	600	4.4	95.3	0.2
Delhi	611	33.8	63.7	2.5
Haryana	601	16.7	79.3	4.0
Himachal Pradesh	600	37.7	53.5	8.8
Jammu & Kashmir	355	85.2	13.5	1.3
Punjab	600	34.6	63.0	2.4
Rajasthan	604	67.0	32.5	0.5
Central zone	2403	26.6	72.3	1.1
Chhattisgarh	600	68.7	29.7	1.5
Madhya Pradesh	603	34.1	65.0	0.8
Uttarakhand	600	8.6	91.4	-
Uttar Pradesh	600	15.9	82.9	1.3
East zone	2401	49.1	49.9	1.0
Bihar	600	20.8	79.2	-
Jharkhand	600	39.8	58.6	1.6
Odisha	601	93.2	4.5	2.3
West Bengal	600	61.4	37.5	1.1
North-East zone	4817	82.3	17.6	0.1
Arunachal Pradesh	603	92.8	7.2	-
Assam	601	83.5	16.4	0.1
Manipur	600	84.0	16.0	-
Meghalaya	600	73.1	26.5	0.4
Mizoram	605	71.2	28.8	-
Nagaland	600	87.6	12.4	-
Sikkim	600	71.8	28.2	-
Tripura	608	80.5	19.5	-

West zone	3002	67.0	33.0	0.1
Dadra & Nagar Haveli	601	72.6	27.4	-
Daman & Diu	600	73.5	26.2	0.3
Goa	601	88.4	11.6	-
Gujarat	600	77.9	22.1	-
Maharashtra	600	59.9	40.0	0.1
South zone	4812	80.6	18.7	0.7
Andaman & Nicobar Island	600	87.6	12.4	-
Andhra Pradesh	600	80.6	19.4	-
Karnataka	601	77.8	20.2	2.0
Kerala	601	88.0	11.7	0.3
Lakshadweep	600	99.9	-	0.1
Puducherry	600	89.1	10.8	0.1
Tamil Nadu	610	75.6	24.2	0.2
Telangana	600	88.8	10.8	0.4
Public Health Sector: Govt./municipal hospital, Govt. dispensary, UHC / UHP/UFWC, CHC/rural hospital/block PHC, PHC / additional PHC, Sub-Centre, Vaidya/hakim/homeopath (AYUSH), Anganwadi/ICDS centre, Asha, Govt. Mobile clinic, other public sector, health facility, NGO or trust hospital/clinic Private Health sector: Private hospital, Private doctor/clinic, Private paramedic, Vaidya/hakim/homoeopath (AYUSH), traditional healer, pharmacy/drugstore, Dai (TBA), other private sector, health facility Others: Shop, home treatment, others -Based on 0 percentage				

TABLE 3.11: ACCESS TO HEALTH SCHEMES

Per cent distribution of access to health scheme across all India, type of residence, wealth quintile, states across all zones				
	Unweighted N	Yes	No	Don't know
Unweighted N	21406	3287	16327	1792
All India	21406	13.6	74.3	12.1
Type of residence				
Rural	13095	12.2	75.2	12.5
Urban	8311	15.7	72.7	11.5
Wealth quintile				
Lowest	2692	9.1	75.6	15.2
Second	3657	12.7	75.9	11.4
Middle	4271	17.2	69.0	13.8
Fourth	5112	12.7	75.2	12.1
Highest	5674	16.1	75.6	8.3
North zone	3971	5.4	85.2	9.4
Chandigarh	600	8.1	90.1	1.8
Delhi	611	2.3	82.0	15.7
Haryana	601	2.2	72.5	25.3





Per cent distribution of access to health scheme across all India, type of residence, wealth quintile, states across all zones				
	Unweighted N	Yes	No	Don't know
Himachal Pradesh	600	21.6	71.4	7.1
Jammu & Kashmir	355	0.9	88.3	10.8
Punjab	600	15.9	82.9	1.2
Rajasthan	604	1.8	92.2	5.9
Central zone	2403	3.9	90.7	5.4
Chhattisgarh	600	13.6	71.0	15.5
Madhya Pradesh	603	2.2	96.2	1.6
Uttarakhand	600	3.5	89.8	6.7
Uttar Pradesh	600	2.8	92.0	5.2
East zone	2401	15.3	79.8	5.0
Bihar	600	2.7	90.7	6.6
Jharkhand	600	22.7	70.0	7.3
Odisha	601	47.9	43.4	8.8
West Bengal	600	10.3	89.0	0.7
North-East zone	4817	16.9	80.7	2.5
Arunachal Pradesh	603	5.4	94.1	0.5
Assam	601	18.1	79.5	2.3
Manipur	600	3.6	94.8	1.6
Meghalaya	600	18.6	80.6	0.8
Mizoram	605	35.5	61.7	2.8
Nagaland	600	1.0	91.6	7.4
Sikkim	600	7.0	92.9	0.1
Tripura	608	21.2	75.3	3.5
West zone	3002	14.9	62.2	22.9
Dadra & Nagar Haveli	601	34.1	60.8	5.1
Daman & Diu	600	14.5	83.3	2.2
Goa	601	32.6	47.0	20.5
Gujarat	600	37.6	50.8	11.7
Maharashtra	600	0.7	69.4	29.9
South zone	4812	24.0	56.2	19.8
Andaman & Nicobar Island	600	10.5	88.6	0.9
Andhra Pradesh	600	40.3	49.6	10.1
Karnataka	601	15.1	27.7	57.2
Kerala	601	32.2	61.2	6.6
Lakshadweep	600	12.8	69.2	18.0
Puducherry	600	11.0	88.5	0.5
Tamil Nadu	610	20.7	78.5	0.8
Telangana	600	22.9	73.3	3.8

TABLE 3.12: TYPE OF HEALTH SCHEMES

Per cent distribution of access to health scheme across all India, type of residence, wealth quintile, states across all zones									
	Unweighted N	ESIS	CGHS	SHIS	RSBY	CHIP	OHITE	MRE	OPCHI
Unweighted N	3287	272	641	1207	1228	174	247	112	403
All India	3287	10.3	23.6	51.4	39.9	6.9	8.2	3.1	6.1
Type of residence									
Rural	1875	5.4	25.5	53.0	38.3	4.4	6.6	1.5	5.2
Urban	1412	16.2	21.3	49.5	41.9	10.0	10.1	5.1	7.2
Wealth quintile									
Lowest	343	2.7	23.1	37.3	50.7	0.4	2.5	1.1	0.4
Second	534	6.3	23.9	52.5	30.5	3.0	9.1	0.3	1.3
Middle	663	7.5	24.9	57.4	46.2	3.8	5.9	0.3	3.0
Fourth	702	10.8	23.9	51.1	45.9	6.9	8.7	2.9	6.2
Highest	1045	19.9	22.2	52.3	29.9	16.7	12.4	9.6	16.1
North zone	315	15.1	15.7	36.7	12.8	12.6	20.5	16.9	33.5
Chandigarh	55	21.2	4.8	-	1.9	2.1	7.9	5.2	56.9
Delhi	14	23.2	5.4	36.8	14.5	5.4	45.7	-	5.3
Haryana	13	14.9	32.7	36.5	15.9	-	-	-	-
Himachal Pradesh	132	10.3	13.1	22.6	17.6	11.5	14.1	17.1	63.3
Jammu & Kashmir	2	100.0	100.0	74.4	-	74.4	100.0	25.6	-
Punjab	87	18.4	16.4	37.8	14.8	17.4	21.9	24.8	38.3
Rajasthan	12	-	6.0	48.9	-	-	19.7	-	4.1
Central zone	132	7.6	16.3	23.1	30.1	6.3	1.7	0.4	14.5
Chhattisgarh	77	3.4	1.8	22.9	57.9	3.0	1.7	1.0	4.2
Madhya Pradesh	14	-	42.7	28.6	7.1	4.2	7.1	-	10.6
Uttarakhand	24	13.8	35.6	27.4	7.1	6.9	-	-	8.3
Uttar Pradesh	17	13.7	19.2	21.0	13.8	10.0	-	-	26.0
East zone	514	2.3	18.6	33.4	44.1	2.3	1.2	0.2	1.1
Bihar	19	-	-	45.5	50.9	-	-	-	-
Jharkhand	150	6.0	63.8	1.4	18.8	-	2.4	1.2	1.0
Odisha	280	1.5	7.3	52.3	46.1	0.8	-	-	-
West Bengal	65	1.5	10.9	15.7	59.1	8.1	3.3	-	3.8
North-East zone	648	1.3	43.4	37.0	15.5	1.5	0.8	0.4	5.5
Arunachal Pradesh	29	-	13.2	4.1	-	3.3	69.0	5.8	14.5
Assam	106	0.9	54.4	40.2	1.1	2.0	-	-	7.1
Manipur	22	22.3	9.3	28.3	27.0	-	9.4	18.0	9.8
Meghalaya	102	-	9.4	79.7	9.1	0.6	-	0.6	1.5
Mizoram	204	3.3	24.4	20.0	58.7	-	-	0.4	0.6
Nagaland	4	-	88.6	-	-	-	-	-	-
Sikkim	42	8.1	59.5	4.6	49.0	-	17.7	4.3	2.8

Per cent distribution of access to health scheme across all India, type of residence, wealth quintile, states across all zones

	Unweighted N	ESIS	CGHS	SHIS	RSBY	CHIP	OHITE	MRE	OPCHI
Tripura	139	0.6	17.5	3.6	78.3	-	-	-	1.0
West zone	693	17.0	34.7	33.4	84.4	4.5	3.6	2.5	4.1
Dadra & Nagar Haveli	199	1.0	2.2	8.9	88.8	0.5	14.8	1.2	0.3
Daman & Diu	91	0.9	13.2	14.9	64.7	-	4.0	2.6	6.0
Goa	183	8.7	7.7	24.9	9.0	10.4	4.9	5.3	69.2
Gujarat	216	17.0	34.8	32.8	87.9	3.7	2.8	1.8	1.9
Maharashtra	4	26.5	62.5	64.0	26.5	26.5	26.5	26.5	26.5
South zone	985	12.4	21.6	75.6	26.8	10.2	13.8	3.9	5.0
Andaman & Nicobar Island	61	-	18.3	1.7	83.1	-	-	-	-
Andhra Pradesh	250	0.7	1.6	90.9	15.7	-	21.2	-	-
Karnataka	92	7.9	81.1	87.0	81.3	14.7	9.4	2.5	-
Kerala	185	21.7	5.2	50.1	11.1	20.6	9.9	2.2	6.0
Lakshadweep	77	25.1	30.3	38.3	7.4	9.5	0.9	-	-
Puducherry	65	12.7	8.9	32.1	-	4.2	5.6	10.8	49.9
Tamil Nadu	118	7.1	4.8	79.7	0.9	3.7	6.5	-	5.5
Telangana	137	40.1	32.1	53.1	40.4	24.3	21.5	22.0	19.1

ESIS: Employees State Insurance Scheme, **CGHS:** Central Government Health Scheme, **SHIS:** State Health Insurance Scheme,

RSBY: Rashtriya Swasthya Bima Yojana, **CHIP:** Community health insurance programme, **OHIP:** Other health insurance through employer, **MRE:** Medical reimbursement from employer, **OPCHI:** Other privately purchased commercial health insurance

TABLE 3.13: ACCESS TO RATION CARD

Per cent distribution of access to ration card across all India, type of residence, wealth quintile, states across all zones					
	Unweighted N	Yes (card shown)	Yes (card not shown)	No	Don't know
Unweighted N	21406	8998	7547	4206	655
All India	21406	43.1	34.3	17.7	5.0
Type of residence					
Rural	13095	44.8	33.4	17.0	4.8
Urban	8311	40.3	35.7	18.7	5.2
Wealth quintile					
Lowest	2692	35.5	32.4	25.1	7.0
Second	3657	43.6	32.8	19.1	4.5
Middle	4271	47.8	30.7	15.2	6.2
Fourth	5112	42.5	39.7	13.6	4.2
Highest	5674	45.6	35.9	15.5	3.0
North zone	3971	55.2	27.7	14.1	3.0
Chandigarh	600	9.2	17.1	70.5	3.3
Delhi	611	14.3	36.9	40.9	7.9
Haryana	601	41.1	39.2	17.0	2.7
Himachal Pradesh	600	41.0	40.6	11.9	6.6
Jammu & Kashmir	355	21.8	69.0	2.4	6.9
Punjab	600	54.5	21.1	20.2	4.2
Rajasthan	604	77.1	16.4	5.9	0.6
Central zone	2403	36.6	35.9	25.5	2.0
Chhattisgarh	600	46.2	33.5	18.3	2.0
Madhya Pradesh	603	33.3	32.8	33.4	0.4
Uttarakhand	600	32.8	33.2	32.9	1.1
Uttar Pradesh	600	36.4	38.0	22.9	2.7
East zone	2401	39.8	40.2	19.9	0.1
Bihar	600	10.1	53.5	36.3	-
Jharkhand	600	30.2	47.6	21.9	0.3
Odisha	601	60.4	27.1	12.2	0.3
West Bengal	600	64.7	29.6	5.8	-
North-East zone	4817	27.8	38.3	33.6	0.3
Arunachal Pradesh	603	26.8	33.5	37.1	2.6
Assam	601	18.2	44.0	37.7	0.1
Manipur	600	42.7	17.2	39.4	0.7
Meghalaya	600	11.8	46.0	42.0	0.2
Mizoram	605	64.8	32.4	2.7	-
Nagaland	600	33.4	33.1	31.6	1.9
Sikkim	600	3.9	62.2	33.6	0.3

Per cent distribution of access to ration card across all India, type of residence, wealth quintile, states across all zones					
	Unweighted N	Yes (card shown)	Yes (card not shown)	No	Don't know
Tripura	608	84.8	9.2	5.6	0.3
West zone	3002	49.7	24.5	15.0	10.9
Dadra & Nagar Haveli	601	51.1	31.0	14.2	3.7
Daman & Diu	600	38.3	35.9	20.4	5.4
Goa	601	53.6	37.0	2.3	7.0
Gujarat	600	54.8	30.7	12.4	2.1
Maharashtra	600	46.5	20.4	16.8	16.3
South zone	4812	42.7	37.7	10.1	9.5
Andaman & Nicobar Island	600	48.2	47.4	4.2	0.1
Andhra Pradesh	600	56.9	25.2	12.7	5.2
Karnataka	601	34.4	30.7	5.6	29.2
Kerala	601	34.8	63.4	1.6	0.2
Lakshadweep	600	76.8	18.3	0.7	4.2
Puducherry	600	38.2	54.8	6.7	0.2
Tamil Nadu	610	46.4	42.5	11.1	-
Telangana	600	42.4	34.7	21.6	1.3

TABLE 3.14: ACCESS TO BANK ACCOUNT

Per cent distribution of access to bank account across all India, type of residence, wealth quintile, states across all zones						
	Unweighted N	Male member	Female member	Both male and female members	No	Don't
Unweighted N	21406	4558	1706	13362	1157	623
All India	21406	21.3	9.6	55.0	7.2	6.8
Type of residence						
Rural	13095	21.2	10.4	54.1	7.7	6.5
Urban	8311	21.5	8.3	56.4	6.5	7.4
Wealth quintile						
Lowest	2692	16.3	17.1	47.1	10.6	9.0
Second	3657	23.7	12.3	48.7	8.1	7.2
Middle	4271	23.5	8.6	50.9	7.8	9.2
Fourth	5112	21.3	6.3	60.0	6.1	6.3
Highest	5674	21.8	4.1	67.8	3.7	2.6
North zone	3971	25.3	3.8	57.3	11.4	2.2
Chandigarh	600	16.8	5.6	70.0	6.5	1.1
Delhi	611	22.2	6.3	61.1	9.5	0.8
Haryana	601	23.5	8.2	54.4	9.5	4.4

Per cent distribution of access to bank account across all India, type of residence, wealth quintile, states across all zones						
	Unweighted N	Male member	Female member	Both male and female members	No	Don't know
Himachal Pradesh	600	20.8	4.8	68.2	4.9	1.3
Jammu & Kashmir	355	48.1	3.8	32.3	5.1	10.6
Punjab	600	22.9	1.9	72.2	3.1	-
Rajasthan	604	24.5	2.3	54.1	17.8	1.3
Central zone	2403	17.6	8.8	63.0	9.6	1.1
Chhattisgarh	600	43.0	6.2	33.2	12.7	4.9
Madhya Pradesh	603	10.9	11.5	72.9	4.3	0.5
Uttarakhand	600	6.3	1.0	88.7	4.0	-
Uttar Pradesh	600	16.4	8.5	62.8	11.7	0.6
East zone	2401	14.0	17.4	65.2	3.3	0.2
Bihar	600	4.9	21.5	70.9	2.7	-
Jharkhand	600	19.1	17.1	59.2	4.3	0.4
Odisha	601	4.9	21.1	71.8	2.2	-
West Bengal	600	25.7	11.5	58.4	4.0	0.4
North-East zone	4817	15.2	10.8	69.5	4.5	-
Arunachal Pradesh	603	27.2	3.7	66.9	2.0	0.2
Assam	601	14.1	12.5	69.4	4.0	-
Manipur	600	9.4	6.9	82.1	1.4	0.2
Meghalaya	600	8.0	10.0	80.3	1.6	-
Mizoram	605	4.0	8.5	86.9	0.6	-
Nagaland	600	48.3	2.4	34.4	14.9	-
Sikkim	600	23.7	3.0	67.6	5.7	-
Tripura	608	15.0	9.6	66.9	8.3	0.3
West zone	3002	42.9	2.8	23.3	9.3	21.6
Dadra & Nagar Haveli	601	31.8	3.7	58.6	5.9	-
Daman & Diu	600	25.2	14.3	55.5	5.1	-
Goa	601	17.3	3.2	67.5	6.0	5.9
Gujarat	600	28.4	1.7	52.1	12.0	5.9
Maharashtra	600	52.3	3.4	4.9	7.8	31.7
South zone	4812	15.0	11.6	57.1	5.1	11.2
Andaman & Nicobar Island	600	13.1	1.3	85.3	-	0.3
Andhra Pradesh	600	7.1	6.5	76.7	6.8	3.0
Karnataka	601	16.9	1.1	43.5	2.2	36.3
Kerala	601	39.7	8.0	48.9	2.6	0.7
Lakshadweep	600	41.0	8.5	49.1	0.6	0.8
Puducherry	600	18.9	7.8	73.2	0.2	-
Tamil Nadu	610	10.4	32.6	53.0	4.0	-
Telangana	600	8.2	2.7	74.9	13.6	0.6

CHAPTER - 4

COVERAGE OF IODISED SALT AT THE HOUSEHOLD LEVEL





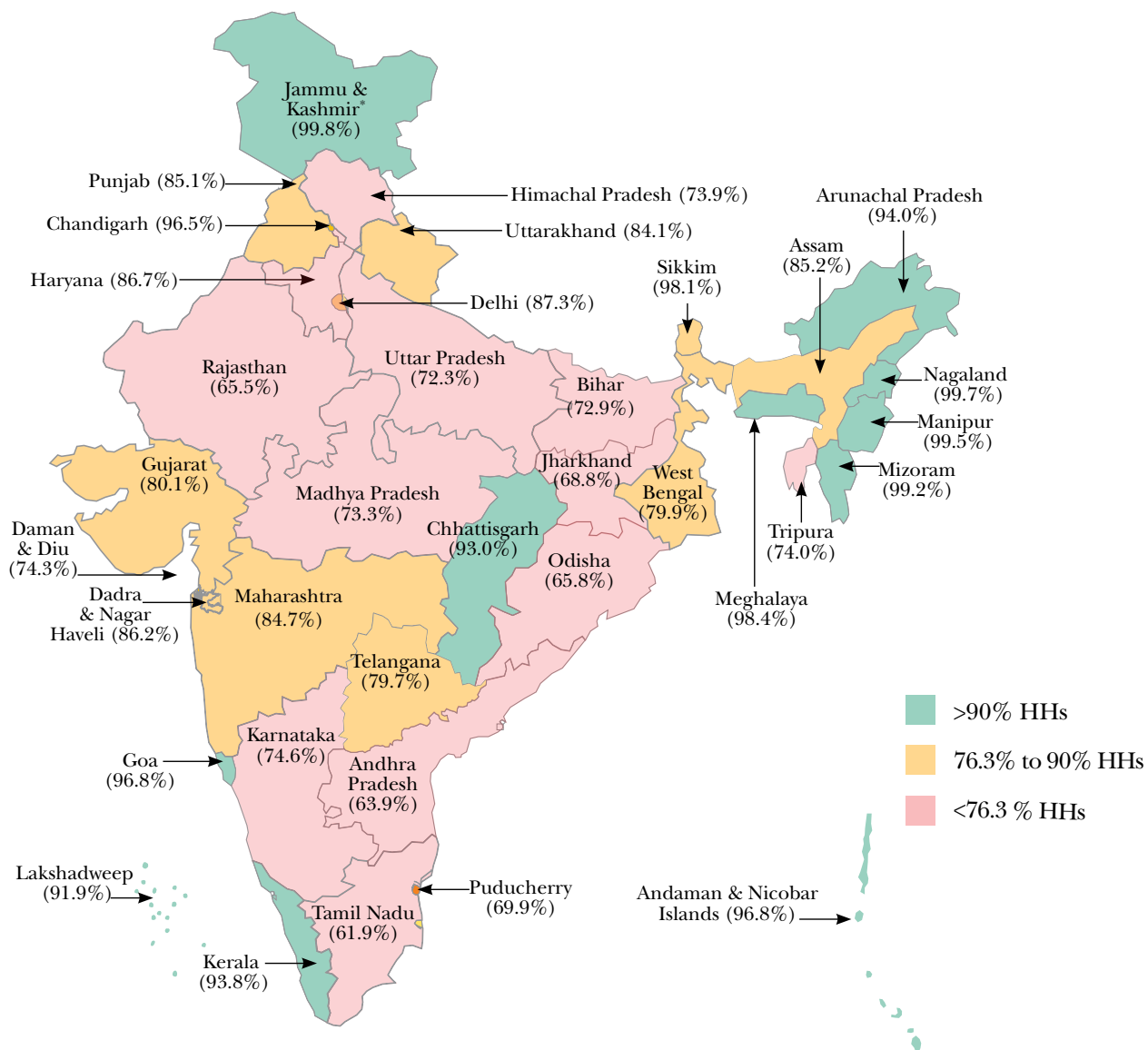
This chapter focuses on the household coverage of iodised salt estimated using iodometric titration method. The household coverage of iodised salt has been presented by administrative units, places of residence and wealth quintiles. This chapter also presents insights on the use of various type of salt (Refined, crushed and crystal) used among the surveyed households.

Household coverage of iodised salt tested through iodometric titration

The national household coverage of iodised salt (with ≥ 15 ppm* iodine) was 76.3 per cent (95% Confidence Interval (CI): 74.1%, 78.5%), 16.1 per cent households had salt with some iodine (>5 ppm to 15 ppm) and 7.6 per cent of the households had salt with no iodine (≤ 5 ppm). Salt iodised with any iodine (≥ 5 ppm) was found to be 92.4 Per cent. The highest coverage of iodised salt (≥ 15 ppm) was observed in Jammu & Kashmir (99.8%), while the lowest coverage was observed in Tamil Nadu (61.9%).

* According to the Food Safety and Standards (Food products standards and food additives) regulations, 2011, the standard was not less than 30 ppm at the manufacture level and not less than 15 ppm in the distribution channel including the retail level.

Figure 4.1: Household coverage of iodised salt (≥ 15 ppm) by state/UT (%)



* Due to some unforeseen circumstances, beyond the control of the survey team, the data collection could only be completed in 12 out of 20 PSUs in Jammu & Kashmir state. These 12 PSUs belong to kashmir area.



As presented in figure 4.2, the national household coverage of iodised salt with iodine content 15 to 30 ppm** was found to be 41.4% (95% CI : 39.4%, 43.4%) with the lowest coverage of iodised salt (15 to 30 ppm) in Jammu & Kashmir (2.3%), and Goa (66.3%) had the highest coverage of iodised salt with iodine content of 15 to 30 ppm. Slightly less than a quarter (23.7%) of the households (<15 ppm) were using either non-iodised salt or inadequately iodised salt.

In urban areas, 82.9 per cent of the households were using iodised salt (≥ 15 ppm) as compared to only 72.2 per cent of households in rural areas; however, coverage of households with cooking salt containing iodine level of 15 - 30 ppm was found to be similar in both rural and urban areas (42.5% and 39.6% respectively).

Figure 4.2: Household coverage of iodised salt at national level (%)¹⁶

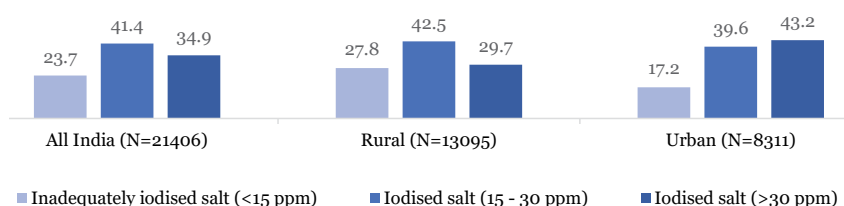


Figure 4.3: Household-level coverage of iodised salt across zones (%)

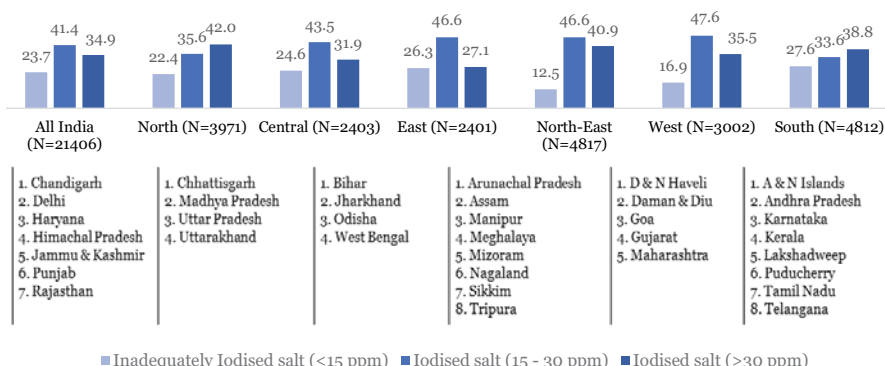
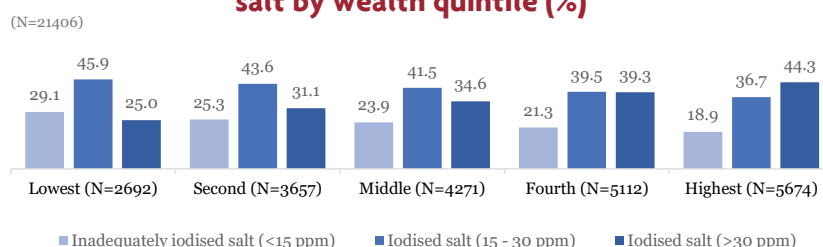


Figure 4.4: Household coverage of iodised salt by wealth quintile (%)



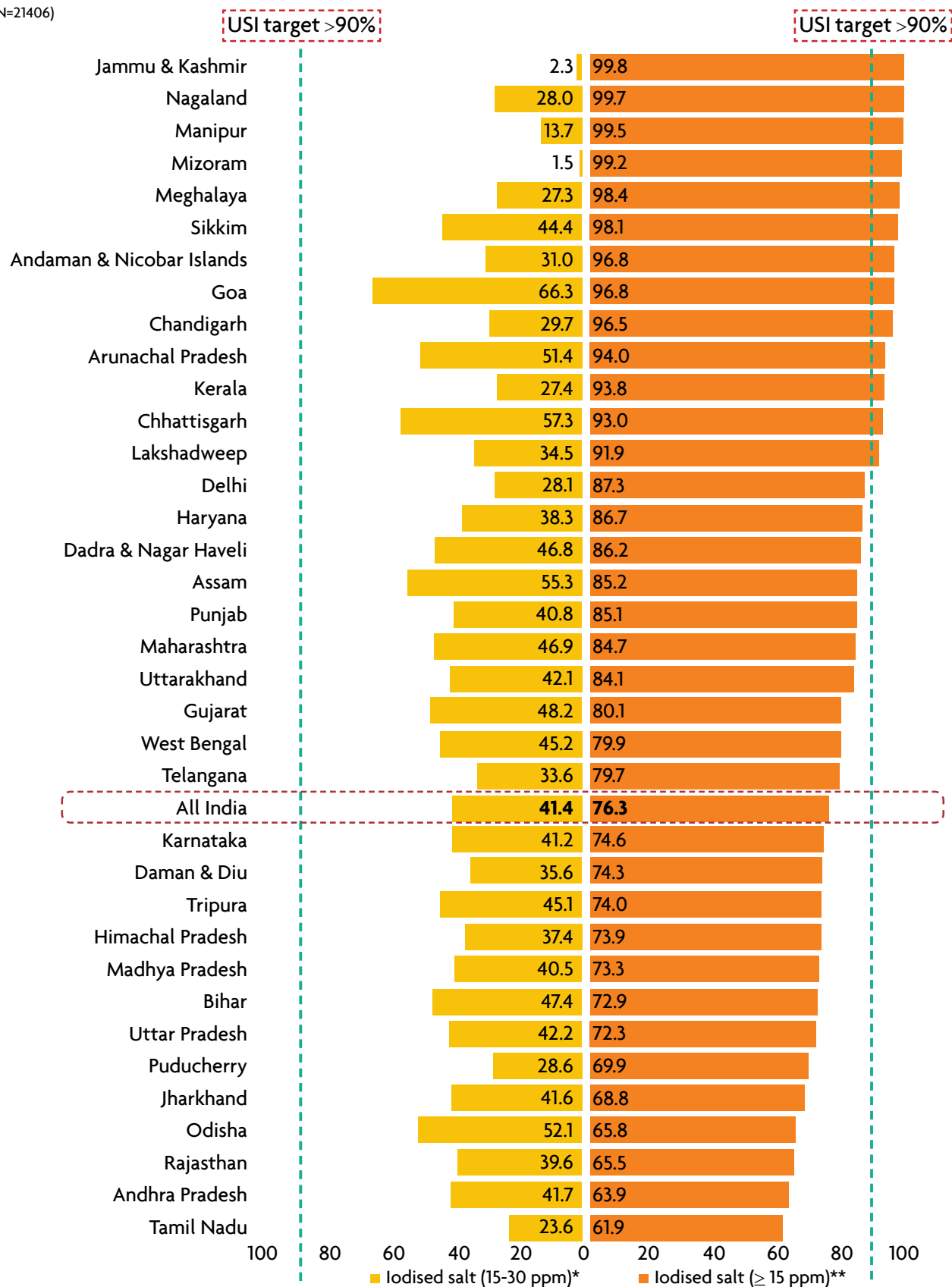
** According to the gazette notification of Government of India, dated August 2, 2018, the standard is 20 to 30 parts per million (ppm) (dry weight basis) at manufacture level and 15 to 30 ppm (dry weight basis) in the distribution channel including the retail level.

16. N is based on unweighted cases and the results are weighted



Figure 4.5: Household coverage of iodised salt at national and state/ UT level (%)

(N=21406)



Note : Target for achievement of Universal Salt Iodisation (USI) is > 90%

*According to the gazette notification of Government of India, dated August 2, 2018, the standard is 20 to 30 parts per million (ppm) (dry weight basis) at manufacture level and 15 to 30 ppm (dry weight basis) in the distribution channel including the retail level.

**According to the Food Safety and Standards (Food products standards and food additives) regulations, 2011, the standard was not less than 30 ppm (dry weight basis) at the manufacture level and not less than 15 ppm (dry weight basis) in the distribution channel including the retail level.

Note : The N is based on unweighted cases and the results are weighted

TABLE 4.1: HOUSEHOLD COVERAGE OF IODISED SALT IN % (95% CONFIDENCE INTERVALS IN PARENTHESES) IN INDIA AND STATES /UTS FOR SALT IODISED AT 15 TO 30 PPM AND ≥ 15 PPM

India/ States/ UTs	Iodised salt at 15 to 30 ppm % (95% CI : Lower limit, Upper limit)	Iodised salt at ≥ 15 ppm % (95% CI : Lower limit, Upper limit)
All India (N=21,406)	41.4 (39.4, 43.4)	76.3 (74.1, 78.5)
Andaman & Nicobar Islands (N=600)	31.0 (22.2, 41.4)	96.8 (93.8, 98.4)
Andhra Pradesh (N=600)	41.7 (33.6, 50.3)	63.9 (51.5, 74.6)
Arunachal Pradesh (603)	51.4 (39.7, 62.9)	94.0 (90.4, 96.3)
Assam (N=601)	55.3 (52.3, 58.3)	85.2 (80.4, 89.0)
Bihar (N=600)	47.4 (38.6, 56.4)	72.9 (64.0, 80.2)
Chandigarh (N=600)	29.7 (24.8, 35.2)	96.5 (94.4, 97.8)
Chhattisgarh (N=600)	57.3 (52.9, 61.7)	93.0 (89.8, 95.2)
Dadra & Nagar Haveli (N=601)	46.8 (40.0, 53.6)	86.2 (79.4, 91.0)
Daman & Diu (N=600)	35.6 (27.1, 45.2)	74.3 (66.7, 80.6)
Delhi (N=611)	28.1 (21.2, 36.3)	87.3 (76.5, 93.5)
Goa (N=601)	66.3 (54.5, 76.4)	96.8 (93.6, 98.4)
Gujarat (N=600)	48.2 (41.0, 55.4)	80.1 (72.3, 86.2)
Haryana (N= 601)	38.3 (31.7, 45.4)	86.7 (82.8, 89.9)
Himachal Pradesh (N=600)	37.4 (28.6, 47.2)	73.9 (64.0, 81.8)
Jammu & Kashmir (N=355)	2.3 (0.7, 7.2)	99.8 (98.7, 100.0)
Jharkhand (N=600)	41.6 (33.3, 50.4)	68.8 (57.5, 78.3)
Karnataka (N=601)	41.2 (35.1, 47.6)	74.6 (65.6, 81.9)
Kerala (N=601)	27.4 (21.1, 34.6)	93.8 (89.4, 96.4)
Lakshadweep (N=600)	34.5 (26.8, 43.0)	91.9 (88.0, 94.7)
Madhya Pradesh (N=603)	40.5 (35.0, 46.3)	73.3 (65.2, 80.0)
Maharashtra (N=600)	46.9 (39.1, 54.9)	84.7 (78.2, 89.6)
Manipur (N=600)	13.7 (9.9, 18.5)	99.5 (98.6, 99.8)
Meghalaya (N=600)	27.3 (16.5, 41.7)	98.4 (96.2, 99.4)
Mizoram (N=605)	1.5 (0.6, 4.1)	99.2 (97.5, 99.7)
Nagaland (N=600)	28.0 (18.2, 40.5)	99.7 (98.0, 100.0)
Odisha (N=601)	52.1 (40.1, 63.8)	65.8 (52.1, 77.3)
Puducherry (N=600)	28.6 (23.0, 34.8)	69.9 (63.7, 75.5)
Punjab (N=600)	40.8 (33.5, 48.6)	85.1 (76.2, 91.1)
Rajasthan (N=604)	39.6 (34.2, 45.3)	65.5 (55.2, 74.4)
Sikkim (N=600)	44.4 (35.1, 54.0)	98.1 (96.4, 99.0)
Tamil Nadu (N=610)	23.6 (17.2, 31.3)	61.9 (49.0, 73.3)
Telangana (N=600)	33.6 (26.3, 41.7)	79.7 (68.7, 87.6)
Tripura (N=608)	45.1 (40.1, 50.3)	74.0 (67.4, 79.7)
Uttar Pradesh (N=600)	42.2 (37.5, 47.0)	72.3 (64.6, 78.9)
Uttarakhand (N=600)	42.1 (29.3, 56.1)	84.1 (75.1, 90.3)
West Bengal (N=600)	45.2 (37.1, 53.5)	79.9 (73.4, 85.2)

The survey result shows that the north east zone (87.5%) and west zone (83.1%) had highest iodised salt (≥ 15 ppm) coverage, followed by north (77.6%) and central zone (75.4%). However, considering coverage of iodised salt with iodine content 15-30 ppm, west zone (47.6%) along with east (46.6%) and north-east zones (46.6%) were ahead of the other three zones.

Among all the zones, the north (42.0%) and south zones (38.8%), had the highest percentage of households which reported using salt with > 30 ppm iodine content.

With regards to the wealth quintiles, the coverage of iodised salt steadily increased with the ascending wealth quintiles, yet if only iodine concentration (15 - 30 ppm) was looked at, the percentage showed a mild decline with ascending wealth quintiles. It indicates that a higher percentage of economically well-off households used salt containing iodine content of >30 ppm (Figure 4.4).

Overall, it was found that, 13 states/UTs have achieved the USI target of greater than 90 per cent household iodised salt coverage.



Type of cooking salt used in the household

The type of cooking salt samples was categorised into refined, crushed, and crystal based on physical observations carried out in the ICCIDD laboratory. It was found that the majority (82.1%) of the households were using refined salt, followed by crystal salt (12.7%) and crushed (5.2%).

The pattern was similar across rural and urban areas; however, the usage of crystal salt was found to be slightly higher in urban areas (15.0%) against that in rural areas (11.2%). On the contrary, the use of refined salt was found to be slightly higher in rural areas (83.1%) as compared to urban areas (80.4%) (Figure 4.6).

Across all the zones, the use of refined salt was high except in the south zone where usage was found to be lower compared to other zones as shown in Figure 4.7. In the east and north-east zone use of crushed salt (10.8% and 14.2% respectively) was found to be higher than other zones and use of crystal salt was found to be higher in south zone compare to other zones. Nearly half of the households in the south zone (47.3%) reported to have used crystal salt (Figure 4.7).

No major difference was observed in the type of cooking salt used across the wealth quintiles. Usage of crushed salt negligible across all economic strata (Figure 4.8).

Figure 4.6: Type of salt available at the household level (%)

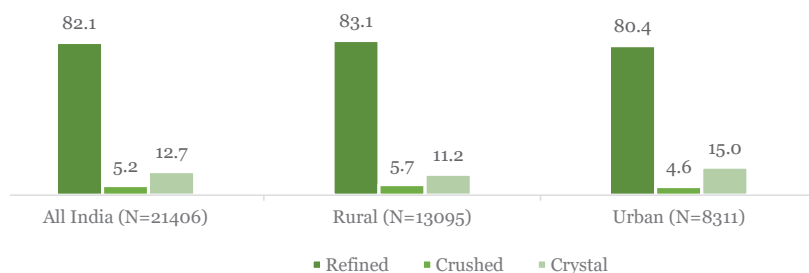


Figure 4.7: Type of salt available at the household level across zones (%)

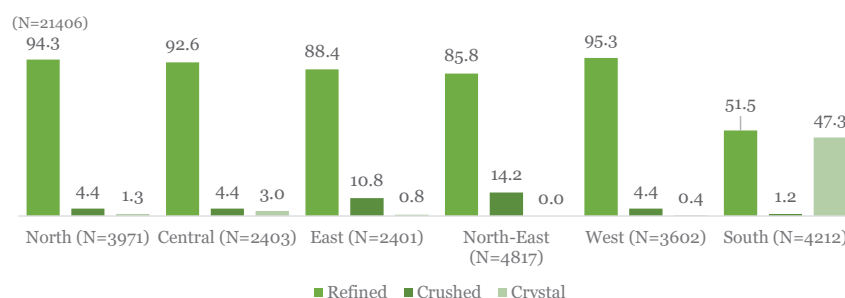


Figure 4.8: Type of salt available at household level by wealth quintile (%)

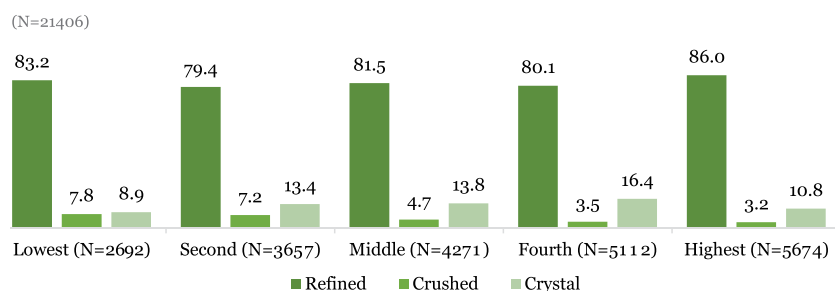
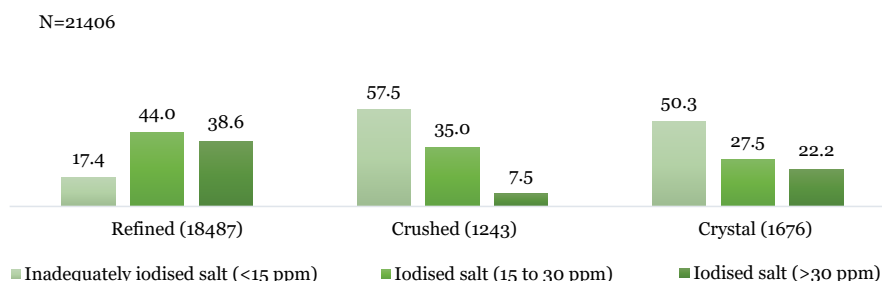


Figure 4.9: Iodisation level as per the type of salt (%)



Iodisation level of different types of salt

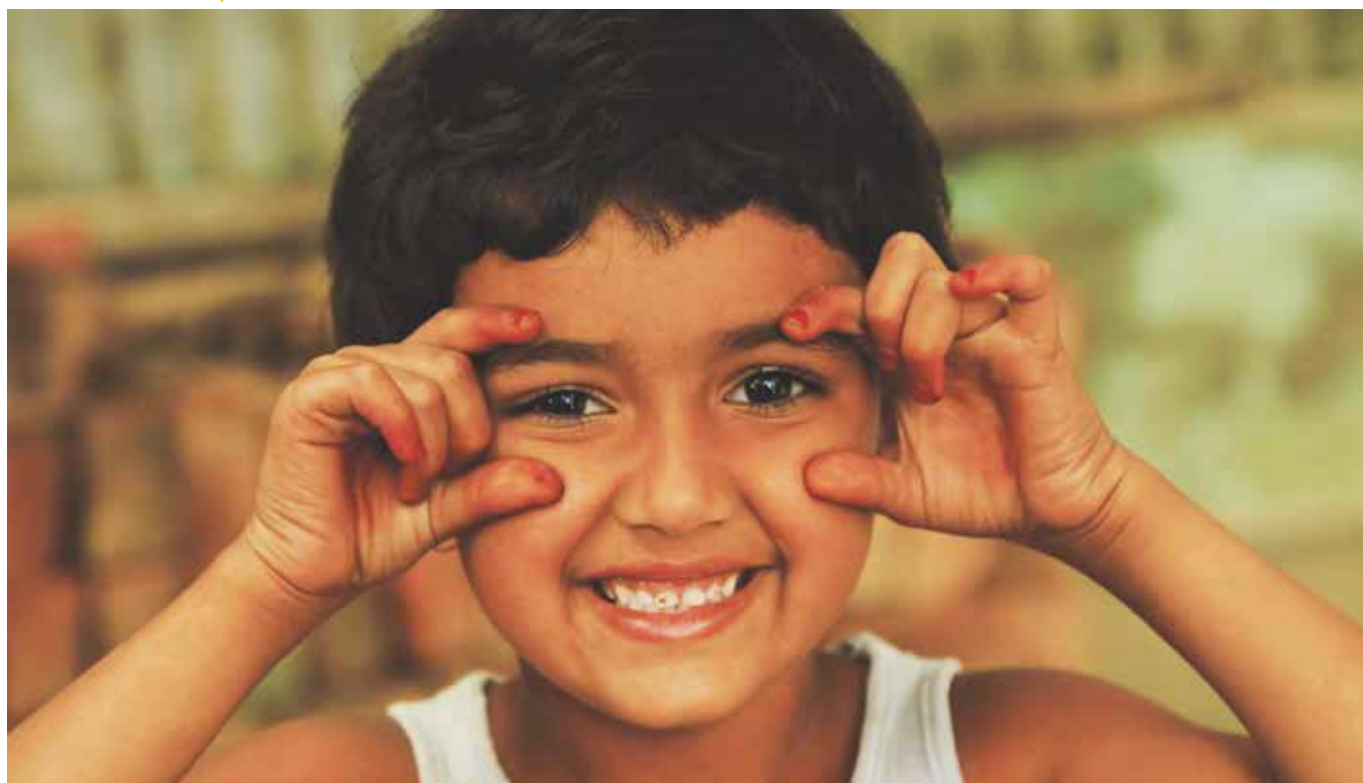
It was observed that iodine levels for 15-30 ppm and >30ppm were similar in refined salt 44 per cent and 38.7 per cent respectively. Disparity in iodine levels for categories 15-30 ppm and >30ppm were observed for crushed and crystal salt with nearly one third samples from both categories . Almost half of the samples of crushed (57.5%) and crystal salt (50.3%) was inadequately iodized (<15ppm) compared to only 17.4 per cent of the refined salt (Figure 4.9).

Summary

The national household coverage of iodised salt was found to be 76.3 per cent with ≥ 15 ppm iodine. In all, 16.1 per cent household had some iodine (>5 ppm to < 15 ppm) and 7.6 per cent of the households had salt with no iodine (< 5 ppm). More than two-fifth (41.4%) households were using iodised salt i.e. with iodine level of 15 to 30 ppm.

The use of iodised salt seems to be associated positively with economic status. However, the usage of iodised salt (15 - 30 ppm) was highest in the lowest quintile and showed a mild decline with increasing economic status.

As observed, refined salt constituted 82 per cent of the salt samples collected at the national level, with 82.6 per cent of these samples having ≥ 15 ppm of iodine. The study indicates that refined salt is better iodised as compared to crystal salt (49.7%) and crushed salt (42.5%). The availability of refined salts was found to be prevalent throughout India except in the south zone, where usage of both refined and crystal salts was almost equal. Crushed salt usage was found to be relatively higher in the north-east and east zones.



Annexures for Chapter 4

TABLE 4.1: TYPE OF SALT

Per cent distribution of type of salt across coverage of iodised salt in all India and states across all zones					
	Salt type	Unweighted N	Refined	Crushed	Crystal
Unweighted N		21406	18487	1243	1676
All India	Non-iodised salt (<15 ppm)	3665	17.4	57.5	50.3
	Iodised salt (15- 30 ppm)	8174	44.0	35.0	27.5
	Iodised salt (≥30 ppm)	9567	38.7	7.5	22.2
North zone	Non-iodised salt (<15 ppm)	607	19.7	58.3	100.0
	Iodised salt (15- 30 ppm)	1332	36.2	33.7	-
	Iodised salt (≥30 ppm)	2032	44.1	8.0	-
Chandigarh	Non-iodised salt (<15 ppm)	23	3.5	-	-
	Iodised salt (15- 30 ppm)	175	29.7	-	-
	Iodised salt (≥30 ppm)	402	66.8	-	-
Delhi	Non-iodised salt (<15 ppm)	59	11.0	100	-
	Iodised salt (15- 30 ppm)	191	28.7	-	-
	Iodised salt (≥30 ppm)	361	60.3	-	-
Haryana	Non-iodised salt (<15 ppm)	81	11.2	26.5	-
	Iodised salt (15- 30 ppm)	230	34.9	59.7	-
	Iodised salt (≥30 ppm)	290	53.9	13.8	-
Himachal Pradesh	Non-iodised salt (<15 ppm)	150	26.1	-	-
	Iodised salt (15- 30 ppm)	234	37.4	-	-
	Iodised salt (≥30 ppm)	216	36.5	-	-
Jammu & Kashmir	Non-iodised salt (<15 ppm)	1	0.2	-	-
	Iodised salt (15- 30 ppm)	12	2.3	-	-
	Iodised salt (≥30 ppm)	342	97.5	-	-
Punjab	Non-iodised salt (<15 ppm)	76	14.9	-	-
	Iodised salt (15- 30 ppm)	260	40.8	-	-
	Iodised salt (≥30 ppm)	264	44.3	-	-
Rajasthan	Non-iodised salt (<15 ppm)	217	29.8	87.9	100
	Iodised salt (15- 30 ppm)	230	42.3	9.6	-
	Iodised salt (≥30 ppm)	157	27.9	2.5	-
Central zone	Non-iodised salt (<15 ppm)	486	20.0	76.1	90.9
	Iodised salt (15- 30 ppm)	1089	46.0	19.1	3.4
	Iodised salt (≥30 ppm)	828	34.0	4.8	5.7
Chhattisgarh	Non-iodised salt (<15 ppm)	46	6.6	31.3	-
	Iodised salt (15- 30 ppm)	351	57.8	29.7	-
	Iodised salt (≥30 ppm)	203	35.6	39.0	-

Per cent distribution of type of salt across coverage of iodised salt in all India and states across all zones					
	Salt type	Unweighted N	Refined	Crushed	Crystal
Madhya Pradesh	Non-iodised salt (<15 ppm)	170	19.1	64.3	82.3
	Iodised salt (15- 30 ppm)	244	43.8	30.6	6.4
	Iodised salt (≥30 ppm)	189	37.0	5.1	11.3
Uttarakhand	Non-iodised salt (<15 ppm)	113	13.7	49.2	89.1
	Iodised salt (15- 30 ppm)	239	42.5	39.6	10.9
	Iodised salt (≥30 ppm)	248	43.8	11.2	-
Uttar Pradesh	Non-iodised salt (<15 ppm)	157	23.5	100	100
	Iodised salt (15- 30 ppm)	255	44.6	-	-
	Iodised salt (≥30 ppm)	188	31.9	-	-
East zone	Non-iodised salt (<15 ppm)	720	22.5	53.0	96.1
	Iodised salt (15- 30 ppm)	1091	48.0	38.4	3.9
	Iodised salt (≥30 ppm)	590	29.5	8.6	-
Bihar	Non-iodised salt (<15 ppm)	166	24.6	59.7	-
	Iodised salt (15- 30 ppm)	281	48.9	27.7	-
	Iodised salt (≥30 ppm)	153	26.5	12.6	-
Jharkhand	Non-iodised salt (<15 ppm)	192	25.1	82.6	-
	Iodised salt (15- 30 ppm)	243	44.6	15.4	-
	Iodised salt (≥30 ppm)	165	30.2	2.0	-
Odisha	Non-iodised salt (<15 ppm)	237	26.8	64.6	96.1
	Iodised salt (15- 30 ppm)	286	57.9	27.6	3.9
	Iodised salt (≥30 ppm)	78	15.3	7.8	-
West Bengal	Non-iodised salt (<15 ppm)	125	17.0	37.9	-
	Iodised salt (15- 30 ppm)	281	43.7	53.6	-
	Iodised salt (≥30 ppm)	194	39.3	8.5	-
North-East zone	Non-iodised salt (<15 ppm)	321	7.2	44.7	-
	Iodised salt (15- 30 ppm)	1609	47.4	41.6	-
	Iodised salt (≥30 ppm)	2887	45.4	13.7	-
Arunachal Pradesh	Non-iodised salt (<15 ppm)	41	5.2	36.0	-
	Iodised salt (15- 30 ppm)	318	51.4	50.0	-
	Iodised salt (≥30 ppm)	244	43.3	14.0	-
Assam	Non-iodised salt (<15 ppm)	88	9.8	65.3	-
	Iodised salt (15- 30 ppm)	331	57.8	30.7	-
	Iodised salt (≥30 ppm)	182	32.4	4.0	-
Manipur	Non-iodised salt (<15 ppm)	3	0.4	-	-
	Iodised salt (15- 30 ppm)	86	13.7	-	-
	Iodised salt (≥30 ppm)	511	85.9	-	-
Meghalaya	Non-iodised salt (<15 ppm)	9	1.6	-	-
	Iodised salt (15- 30 ppm)	154	27.3	-	-
	Iodised salt (≥30 ppm)	437	71.1	-	-

Per cent distribution of type of salt across coverage of iodised salt in all India and states across all zones					
	Salt type	Unweighted N	Refined	Crushed	Crystal
Mizoram	Non-iodised salt (<15 ppm)	5	0.8	-	-
	Iodised salt (15- 30 ppm)	11	1.5	-	-
	Iodised salt (≥30 ppm)	589	97.7	-	-
Nagaland	Non-iodised salt (<15 ppm)	1	0.3	-	-
	Iodised salt (15- 30 ppm)	177	28.0	-	-
	Iodised salt (≥30 ppm)	422	71.7	-	-
Sikkim	Non-iodised salt (<15 ppm)	11	1.6	58.2	-
	Iodised salt (15- 30 ppm)	260	44.6	-	-
	Iodised salt (≥30 ppm)	329	53.8	41.8	-
Tripura	Non-iodised salt (<15 ppm)	163	4.8	29.9	-
	Iodised salt (15- 30 ppm)	272	22.4	49.4	-
	Iodised salt (≥30 ppm)	173	72.8	20.7	-
West zone	Non-iodised salt (<15 ppm)	497	15.0	49.3	99.3
	Iodised salt (15- 30 ppm)	1455	47.8	44.7	0.4
	Iodised salt (≥30 ppm)	1050	37.1	6.0	0.3
Dadra & Nagar Haveli	Non-iodised salt (<15 ppm)	95	11.5	-	82.7
	Iodised salt (15- 30 ppm)	271	47.9	-	12.6
	Iodised salt (≥30 ppm)	235	40.6	-	4.7
Daman & Diu	Non-iodised salt (<15 ppm)	153	17.2	55.9	84.0
	Iodised salt (15- 30 ppm)	207	39.8	21.5	6.6
	Iodised salt (≥30 ppm)	240	43.0	22.6	9.4
Goa	Non-iodised salt (<15 ppm)	23	3.2	-	-
	Iodised salt (15- 30 ppm)	407	66.3	-	-
	Iodised salt (≥30 ppm)	171	30.5	-	-
Gujarat	Non-iodised salt (<15 ppm)	123	19.6	30.1	-
	Iodised salt (15- 30 ppm)	296	47.7	63.0	-
	Iodised salt (≥30 ppm)	181	32.7	6.9	-
Maharashtra	Non-iodised salt (<15 ppm)	103	12.4	55.7	100
	Iodised salt (15- 30 ppm)	274	47.7	38.7	-
	Iodised salt (≥30 ppm)	223	39.9	5.6	-
South zone	Non-iodised salt (<15 ppm)	1034	9.2	71.1	46.4
	Iodised salt (15- 30 ppm)	1598	37.3	28.9	29.8
	Iodised salt (≥30 ppm)	2180	53.5	-	23.8
Andaman & Nicobar Island	Non-iodised salt (<15 ppm)	21	3.2	-	-
	Iodised salt (15- 30 ppm)	192	31.0	-	-
	Iodised salt (≥30 ppm)	387	65.8	-	-
Andhra Pradesh	Non-iodised salt (<15 ppm)	211	15.0	21.9	80.9
	Iodised salt (15- 30 ppm)	250	54.7	78.1	13.3
	Iodised salt (≥30 ppm)	139	30.3	-	5.8


Per cent distribution of type of salt across coverage of iodised salt in all India and states across all zones					
	Salt type	Unweighted N	Refined	Crushed	Crystal
Karnataka	Non-iodised salt (<15 ppm)	156	3.9	-	33.2
	Iodised salt (15- 30 ppm)	249	56.2	-	35.7
	Iodised salt (≥30 ppm)	196	39.9	-	31.1
Kerala	Non-iodised salt (<15 ppm)	41	3.8	-	18.8
	Iodised salt (15- 30 ppm)	177	26.5	-	31.5
	Iodised salt (≥30 ppm)	383	69.7	-	49.7
Lakshadweep	Non-iodised salt (<15 ppm)	48	6.5	-	38.7
	Iodised salt (15- 30 ppm)	219	34.6	100	29.9
	Iodised salt (≥30 ppm)	333	59.0	-	31.4
Puducherry	Non-iodised salt (<15 ppm)	180	6.2	-	59.4
	Iodised salt (15- 30 ppm)	171	31.9	-	24.5
	Iodised salt (≥30 ppm)	249	61.9	-	16.1
Tamil Nadu	Non-iodised salt (<15 ppm)	239	6.5	-	53.6
	Iodised salt (15- 30 ppm)	144	14.9	-	27.8
	Iodised salt (≥30 ppm)	227	78.6	-	18.6
Telangana	Non-iodised salt (<15 ppm)	138	13.7	78.3	74.3
	Iodised salt (15- 30 ppm)	196	34.9	21.7	22.2
	Iodised salt (≥30 ppm)	266	51.4	-	3.5



CHAPTER - 5

IODINE STATUS AMONG WOMEN OF REPRODUCTIVE AGE (WRA)





The iodine status among women of reproductive age (WRA) has been presented by the place of residence, zones and wealth quintile. Here women of reproductive age have been considered as a proxy for the population. They were found to have adequate iodine nutrition as per the WHO guideline for median urinary iodine concentration.

The impact of salt iodisation programmes is best assessed through the measurement of Urinary Iodine Concentrations (UIC) in population, which is a well-accepted and easily measurable indicator for iodine status. Median UIC is considered a sensitive biomarker of current iodine intake and can reflect recent changes in the iodine status of the population. The median UIC is the preferred measure of central tendency along with percentiles to describe the distribution of data¹⁷. Iodised salt at the household level, continues to be the primary source of iodine, though there can be other sources of salt and iodine in food.

Based on studies of balance and excretion over a 24- hour period, a safe daily intake of iodine has been estimated to be between a minimum of 50 µg and a maximum of at least 1000 µg. A generally accepted desirable adult intake is 100-300 µg/day. At all intake levels, a proportionate amount of iodine is excreted in the urine, which is the biochemical basis for assessing iodine status.¹⁸

According to global recommendations, household-level data on salt iodine content and population-based median UIC data should be collected every five years¹⁹. Under the survey, women of reproductive age (15-49 years) was

17. DeMaeyer, E. M, Lowenstein, F. W, Thilly, C. W & World Health Organization. (1979).

The control of endemic goitre / E. M. DeMaeyer, F. W. Lowenstein, C. H. Thilly. World Health Organization.
http://apps.who.int/iris/bitstream/10665/40085/1/9241560606_eng.pdf

18. https://apps.who.int/iris/bitstream/handle/10665/58693/WHO_NUT_94.4.pdf?sequence=1

19. World Health Organization. *Assessment of iodine deficiency disorders and monitoring their elimination: a guide for programme managers*. Geneva: WHO; 2007.

taken as a proxy indicator group to the iodine status of the population. Further, considering the higher requirement of iodine amongst pregnant women (PW) and lactating women (LW), equal samples were collected from each of the three categories i.e. pregnant women (PW), lactating women (LW) (having an infant less than 6 months of age) and non-pregnant non-lactating women (NPNLW).

A total of 21,406 urine samples were collected across 29 states and 7 UTs, ensuring an equal distribution amongst all respondent group of women of reproductive age across all states/UTs, with a caveat that this survey was not powered for representing median UIC at the state level. All the urine samples collected were tested centrally at ICCIDD laboratory in Delhi. The median UIC among the women of reproductive age (15-49 years) is represented across place of residence, zones and wealth quintile in this chapter.

The WHO/ICCIDD/UNICEF²⁰ urinary iodine cut off value of median UIC was used to assess iodine nutrition among PW, LW and NPNLW are presented in the below table 5.1.

TABLE 5.1: EPIDEMIOLOGIC CRITERIA FOR ASSESSING IODINE NUTRITION BASED ON MEDIAN UIC IN DIFFERENT TARGET GROUPS

Median urinary iodine (µg/L)	Iodine intake	Iodine status
School-age children (6 years or older)²¹		
<20	Insufficient	Severe iodine deficiency
20–49	Insufficient	Moderate iodine deficiency
50–99	Insufficient	Mild iodine deficiency
100–199	Adequate	Adequate iodine nutrition
200–299	Above requirements	May pose a slight risk of more than adequate iodine intake in these populations
≥300	Excessive ²²	Risk of adverse health consequences (iodine-induced hyperthyroidism, autoimmune thyroid disease)
Pregnant women		
<150	Insufficient	
150–249	Adequate	
250–499	Above requirements	
≥500	Excessive	
Lactating women and children aged less than 2 years		
<100	Insufficient	
≥100	Adequate	

20. WHO/UNICEF/ICCIDD. Assessment of iodine deficiency disorders and monitoring their elimination: a guide for programme managers, 3rd ed. Geneva: World Health Organization; 2007. (http://whqlibdoc.who.int/publications/2007/9789241595827_eng.pdf, accessed 20 August 2013)

21. Applies to adults, but not to pregnant and lactating women.

22. The term “excessive” means in excess of amount required to prevent and control iodine deficiency.

Median urinary iodine concentration (UIC) ($\mu\text{g/L}$) among women of reproductive age (WRA)

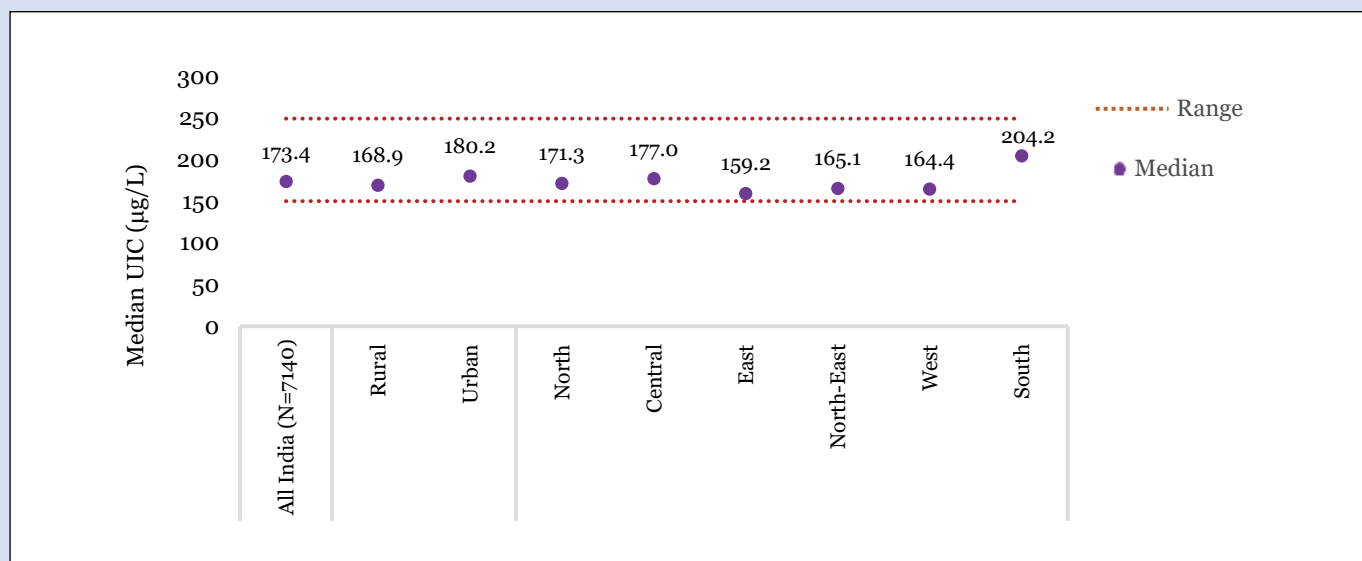
The median UIC among women of reproductive age has been presented zone wise. The following graphical representations also contain the lower and upper cut-off values of adequate range for the respective target group, following the WHO standard as presented in table 5.1.

Pregnant women

At the national level, the median UIC among pregnant women was found to be $173.4 \mu\text{g/L}$, which is well within the adequate range (i.e. between $150\text{--}249 \mu\text{g/L}$). The findings denote that pregnant women at national and zonal level were found to be adequate as per the epidemiologic criteria mentioned in table 5.1, have adequate iodine nutrition. Across rural and urban areas, the findings were similar with urban areas having slightly higher median UIC ($180.2 \mu\text{g/L}$) compared to rural areas ($168.9 \mu\text{g/L}$). At a zonal level, the median UIC was reported highest in the south zone ($204.2 \mu\text{g/L}$) while it was reported lowest in the east zone ($159.2 \mu\text{g/L}$).

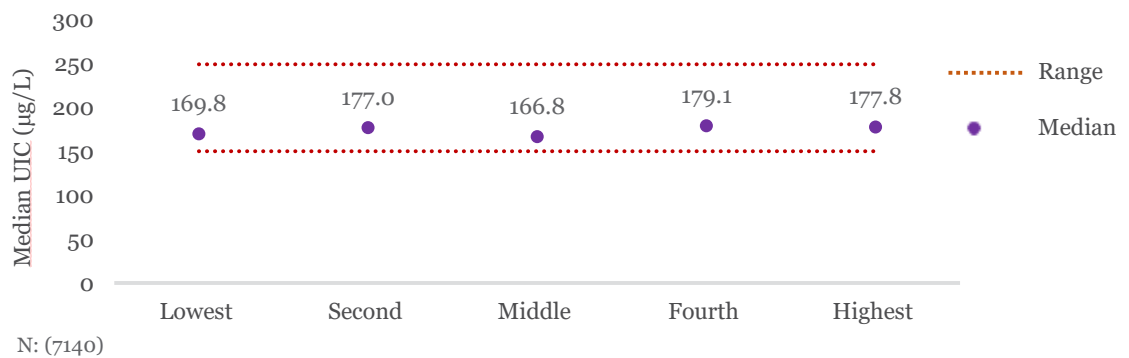


Figure 5.1: Median UIC ($\mu\text{g/L}$) among pregnant women by place of residence and zones



There isn't any notable difference between the distributions of median UIC across the wealth quintile for pregnant women, indicating that the economic condition may not have any bearing on the iodine nutrition status. The median UIC was highest in the fourth quintile (179.1 µg/L) and least in the middle wealth quintile (166.8 µg/L).

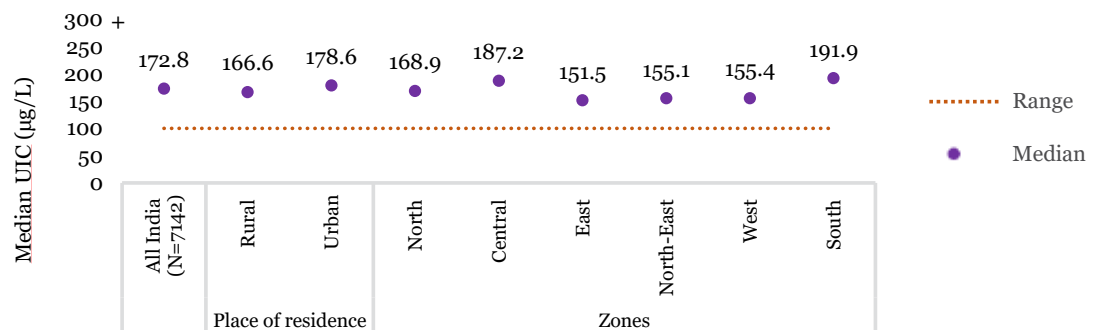
Figure 5.2: Median UIC (µg/L) among pregnant women across wealth quintiles



Lactating Women

The median UIC among lactating women was found to be 172.8 µg/L national level and the median UIC for lactating women was found to have adequate iodine nutrition (≥ 100 µg/L), as per WHO urinary iodine cut off value of median UIC. Across rural and urban areas, only a slight variation was observed; with urban areas having higher median UIC (178.6 µg/L) compared to rural area (166.6 µg/L). At the zonal level, the median UIC was reported highest in the south zone (191.9 µg/L) while east zone reported the lowest (151.5 µg/L), as depicted in figure 5.3.

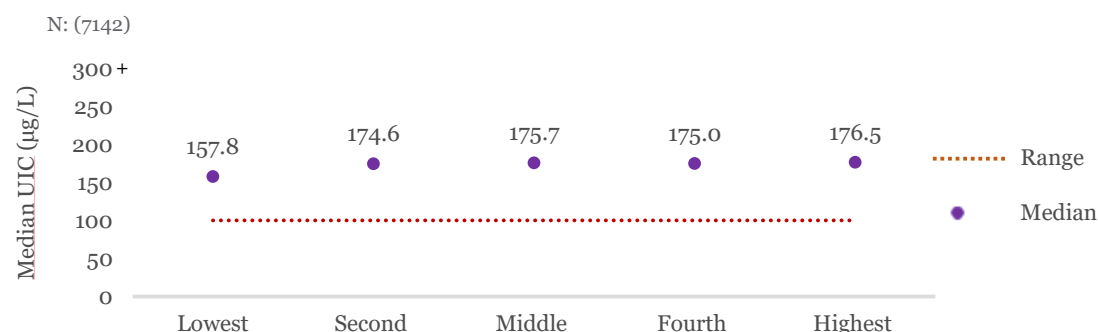
Figure 5.3: Median UIC (µg/L) among lactating women by place of residence and zones





The distribution of median UIC was found to be similar across the wealth quintiles for lactating women. The median UIC was the lowest in the lowest quintile (157.8 µg/L) while the median UIC across all other quintiles were almost similar. Overall, across place of residence, zones and wealth quintile median UIC for lactating women was found to have adequate iodine nutrition as per the criteria mentioned above in the chapter.

Figure 5.4: Median UIC (µg/L) among lactating women by wealth quintiles



Non-pregnant non-lactating women

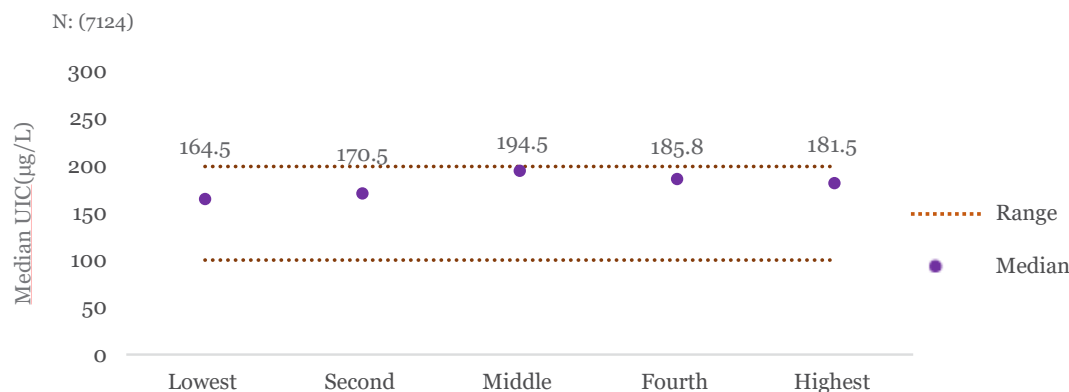
At national level, 178 µg/L was found to be the median UIC among WRA, who are neither pregnant nor lactating and in the age group 15 – 49 years. As per the WHO epidemiologic criteria, the median UIC was found to have adequate iodine nutrition (100–199 µg/L). Across rural and urban regions, there was no considerable difference. At a zonal level the median UIC was reported highest in the south zone (213.6 µg/L) which was slightly higher than the upper cut off resulting it to be above requirement urinary iodine cut off value, while north-east zone had the lowest median UIC (154.2 µg/L).

Figure 5.5: Median UIC (µg/L) among non-pregnant non-lactating women by place of residence and zones



Across the wealth quintile, the median UIC was highest in the middle quintile (194.5 µg/L) and least in the lowest wealth quintile (164.5 µg/L). The median UIC among all the wealth quintiles was found to have adequate iodine nutrition as per WHO standards, mentioned above in table 5.1.

Figure 5.6: Median UIC ($\mu\text{g/L}$) among non-pregnant non-lactating women across the wealth quintile



Summary

According to the WHO guidelines, the median UIC among all three respondent group of PW, LW & NPNLW of WRA was found to be adequate across place of residence, zones and wealth quintile. At a zonal level, the median UIC was reported to be highest in the south zone among all WRA, i.e. pregnant women (204.2 $\mu\text{g/L}$), lactating women (191.9 $\mu\text{g/L}$) and non-pregnant non-lactating women (213.6 $\mu\text{g/L}$). Whereas it was reported lowest in east zone among pregnant women (159.2 $\mu\text{g/L}$), lactating women (151.5 $\mu\text{g/L}$), and north-east zone had the lowest median UIC (154.2 $\mu\text{g/L}$) for non-pregnant non-lactating women.

CHAPTER - 6

KNOWLEDGE, ATTITUDE AND PRACTICE ABOUT IODISED SALT



This chapter discusses the knowledge, attitude and practice of the households related to iodised salt consumption. The chapter also provides an overview of the key indicators such as wealth quintile along with their place of residence. The attitudinal indicators were only captured from those who were aware of iodised salt.

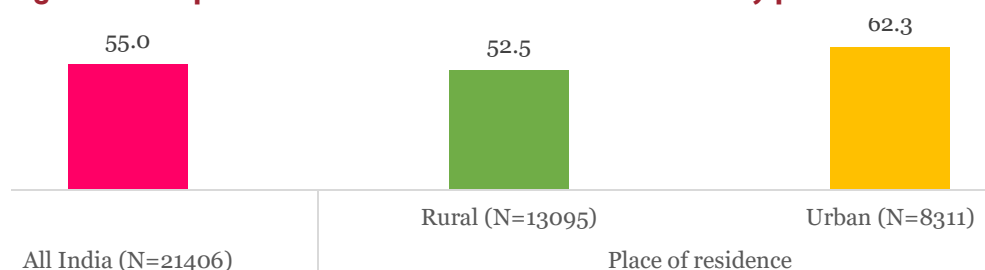
The knowledge about iodised salt among households is represented by the level of awareness, sources of information, identification and benefit perceived of iodised salt. Attitude and perception towards iodised salt were measured through a five-point Likert type attitude scale. The consumer buying practices are also presented in this chapter.

More than half (55 %) of the respondents were aware about iodised salt; mostly through two common sources; television followed by community health functionaries like ASHA /ANM or AWWs.

Awareness and source of information about iodised salt

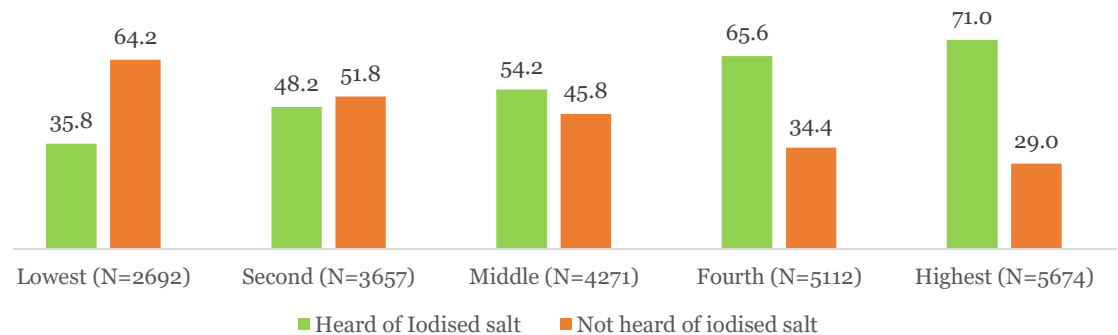
More than half of the respondents (55%) had heard of iodised salt. Higher proportion of people in urban areas (62.3%) had heard of iodized salt compared to rural areas (52.5%)

Figure 6.1: Respondents who have heard of iodised salt by place of residence (%)



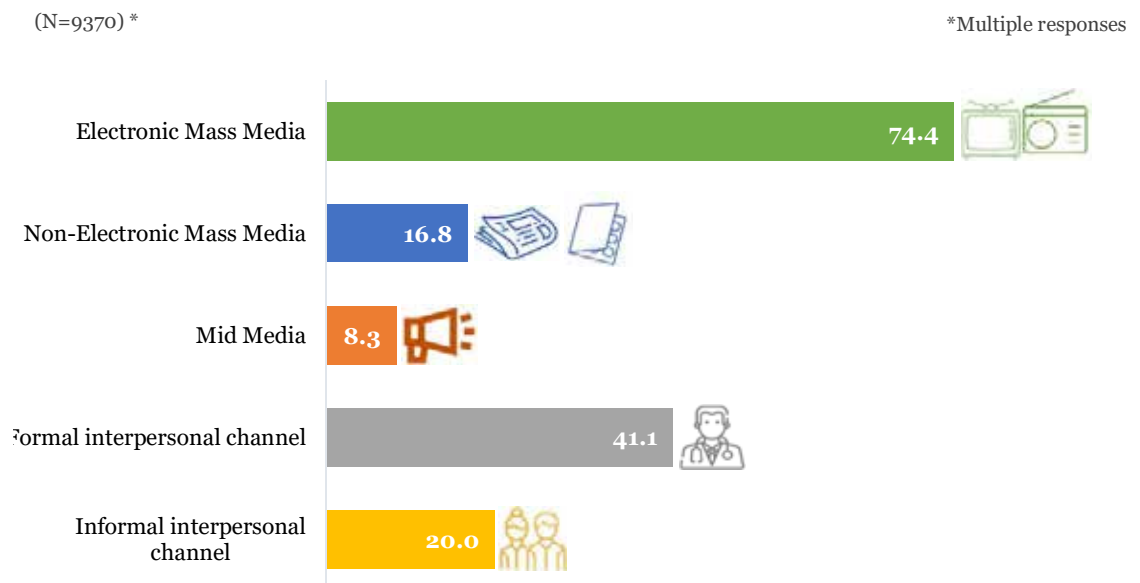
The proportion of the respondents who had heard of iodised salt reduced to nearly half from highest to lowest wealth quintile. This shows that awareness levels were higher among households from the highest wealth quintile.

Figure 6.2: Respondents who have heard of iodised salt by wealth quintiles (%)



Households received information related to the benefit of iodised salt through various communication channels. When asked about the sources of information to those who had heard of iodised salt, the respondents reported electronic mass media (TV and Radio) as the most common source of information followed by interpersonal channel of communication.

Figure 6.3: Source of awareness about iodised salt (%)

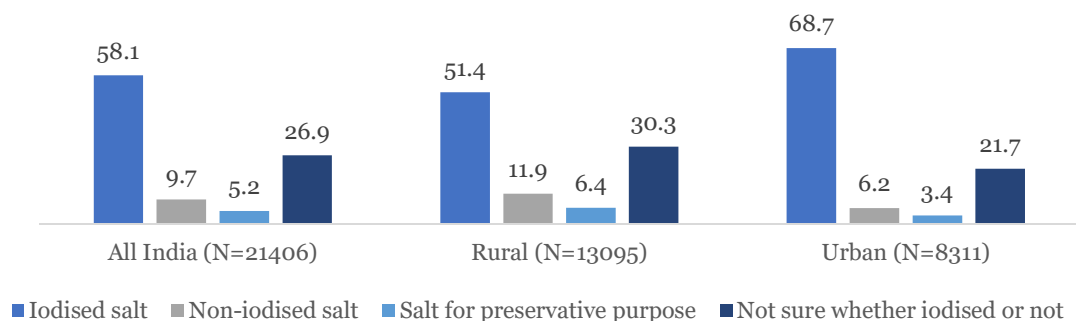


**Among those households, who had heard of iodised salt, excluding households who did not report iodised salt as a good characteristic of cooking salt)*

Reported use of iodised salt for cooking purpose

About a little less than three out of every five households (58.1%) reported using iodised salt for cooking purposes, while about one-tenth (9.7%) reported using non-iodised cooking salt. More than a quarter (26.9%) respondents were unaware if the cooking salt they used was iodised or not. Overall, 5.2 percent of all the households reported using preservative salt for cooking purposes.

Figure 6.4: Percentage of reported use of iodised salt for cooking in the household



Determinants for the kind of salt purchased

The two most important factors in decision making for purchase of cooking salt at the national level were, price (41.0%) and brand (40.9%) followed by saltiness (31.6%). Among the rural areas, price (41.2%), and among the urban areas brand (47.8%) were found to be the most important factors in determining the purchase of salt.



Figure 6.5: Key factors determining the purchase of salt (%)

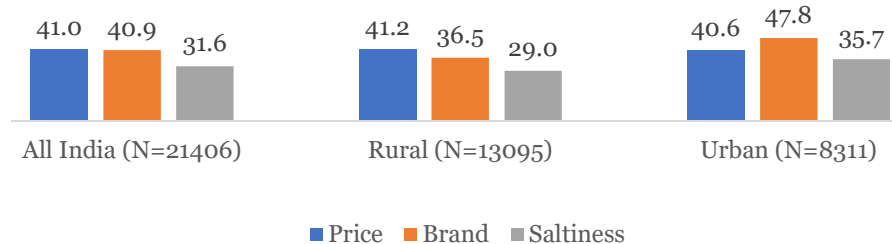
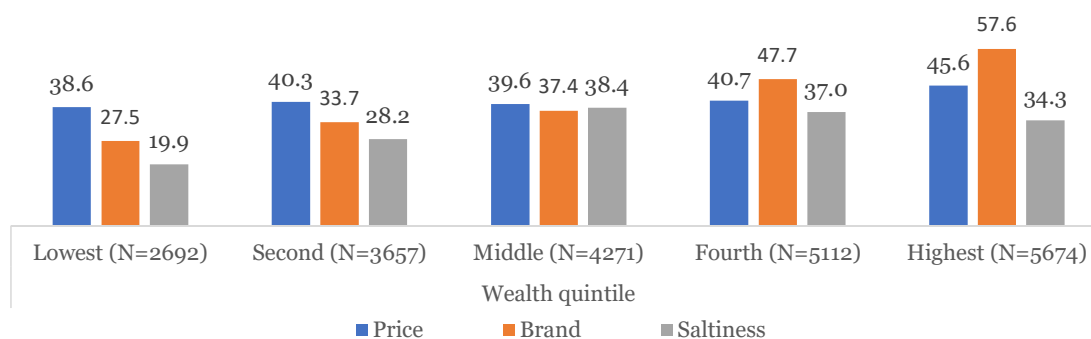
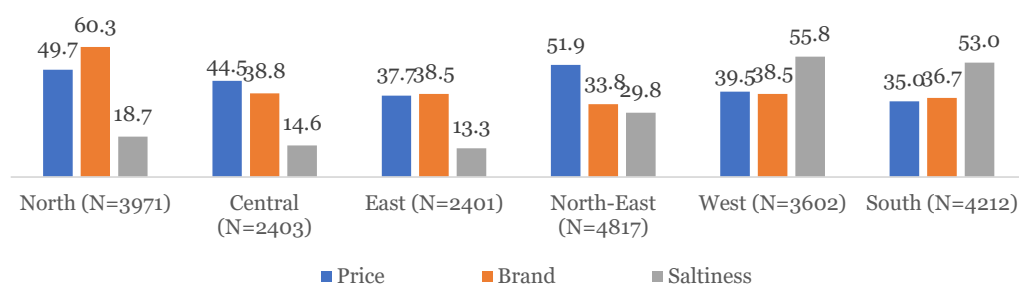


Figure 6.6: Key factors determining the purchase of salt by wealth quintiles (%)



At the zonal level, there is a varied distribution of the factors which determine the purchase of salt. In the north zone, brand (60.3%) was reported as the key determinant, while the price was the key determinant in the central Zone (44.5%) and north-east (51.9%) while it was saltiness in the south (53.0%) (Figure 6.7).

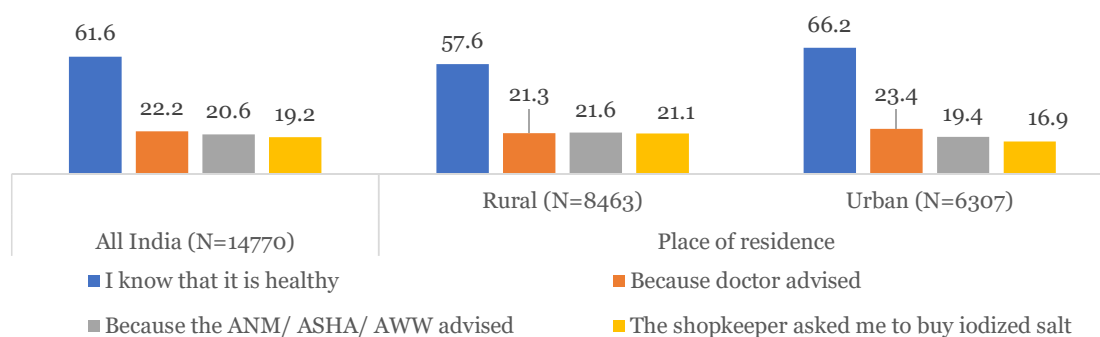
Figure 6.7: Key factors determining the purchase of salt across zones (%)



Determinants of using iodised salt

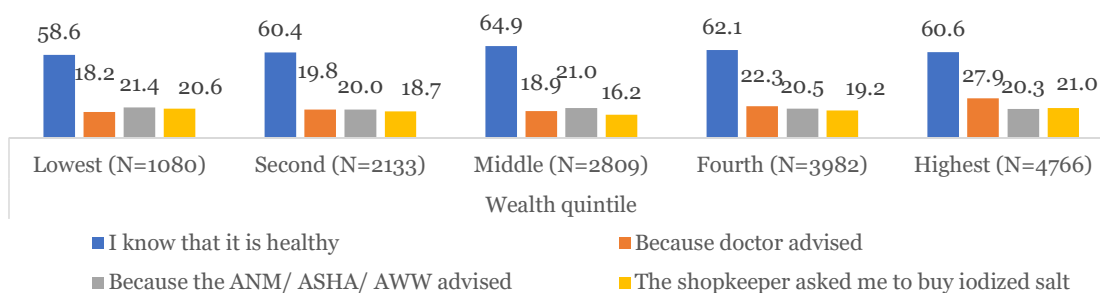
Overall, 61.6 per cent of the households reported that they use iodised salt because they know that it is healthy. While it was found that advice by doctor (22.2%), ANM/ ASHA/ AWW (20.6%) and suggestion by shopkeeper (19.2%) were the other most important determinants to use iodised salt.

Figure 6.8: Key determinants of using iodised salt (%)



The distribution of the determinants of use of iodised salt across rural/ urban area and wealth quintiles was similar to the national level.

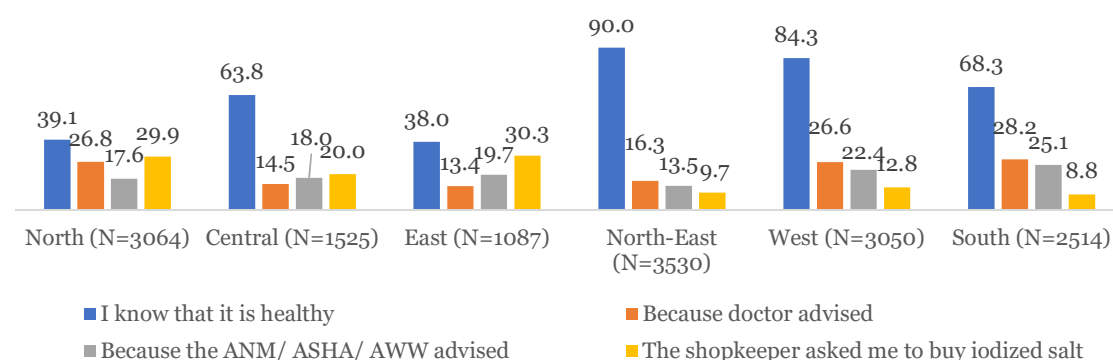
Figure 6.9: Key determinants of using iodised salt (%) across wealth quintile



Across zones, households reported that they used iodised salt because they know that it is healthy with the highest in north-east (90.0%) and west (84.3%).



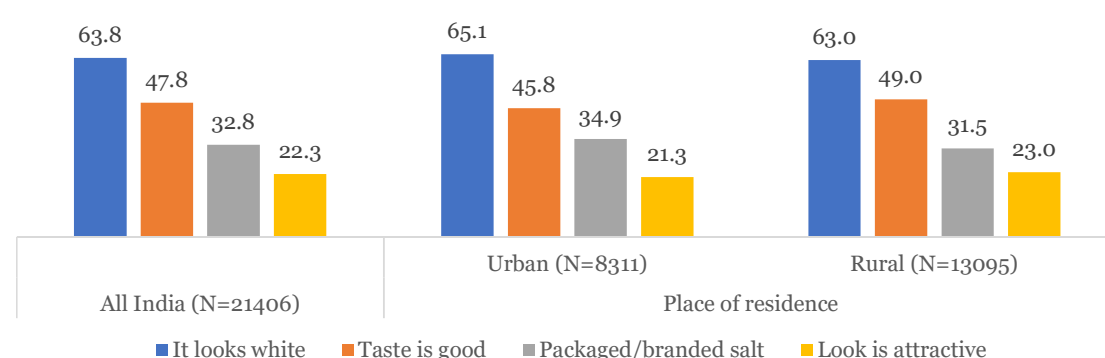
Figure 6.10: Key determinants of using iodised salt (%) across zones



Perception of good quality cooking salt

At national level, 63.8 percent of the households reported that the key characteristic of good quality salt was that “it looks white”. This was followed by “taste is good” (47.8%), “packaged/branded salt (32.8%) and “look is attractive” (22.3%) reported as characteristics of good quality cooking salt. A similar perception was observed across the place of residence, wealth quintile and zones, with regards to the characteristics of good quality of cooking salt.

Figure 6.11: Key characteristics of good quality salt (%)

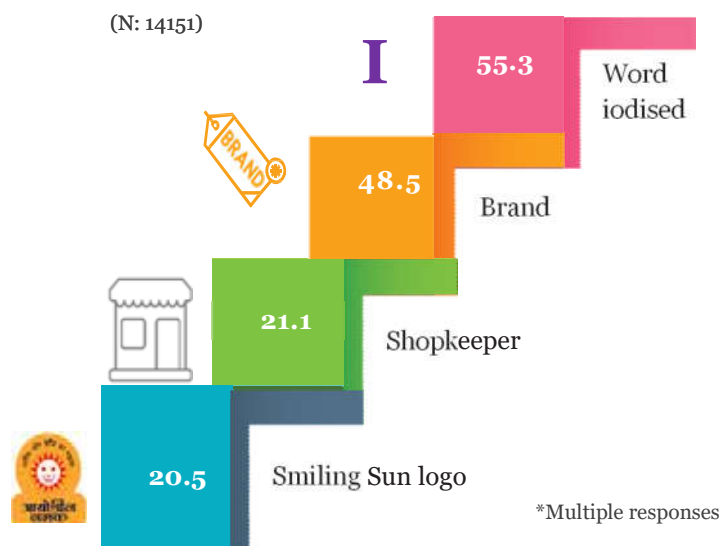


Identification of iodised salt

The “Smiling Sun” logo is a voluntary certification used by salt producers registered with the government to indicate that the salt has been iodised²³. In 1989, the Ministry of Health approved the “Smiling Sun” logo for easy identification of iodised salt by the public. The logo is registered with the Salt Department. Use of the logo, however, is not mandatory and is not regulated.

23. Reaching the poor with adequately iodised salt through the Supplementary Nutrition Programme and Midday Meal Scheme in Madhya Pradesh, India; <https://www.who.int/bulletin/volumes/91/7/12-110833/en/>

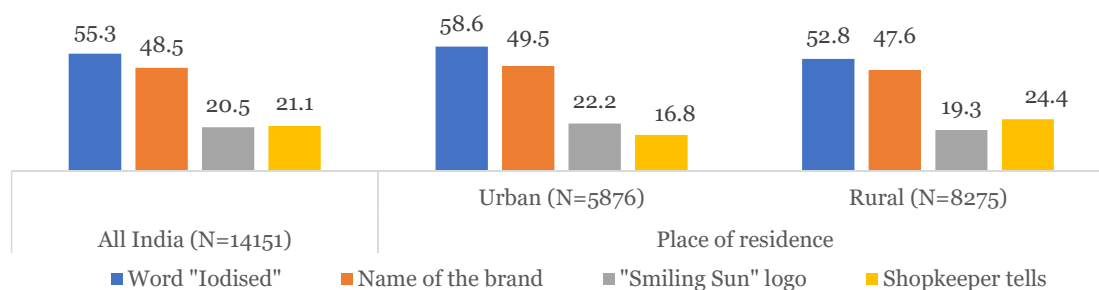
Figure 6.12: Identification of Iodised Salt (%)



Only one-fifth (20.5%) of the respondents reported that they identify iodised salt through the “Smiling Sun” logo on the pack. The level of association is slightly higher in the rural area than in urban areas. However, when we move across the wealth quintile, it was observed that identification of iodised salt with the word “Iodised” written on the pack is consistent.

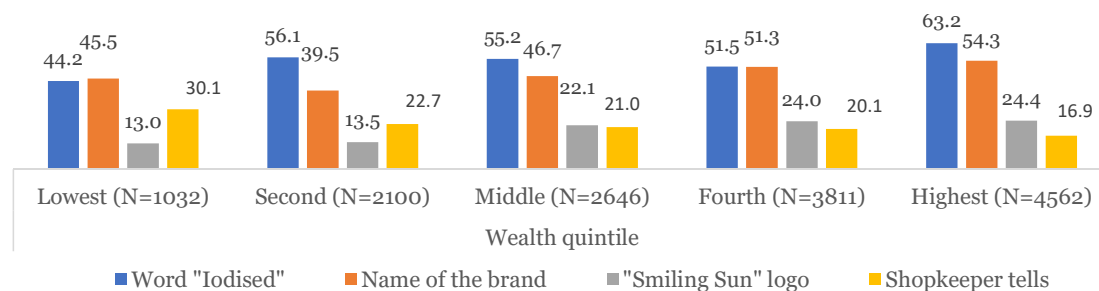
At the national level, 55.3 per cent of the respondents categorically stated that they looked for the word “iodised” as an assurance.

Figure 6.13: Identification of iodised salt by place of residence (%)



It was also observed that, 63.2 per cent of the households who identified iodised salt through the words “Iodised” written on the pack, belonged to the highest wealth quintile.

Figure 6.14: Identification of iodised salt by wealth quintiles (%)





Perception of iodised salt

The attitude of the respondents towards iodised salt was measured on a five-point Likert type attitude scale on various statements related to price, package, organoleptic and health effects about iodised salt, and respondents were then asked about their level of agreement or disagreements to the statements.

The reliability of the scale was measured through Cronbach alpha, which is a measure of internal consistency. A reliability coefficient of 0.70 is considered acceptable in most social science research studies and situations. George and Mallery (2003) have provided the following rules of thumb: “ $\alpha > .9$ – Excellent, $\alpha > .8$ – Good, $\alpha > .7$ – Acceptable, $\alpha > .6$ – Questionable, $\alpha > .5$ – Poor, and $\alpha < .5$ – Unacceptable”. The alpha coefficient of 0.748 for the scale suggest that the items have acceptable internal consistency.

In terms of health effects (statements such as: consumption of iodised salt related to normal growth of foetus in pregnant women, refined iodised salt is unhealthy, availability of iodine in our normal diet is not sufficient and iodised salt is required, consumption of iodised salt leads to disease and illness) of consumption of iodised salt more than half (56.1 %) of the respondents with a neutral attitude (i.e. neither agreed nor disagreed). Only 22.4 per cent of respondents had a correct perception of the health effects of consuming iodised salt.

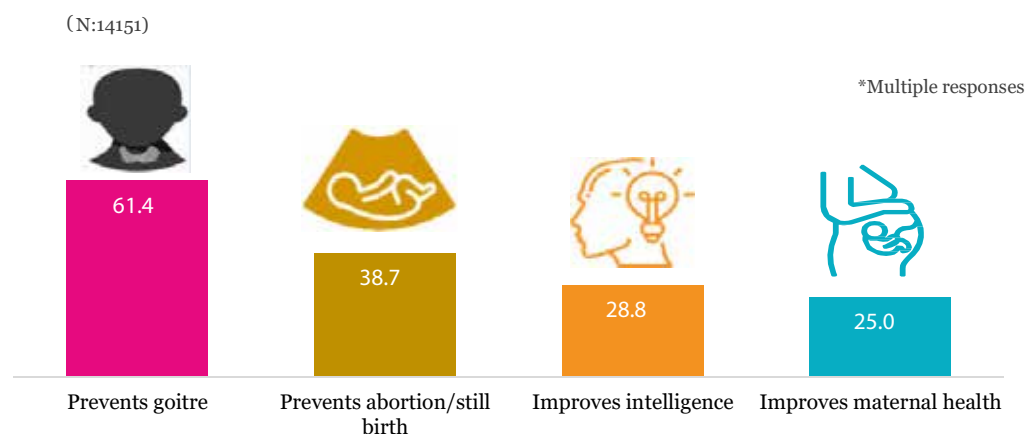
More than one third respondents (38.2%) agreed that there is a difference in organoleptic properties/ characteristics (statements such as iodised salt does taste different, iodine changes colour, odour or taste, just appearance cannot mean it is a good quality salt) of iodised salt. Overall, 20.9 per cent of the respondents had correct perception of organoleptic properties/ characteristics of iodised salt.

44.9 per cent of the respondents disagreed that all packaged salt is iodised. However, one third (33.6) respondents had a misconception about all packaged salt to be iodised. Half the respondents (50.6%) agreed that iodisation of salt drastically increase the cost while, 18.8 per cent strongly agreed, and 31.8 per cent just agreed that iodisation does increase the cost of salt.

Benefits of consumption of iodised salt

Improved knowledge about iodine nutrition and the benefit of iodised salt is expected to have a positive effect on behaviour, unless if inhibiting factors are preventing positive behavioural changes. The most commonly reported benefit of consuming iodised salt among household who had heard of iodized salt reported was the prevention of goitre. A similar proportion of households belong to the highest quintile.

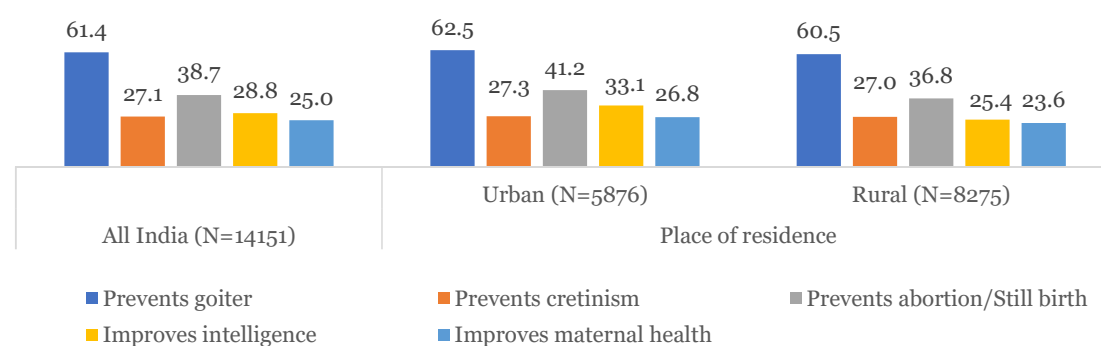
Figure 6.15: Benefits of consuming iodised Salt (%)



Iodine deficiency in the body leads to goitre, which is enlargement of the thyroid gland. Iodine is essential for the production of maternal and foetal thyroid hormones that regulate the development of the foetal brain and nervous system²⁴. Insufficient iodine intake increases the risk of negative reproductive outcomes, such as perinatal²⁵ and infant mortality, and intellectual impairment, the most extreme form of which is cretinism²⁶.

All the respondents who had heard of iodised salt were further probed about the benefits of optimal iodine intake. Of these, 61.4 per cent of the respondents were aware that optimal iodine nutrition prevents goitre. Two fifths (38.7%) of the respondents were aware of its role in the prevention of abortion and stillbirth followed by nearly one-fourth respondents who were aware of iodine benefits in brain development and improvement of maternal health.

Figure 6.16: Distribution of the households stating the benefit of iodised salt by residence (%)



It was observed that the distribution of these respondents is quite similar in urban and rural areas.

24. https://www.who.int/elena/titles/bbc/iodine_pregnancy/en/

25. Stillbirth or neonatal death within one week of birth.

26. a condition of severely stunted physical and mental growth owing to deficiency of thyroid hormone

Expenditure and willingness to pay

The survey collected information on the quantity of cooking salt generally purchased for household consumption. The results indicated that cooking salt is mostly purchased in one-kilogram packet with a higher proportion of households residing in the urban area. Purchase of cooking salt in half kilogram packet was reported by very low proportion of households. A higher ratio of the households who purchased half kg salt belonged to lowest wealth quintile. Also, the indicative trend of salt quantity purchased is more or less similar in the rural and urban areas.

It has also been reported on an average of 1 Kilogram (Kg) of salt is purchased at an interval of 24 days at the household level across India. The median price for 1 Kg of cooking salt was found to be INR 10/-.

The comparatively higher amount is spent on salt purchase with increase in wealth quintile for the same quantity of salt purchase.



The survey also elicited the willingness of households to pay an additional amount for 1 Kg of better quality salt, and it is observed that more than five out of eight households are willing to pay more if better quality cooking salt is made available to them. However, 22.7 per cent expressed their unwillingness to pay more. There is an association observed between the willingness to pay and the wealth quintile to which the respondents belong to. More than two-thirds of the households who agreed to pay higher are primarily from highest wealth quintile, whereas a higher proportion of households who were not sure of paying higher, (i.e., don't know) belongs to the lowest quintile.

Decision maker and purchaser of salt matrix

A matrix was drawn between those who decide to buy the salt and those who finally buy it, giving us the cross tabulation between the decision maker and the purchaser. It was found that as a pattern, the decision maker and purchaser are, most of the time, the same for buying salt. Majorly the decision maker for purchase of salt is either the head of the household or the spouse of head of the household. The next major decision maker is other female adult family members.

Also, eight out of ten times it is the head of the household who is both the decision maker and purchaser of salt. On the contrary, only in 14.2 per cent cases, children <18 years made the decision and purchased salt

It is seen as a common practice that a decision maker is a purchaser pointing towards; either a shorter decision-making process towards purchasing salt as it is a low-price commodity or as a commodity which doesn't require household involvement to be purchased.

Summary

More than half of the respondents (55.0%) had heard about iodised salt; mostly through electronic mass media TV and Radio (74.4%), and formal interpersonal channel (41.1%), majorly village frontline workers and shopkeepers.

The respondents, who were aware of iodised salt reportedly identified iodised salt mainly through the word "iodised" (55.3%) or brand name (48.5%); and one-fifth mentioned the smiling sun logo. More than half (55.0%) of the respondents reportedly had heard about iodised salt and 61.4 per cent of them mentioned prevention of goitre as the major benefit.

Only 22.4 per cent of respondents had a correct perception of the health effects of consuming iodised salt. Around one third respondents (31.9%) agreed that there is a difference in organoleptic properties/ characteristics of iodised salt while 18.7 per cent respondents disagreed. Overall, 20.9 per cent of the respondents had a correct perception of organoleptic properties/ characteristics of iodised salt.

TABLE 6.1: DECISION MAKER AND PURCHASER OF SALT

Decision Maker	Member who usually buys salt				
	Head of the household	Spouse of the household head	Other male adult family member	Other female adult family member	Children (<18 years)
Head of the household	78.2%	18.3%	17.6%	11.3%	14.2%
Spouse of the household head	18.7%	78.2%	17.2%	12.3%	58.9%
Other male adult family member	1.2%	1.7%	52.2%	7.0%	2.6%
Other female adult family member	1.8%	1.6%	13.0%	69.3%	10.1%
Children (<18 years)	0.1%	0.2%	0%	0.1%	14.2%
Total	100%	100%	100%	100%	100%



Annexures for Chapter 6

TABLE 6.1: AWARENESS ABOUT IODISED SALT

Percentage distribution of Awareness about iodised salt across all India, type of residence, wealth quintile and states across all zones			
	Unweighted N	Aware	Not aware
Unweighted N	21406	14151	7255
All India	21406	55.0	45.0
Type of residence			
Rural	13095	50.5	49.5
Urban	8311	62.3	37.7
Wealth quintile			
Lowest	2692	34.8	65.2
Second	3657	49.3	50.7
Middle	4271	50.3	49.7
Fourth	5112	64.6	35.4
Highest	5674	75.4	24.6
North zone	3971	68.0	32.0
Chandigarh	600	75.7	24.3
Delhi	611	39.6	60.4
Haryana	601	41.5	58.5
Himachal Pradesh	600	83.5	16.5
Jammu & Kashmir	355	10.0	90.0
Punjab	600	82.3	17.7
Rajasthan	604	85.6	14.4
Central zone	2403	57.3	42.7
Chhattisgarh	600	74.7	25.3
Madhya Pradesh	603	46.0	54.0
Uttarakhand	600	92.7	7.3
Uttar Pradesh	600	57.0	43.0
East zone	2401	45.8	54.2
Bihar	600	38.8	61.2
Jharkhand	600	54.3	45.7
Odisha	601	34.4	65.6
West Bengal	600	55.1	44.9
North-East zone	4817	58.5	41.5
Arunachal Pradesh	603	92.8	7.2
Assam	601	52.2	47.8
Manipur	600	91.2	8.8
Meghalaya	600	70.3	29.7
Mizoram	605	93.5	6.5
Nagaland	600	52.4	47.6

Percentage distribution of Awareness about iodised salt across all India, type of residence, wealth quintile and states across all zones

	Unweighted N	Aware	Not aware
Sikkim	600	83.2	16.8
Tripura	608	51.9	48.1
West zone	3002	56.0	44.0
Dadra & Nagar Haveli	601	90.2	9.8
Daman & Diu	600	87.0	13.0
Goa	601	88.3	11.7
Gujarat	600	83.5	16.5
Maharashtra	600	38.5	61.5
South zone	4812	52.2	47.8
Andaman & Nicobar Island	600	87.7	12.3
Andhra Pradesh	600	20.0	80.0
Karnataka	601	51.7	48.3
Kerala	601	80.8	19.2
Lakshadweep	600	90.9	9.1
Puducherry	600	73.6	26.4
Tamil Nadu	610	62.8	37.2
Telangana	600	45.9	54.1



TABLE 6.2: SOURCE OF AWARENESS ABOUT IODISED SALT*

Percentage distribution of source of awareness about iodised salt across all India, type of residence, wealth quintile and states across all zones									
	Unweighted N	Electronic mass media			Non-electronic mass media	Mid-media			
		TV	Radio	PA	News-paper	Hoarding	Hand bills	Bus	Drama
Unweighted N	9370	6472	1041	422	1469	474	240	77	120
All India	9370	70.9	10.9	4.6	16.8	4.2	3.0	1.9	1.5
Type of residence									
Rural	5455	67.5	11.7	4.5	16.5	3.9	2.8	2.4	1.8
Urban	3915	75.6	9.9	4.7	17.2	4.6	3.2	1.2	1.2
Wealth quintile									
Lowest	746	53.3	7.9	2.8	8.2	4.3	2.3	1.0	0.8
Second	1437	67.5	10.0	3.1	12.2	2.6	2.2	1.9	2.2
Middle	1860	73.0	14.4	7.6	15.9	4.8	4.7	3.9	1.8
Fourth	2445	75.1	9.9	4.8	21.3	5.6	3.4	2.2	2.1
Highest	2882	77.6	11.6	4.2	21.6	3.7	2.3	0.6	0.8
North zone	1820	68.9	13.2	2.1	33.5	5.4	3.0	2.5	2.5
Chandigarh	343	88.4	1.1	-	12.1	2.8	0.3	0.5	-
Delhi	201	91.1	23.1	-	15.1	0.5	-	-	-
Haryana	209	89.3	0.7	-	6.7	0.4	0.4	-	-
Himachal Pradesh	351	87.6	7.9	0.5	13.1	8.2	-	-	0.8
Jammu & Kashmir	42	(80.7)	(65.2)	(2.4)	(46.7)	(4.4)	-	(2.4)	-
Punjab	277	87.9	15.1	-	5.4	1.3	0.5	5.3	-
Rajasthan	397	54.5	13.3	3.6	51.2	7.9	5.0	2.7	4.3
Central zone	984	78.8	9.9	0.8	12.0	1.3	0.7	1.4	0.8
Chhattisgarh	350	83.7	25.0	0.5	11.9	1.1	0.6	0.7	0.4
Madhya Pradesh	196	75.6	4.2	0.6	8.1	0.6	0.9	0.5	3.5
Uttarakhand	175	76.5	2.1	-	20.3	10.9	1.4	0.5	-
Uttar Pradesh	263	78.8	8.3	0.9	13.0	1.2	0.6	1.9	-
East zone	748	53.9	3.9	2.4	11.8	1.3	1.8	-	1.1
Bihar	168	63.4	7.7	-	15.7	3.4	4.5	-	2.5
Jharkhand	183	38.8	6.2	-	15.6	0.3	1.4	-	1.0
Odisha	175	84.7	2.7	1.4	18.2	0.6	0.6	-	0.6
West Bengal	222	38.4	0.3	5.7	4.5	-	-	-	-
North-East zone	2415	63.0	7.5	6.6	8.3	2.2	1.1	0.4	1.0
Arunachal Pradesh	443	81.6	3.2	0.2	3.9	1.3	-	0.2	0.1
Assam	283	65.2	4.2	6.0	4.9	0.8	1.4	0.5	0.7
Manipur	389	15.9	39.1	0.6	13.5	13.3	-	-	5.5
Meghalaya	294	52.3	10.8	10.9	18.2	1.7	0.5	-	-

Formal interpersonal channel				Informal interpersonal channel	Others	Don't know
Health Group	Doctor	ASHA /AWW/ANM	Shop-keeper	Friends		
350	1245	2295	1334	1588	50	156
3.5	14.2	20.7	18.9	20.0	1.0	3.3
4.3	13.0	23.3	22.0	21.0	1.1	4.5
2.4	16.0	17.0	14.5	18.5	0.8	1.6
3.2	7.7	17.9	25.4	23.3	1.7	11.5
1.9	10.0	22.8	22.4	23.6	0.8	4.2
5.1	19.1	24.3	19.5	21.6	0.9	2.6
4.3	18.1	21.4	17.8	21.0	1.0	1.0
3.0	13.6	17.1	13.1	13.0	0.7	0.7
4.0	16.8	23.8	21.7	16.4	0.1	1.0
0.6	22.4	1.8	23.5	9.0	-	0.6
-	7.6	2.5	9.0	9.6	-	-
1.6	3.6	4.7	4.5	3.0	0.8	0.3
0.5	18.0	8.8	22.5	7.7	-	-
-	(31.3)	-	(2.4)	(2.4)	-	(2.0)
-	8.4	5.3	28.1	16.6	-	-
6.6	22.5	37.8	24.9	20.9	-	1.6
1.7	6.3	10.8	28.9	23.3	0.8	2.4
2.6	8.7	25.5	6.7	3.4	0.2	0.5
2.6	4.5	14.3	19.0	25.3	1.2	4.7
2.5	13.2	61.6	30.1	21.9	-	2.8
1.1	6.0	3.6	38.0	27.8	0.9	2.0
4.7	9.4	34.6	28.8	32.7	1.4	3.0
1.9	5.0	9.8	40.8	54.0	0.7	-
17.0	8.7	52.6	39.0	30.1	-	1.6
3.3	13.2	33.4	15.7	24.6	1.4	0.5
3.6	11.9	50.7	19.9	18.3	2.6	7.0
0.9	13.1	27.6	21.0	32.0	0.2	4.0
0.8	13.7	27.8	15.7	16.4	-	-
0.7	15.3	31.3	24.9	31.9	-	5.0
0.4	9.2	21.7	30.4	66.3	1.3	6.6
3.4	13.2	31.2	8.9	31.5	-	0.2

Percentage distribution of source of awareness about iodised salt across all India, type of residence, wealth quintile and states across all zones

	Unweighted N	Electronic mass media			Non-electronic mass media	Mid-media		
		TV	Radio	PA	News-paper	Hoarding	Hand bills	Bus
Mizoram	389	93.1	-	28.0	14.6	0.3	0.6	-
Nagaland	156	78.2	2.7	2.1	30.0	0.9	-	-
Sikkim	318	43.7	2.8	8.3	27.9	0.4	0.5	-
Tripura	143	87.9	7.5	6.0	11.2	5.6	2.3	0.7
West zone	1458	81.9	12.5	4.5	11.7	5.4	5.1	2.3
Dadra & Nagar Haveli	303	38.6	1.0	0.2	1.5	6.1	5.2	0.2
Daman & Diu	393	51.0	2.6	3.9	11.5	21.4	14.0	0.3
Goa	294	64.7	54.9	0.4	56.1	9.0	2.2	0.9
Gujarat	311	68.9	17.6	6.9	13.7	6.7	9.0	3.8
Maharashtra	157	97.6	5.4	1.9	7.9	3.7	0.8	0.6
South zone	1945	69.8	14.4	11.2	17.5	7.8	5.1	3.2
Andaman & Nicobar Island	225	52.9	3.1	0.4	1.1	8.9	-	-
Andhra Pradesh	96	92.4	7.7	4.6	10.3	4.9	1.0	-
Karnataka	178	52.8	32.7	19.4	30.4	12.4	13.7	12.1
Kerala	393	76.3	12.5	8.0	18.0	6.5	2.5	-
Lakshadweep	280	58.9	11.1	6.3	19.1	3.1	0.4	-
Puducherry	245	91.3	8.7	6.3	14.1	9.3	8.5	-
Tamil Nadu	306	66.9	5.6	9.0	13.9	7.6	3.3	0.3
Telangana	222	82.3	12.8	11.4	8.9	4.1	1.5	1.9

*Only asked for households who had heard of iodised salt (and also excluded households who did not reported iodised salt as a good characteristic of cooking salt)

PA: Public Announcements

() Based on 25-49 unweighted cases

	Formal interpersonal channel				Informal interpersonal channel	Others	Don't know
Drama	Health Group	Doctor	ASHA /AWW/ANM	Shop-keeper	Friends		
-	-	0.3	0.8	5.2	10.5	-	0.2
1.5	2.6	9.3	2.2	7.6	46.1	1.4	-
-	5.5	1.5	58.2	3.4	2.1	0.4	-
1.2	-	4.9	9.3	3.2	9.0	1.0	2.1
0.7	1.8	27.0	25.1	8.4	14.1	-	0.4
1.7	3.7	25.4	76.7	2.5	4.6	-	0.2
5.5	17.9	25.5	57.3	2.0	4.3	-	-
-	2.0	2.8	7.8	2.9	0.3	-	1.5
1.3	2.1	27.8	47.7	8.9	6.7	-	-
-	1.3	27.0	-	8.1	22.9	-	0.8
2.5	5.8	15.5	15.4	7.1	12.7	2.2	7.7
-	1.2	8.8	62.1	20.3	32.8	2.3	-
-	2.6	1.6	5.9	2.7	10.0	-	-
8.6	16.5	29.2	26.0	8.0	16.1	-	30.4
0.5	1.5	5.7	26.2	1.0	6.0	0.2	2.1
-	9.2	18.2	9.4	2.4	3.1	-	0.9
1.0	13.8	6.1	1.2	14.9	12.3	-	0.6
1.0	1.8	15.6	6.1	11.1	15.8	6.2	0.8
0.8	5.4	14.2	10.8	6.2	10.2	-	-

*Multiple responses

TABLE 6.3: KEY FACTORS DETERMINING THE PURCHASE OF SALT

Per cent distribution of characteristics determining the purchase of salt across all India, type of residence, wealth quintile and states across all zones										
	Unweighted N	Saltiness	Texture	Colour	Price	Brand	Tradition	Purity	Others	Don't know
Unweighted N	21406	5949	3135	5524	9084	10802	1207	2852	78	1746
All India	21406	31.6	15.0	30.3	41.0	40.9	6.3	12.8	0.4	12.2
Type of residence										
Rural	13095	29.0	14.5	29.7	41.2	36.5	6.6	11.1	0.4	16.3
Urban	8311	35.7	15.9	31.3	40.6	47.8	5.8	15.6	0.4	5.8
Wealth quintile										
Lowest	2692	19.9	8.2	26.1	38.6	27.5	4.3	8.7	0.4	26.7
Second	3657	28.2	13.2	28.6	40.3	33.7	6.0	11.0	0.7	15.6
Middle	4271	38.4	18.5	28.6	39.6	37.4	7.3	11.1	0.2	9.3
Fourth	5112	37.0	20.5	31.0	40.7	47.7	7.9	16.5	0.3	6.4
Highest	5674	34.3	14.6	36.9	45.6	57.6	6.1	16.7	0.4	3.6
North zone	3971	18.7	17.6	31.1	49.7	60.3	10.4	12.9	0.2	6.3
Chandigarh	600	4.9	1.4	20.5	22.5	72.9	0.8	15.1	-	12.9
Delhi	611	14.9	5.3	34.4	40.2	49.4	9.9	6.0	0.1	3.6
Haryana	601	6.3	21.2	23.8	30.8	47.6	8.2	7.4	0.5	15.1
Himachal Pradesh	600	4.0	3.4	29.2	48.7	76.7	7.2	13.6	-	5.5
Jammu & Kashmir	355	59.7	58.9	67.0	71.9	71.0	34.1	6.1	0.6	0.6
Punjab	600	7.8	4.1	19.6	45.4	82.0	6.1	17.3	0.2	1.7
Rajasthan	604	23.5	19.6	32.3	57.2	54.5	9.7	15.6	-	6.6
Central zone	2403	14.6	6.1	23.6	44.5	38.8	2.6	13.9	0.6	16.9
Chhattisgarh	600	42.4	20.4	37.2	49.6	34.3	3.3	11.1	-	5.6
Madhya Pradesh	603	23.7	5.2	20.8	34.6	24.6	3.5	6.3	2.2	29.0
Uttarakhand	600	41.7	0.5	4.9	27.0	44.0	0.4	38.1	0.1	0.4
Uttar Pradesh	600	3.3	4.0	23.4	49.1	45.9	2.2	16.5	-	14.6
East zone	2401	13.3	4.3	24.0	37.7	38.5	5.5	9.1	0.8	20.0
Bihar	600	1.3	1.3	26.4	47.7	43.9	0.3	4.9	0.5	33.5
Jharkhand	600	1.0	2.0	22.0	62.6	33.1	7.1	26.0	1.5	15.8
Odisha	601	30.4	5.7	29.2	3.4	16.5	-	2.4	2.7	26.8
West Bengal	600	22.2	7.7	20.0	33.9	45.1	12.9	10.1	-	4.3
North-East zone	4817	29.8	25.1	20.7	51.9	33.8	1.8	4.3	0.4	13.3
Arunachal Pradesh	603	58.1	42.4	35.7	68.4	52.7	4.6	0.5	-	0.3
Assam	601	37.3	30.2	21.6	52.2	24.1	0.9	3.9	0.2	17.5
Manipur	600	21.6	4.3	2.9	44.9	88.4	1.0	3.4	2.5	4.1

Per cent distribution of characteristics determining the purchase of salt across all India, type of residence, wealth quintile and states across all zones

	Unweighted N	Saltiness	Texture	Colour	Price	Brand	Tradition	Purity	Others	Don't know
Mizoram	605	10.4	2.6	7.5	20.1	95.1	0.2	0.2	1.3	-
Nagaland	600	0.4	29.0	23.2	63.3	28.9	2.6	2.5	-	0.6
Sikkim	600	0.9	1.4	8.1	25.6	70.6	1.7	4.4	-	1.3
Tripura	608	12.5	20.5	25.7	33.8	34.8	9.1	10.4	1.1	17.0
West zone	3002	55.8	33.4	33.6	39.5	38.5	4.9	12.1	-	1.8
Dadra & Nagar Haveli	601	30.2	16.2	4.8	26.3	41.9	1.8	51.5	-	0.1
Daman & Diu	600	38.0	24.1	9.5	32.8	64.5	10.6	23.8	-	-
Goa	601	18.2	1.7	7.0	79.5	74.3	2.2	0.8	-	3.0
Gujarat	600	70.7	44.9	39.3	50.0	46.6	10.6	20.7	-	0.7
Maharashtra	600	47.5	27.0	30.9	32.6	32.9	1.5	6.9	-	2.4
South zone	4812	53.0	16.5	40.1	35.0	36.7	9.6	16.7	0.3	11.8
Andaman & Nicobar Island	600	26.2	5.1	14.3	46.8	73.8	3.1	10.0	0.5	10.5
Andhra Pradesh	600	58.3	30.9	43.6	26.2	28.8	3.1	1.8	0.4	16.3
Karnataka	601	51.5	13.2	25.8	32.6	35.4	22.8	17.1	-	21.5
Kerala	601	40.9	21.4	40.6	30.5	48.2	5.7	15.8	-	13.0
Lakshadweep	600	3.5	5.6	12.6	38.5	70.2	4.6	0.9	-	7.6
Puducherry	600	51.4	17.0	53.8	44.7	72.6	11.6	53.1	-	0.4
Tamil Nadu	610	42.3	3.5	34.3	33.5	40.7	2.0	31.7	0.7	4.4
Telangana	600	80.3	26.9	74.6	55.9	29.6	8.4	4.4	-	0.4

*Multiple responses

TABLE 6.4: REASON FOR PURCHASE OF IODISED SALT

Per cent distribution of reason for purchase of iodised salt across all India, type of residence, wealth quintile and states across all zones					
	Unweighted N	Because it is healthy	Because other kinds of salt are not available	Doctor advised	ANM/ ASHA/ AWW advised
Unweighted N	14770	9614	1664	3100	3347
All India	14770	61.6	15.1	22.2	20.6
Type of residence					
Rural	8463	57.6	17.3	21.3	21.6
Urban	6307	66.2	12.5	23.4	19.4
Wealth quintile					
Lowest	1080	58.6	15.1	18.2	21.4
Second	2133	60.4	18.1	19.8	20.0
Middle	2809	64.9	15.1	18.9	21.0
Fourth	3982	62.1	15.1	22.3	20.5
Highest	4766	60.6	13.3	27.9	20.3
North zone	3064	39.1	15.3	26.8	17.6
Chandigarh	537	14.2	1.4	32.3	12.5
Delhi	410	72.7	7.4	41.5	19.0
Haryana	334	5.4	2.3	8.6	7.1
Himachal Pradesh	495	26.9	24.7	37.9	24.0
Jammu & Kashmir	228	94.1	48.5	42.7	7.1
Punjab	570	43.3	5.4	11.3	8.2
Rajasthan	490	34.5	20.3	33.2	25.3
Central zone	1525	63.8	26.0	14.5	18.0
Chhattisgarh	517	85.8	9.7	15.3	28.7
Madhya Pradesh	276	39.6	30.5	11.6	21.7
Uttarakhand	499	67.6	19.0	25.4	40.0
Uttar Pradesh	233	66.0	31.6	14.2	9.0
East zone	1087	38.0	6.1	13.4	19.7
Bihar	276	13.3	4.3	13.1	9.4
Jharkhand	256	22.5	10.9	17.3	31.5
Odisha	148	76.3	2.2	9.6	21.1
West Bengal	407	52.5	6.8	13.4	23.9
Arunachal Pradesh	542	93.3	12.6	23.4	15.0
Assam	281	93.1	18.1	21.2	16.3
Manipur	527	61.6	25.4	12.7	17.4
Meghalaya	466	93.1	4.0	4.7	9.4
Mizoram	603	94.0	8.5	15.1	-
Nagaland	260	96.5	0.5	3.4	-
Sikkim	535	82.4	-	1.5	24.9

Shopkeeper asked to buy	Household members asked me to buy	Friends asked me to buy	Panchayat member asked me to buy	Teacher told our children to buy	Others
2549	2142	1276	269	567	128
19.2	15.4	9.5	2.1	5.1	1.2
21.1	16.7	10.9	2.5	5.0	1.4
16.9	13.8	7.8	1.7	5.1	0.9
20.6	15.7	8.7	2.0	2.2	2.4
18.7	12.8	11.9	1.6	3.2	1.7
16.2	13.4	9.4	2.3	4.5	1.1
19.2	16.2	8.8	2.4	6.0	0.8
21.0	17.6	9.0	2.3	7.1	0.8
29.9	28.2	16.4	5.2	7.9	0.7
44.8	27.6	12.5	0.7	3.3	0.7
19.3	12.9	8.7	0.9	0.7	0.2
25.6	46.8	8.8	0.8	0.9	5.4
40.9	30.3	13.5	3.8	2.9	-
8.6	6.3	7.1	-	4.8	-
34.5	39.0	12.3	1.1	6.2	0.2
31.9	23.3	23.3	10.0	12.9	-
20.0	19.2	8.6	1.9	3.8	1.7
8.1	7.3	2.9	2.1	7.2	1.3
26.0	24.4	9.4	3.4	2.8	2.8
32.3	43.9	23.2	2.9	17.8	-
20.7	18.8	9.0	0.8	1.0	1.6
30.3	14.6	13.9	0.4	1.5	2.8
57.5	16.4	33.9	0.4	4.1	1.5
18.7	19.9	12.9	-	0.4	19.5
22.9	11.5	6.6	1.9	1.7	-
15.3	12.6	1.5	0.2	-	0.3
9.6	10.5	9.6	2.8	2.5	-
11.7	4.5	0.3	-	-	0.6
18.5	5.4	19.1	0.2	1.1	0.7
0.2	4.0	0.2	-	-	-
0.5	0.8	0.5	-	0.2	-
0.8	1.5	1.0	-	0.3	-
2.6	4.0	0.7	-	0.4	-

Per cent distribution of reason for purchase of iodised salt across all India, type of residence, wealth quintile and states across all zones

	Unweighted N	Because it is healthy	Because other kinds of salt are not available	Doctor advised	ANM/ ASHA/ AWW advised
Tripura	316	92.5	9.1	9.0	7.0
West zone	2533	84.3	16.3	26.7	22.4
Dadra & Nagar Haveli	522	44.7	3.5	17.6	57.3
Daman & Diu	482	50.2	7.0	33.4	58.8
Goa	569	60.2	7.2	24.6	37.7
Gujarat	518	78.3	25.1	44.9	52.4
Maharashtra	442	89.2	10.6	14.3	1.6
South zone	3031	68.3	11.9	28.2	25.1
Andaman & Nicobar Island	548	77.1	1.3	24.9	47.4
Andhra Pradesh	360	48.5	13.6	26.9	55.2
Karnataka	264	98.7	12.3	10.7	5.9
Kerala	368	91.3	11.2	9.2	9.2
Lakshadweep	517	91.2	0.9	9.6	4.3
Puducherry	373	92.1	6.5	18.1	2.6
Tamil Nadu	196	89.2	1.2	22.9	14.9
Telangana	405	14.3	20.4	69.6	39.6



Shopkeeper asked to buy	Household members asked me to buy	Friends asked me to buy	Panchayat member asked me to buy	Teacher told our children to buy	Others
10.6	9.2	4.7	2.2	1.1	2.2
12.8	13.3	7.6	2.3	2.2	-
5.6	13.3	2.6	0.3	0.9	-
29.7	14.1	12.6	7.3	1.6	-
15.1	2.5	4.6	0.8	0.3	-
20.4	28.2	12.6	4.9	4.0	-
7.6	3.4	4.3	0.5	1.0	-
8.8	5.9	3.9	1.4	10.5	1.3
17.2	14.3	16.6	-	4.8	0.3
4.0	8.8	2.0	-	7.9	0.8
2.8	2.0	1.8	0.4	0.4	-
6.1	8.8	5.6	0.2	3.0	-
5.0	6.1	6.3	4.0	8.0	-
8.3	16.7	11.7	0.5	3.4	-
5.2	1.7	5.4	1.4	25.0	5.7
26.2	9.0	5.2	4.7	17.1	-

*Multiple responses



TABLE 6.5: CHARACTERISTICS OF GOOD QUALITY COOKING SALT

Percentage distribution of characteristics of good quality cooking salt across all India, type of residence, wealth quintile and states across all zones					
	Unweighted N	It looks white	Look is attractive	Taste is good	Packaged/ branded salt
Unweighted N	21406	11928	4274	9741	8048
All India	21406	63.8	22.3	47.8	32.8
Type of residence					
Rural	13095	63.0	23.0	49.0	31.5
Urban	8311	65.1	21.3	45.8	34.9
Wealth quintile					
Lowest	2692	57.5	13.8	44.7	30.0
Second	3657	64.0	22.0	49.2	30.4
Middle	4271	68.5	25.1	44.9	29.0
Fourth	5112	66.2	27.0	44.5	36.3
Highest	5674	62.8	23.4	55.2	38.0
North zone	3971	60.2	35.9	59.4	36.3
Chandigarh	600	57.9	21.9	53.8	35.2
Delhi	611	60.7	29.7	66.7	27.4
Haryana	601	36.0	26.0	70.1	28.1
Himachal Pradesh	600	63.0	49.3	71.9	26.0
Jammu & Kashmir	355	74.9	66.4	68.5	51.9
Punjab	600	55.4	26.3	66.3	34.2
Rajasthan	604	68.1	38.7	48.4	40.6
Central zone	2403	64.4	21.2	59.0	28.3
Chhattisgarh	600	76.5	34.5	37.3	20.2
Madhya Pradesh	603	60.1	16.8	79.4	20.8
Uttarakhand	600	69.2	17.8	50.6	24.2
Uttar Pradesh	600	63.8	20.9	54.4	33.6
East zone	2401	54.2	5.2	43.6	44.7
Bihar	600	45.6	4.2	44.1	60.6
Jharkhand	600	59.3	12.0	65.1	37.3
Odisha	601	71.6	3.4	23.8	18.9
West Bengal	600	53.1	4.4	44.2	43.0
North-East zone	4817	52.1	13.3	38.0	37.1
Arunachal Pradesh	603	73.1	33.8	36.8	51.0
Assam	601	58.1	13.6	36.4	34.6
Manipur	600	21.2	7.2	34.3	67.7
Meghalaya	600	27.8	5.9	56.7	50.3
Mizoram	605	71.2	5.0	58.1	10.9
Nagaland	600	27.3	4.7	29.8	32.4
Sikkim	600	20.7	0.8	55.1	40.1

Loose/ unbranded salt	Powdered salt	Granular/	No moisture content	Free flow	Iodised salt	Other
738	2599	1397	1643	1523	4780	172
4.6	12.9	8.1	7.4	6.0	16.0	1.4
5.2	13.5	8.0	6.7	5.9	13.1	1.9
3.7	11.9	8.4	8.6	6.3	20.4	0.6
4.0	11.6	5.9	4.0	3.7	7.5	4.3
4.0	15.5	7.3	7.0	6.0	12.1	1.0
5.1	13.1	8.4	8.7	7.4	11.7	0.6
5.6	13.2	8.9	9.5	7.7	20.1	0.4
4.3	11.1	10.1	7.9	5.5	27.9	0.9
7.8	8.6	11.2	6.8	2.4	18.1	0.5
1.1	7.4	4.4	1.4	-	18.6	-
0.8	5.1	9.8	6.2	0.5	3.4	-
1.6	3.8	4.0	9.8	1.7	7.4	3.2
3.9	3.8	13.8	6.3	1.9	25.1	0.2
2.0	9.7	0.2	2.2	1.9	1.4	-
3.9	8.8	16.6	2.2	1.3	34.9	-
14.7	11.3	13.5	8.7	3.8	20.2	-
4.4	11.2	11.0	6.1	2.3	15.0	2.5
2.6	9.2	6.4	4.3	-	16.5	-
2.7	2.9	17.1	0.8	0.1	12.5	9.0
4.0	25.0	7.7	14.9	9.4	62.9	-
5.6	14.7	9.3	8.4	3.2	13.0	0.2
1.6	20.7	0.8	4.3	1.7	15.9	3.0
3.1	12.7	1.3	2.2	0.4	11.1	5.8
0.4	24.4	1.3	10.8	0.6	24.3	3.2
0.9	39.4	0.7	4.4	0.5	6.1	2.8
0.8	19.1	-	4.1	4.1	22.4	0.2
1.2	25.1	3.0	5.8	5.7	12.3	0.2
2.5	16.2	1.6	3.4	3.5	20.1	-
0.9	31.6	3.3	5.1	1.0	5.1	0.1
0.3	5.9	-	22.9	26.1	26.0	0.2
0.7	4.3	3.0	3.7	6.5	21.1	-
-	8.8	2.7	-	0.2	30.7	-
0.1	7.3	-	11.7	33.0	26.5	-
0.1	6.0	0.2	0.2	0.4	30.6	-

Percentage distribution of characteristics of good quality cooking salt across all India, type of residence, wealth quintile and states across all zones

	Unweighted N	It looks white	Look is attractive	Taste is good	Packaged/ branded salt
Assam	601	58.1	13.6	36.4	34.6
Manipur	600	21.2	7.2	34.3	67.7
Meghalaya	600	27.8	5.9	56.7	50.3
Mizoram	605	71.2	5.0	58.1	10.9
Nagaland	600	27.3	4.7	29.8	32.4
Sikkim	600	20.7	0.8	55.1	40.1
Tripura	608	54.1	23.5	32.3	31.7
West zone	3002	78.2	38.7	45.5	32.0
Dadra & Nagar Haveli	601	47.5	13.2	20.4	50.3
Daman & Diu	600	41.4	15.6	28.5	66.8
Goa	601	21.6	3.8	12.0	60.5
Gujarat	600	80.7	53.0	59.9	44.1
Maharashtra	600	77.9	30.8	37.4	24.0
South zone	4812	65.3	20.2	37.8	25.0
Andaman & Nicobar Island	600	28.0	10.3	55.4	72.6
Andhra Pradesh	600	59.6	31.7	44.9	39.3
Karnataka	601	58.3	17.6	30.8	11.4
Kerala	601	58.6	20.0	26.8	38.2
Lakshadweep	600	32.2	1.2	7.0	39.3
Puducherry	600	80.1	19.6	43.6	61.2
Tamil Nadu	610	73.3	12.6	28.0	19.7
Telangana	600	76.8	26.3	70.3	32.5



Loose/ unbranded salt	Powdered salt	Granular/	No moisture content	Free flow	Iodised salt	Other
0.9	31.6	3.3	5.1	1.0	5.1	0.1
0.3	5.9	-	22.9	26.1	26.0	0.2
0.7	4.3	3.0	3.7	6.5	21.1	-
-	8.8	2.7	-	0.2	30.7	-
0.1	7.3	-	11.7	33.0	26.5	-
0.1	6.0	0.2	0.2	0.4	30.6	-
4.8	28.7	5.1	2.4	14.0	28.0	0.9
5.1	10.8	9.8	5.4	5.1	20.1	-
5.7	20.2	7.6	2.5	3.8	41.3	-
12.8	17.2	7.6	17.4	16.0	22.7	-
3.5	1.0	3.9	0.7	0.7	32.5	-
10.6	24.4	23.4	13.4	12.6	33.9	-
1.7	2.7	1.7	0.6	0.6	11.4	-
5.6	9.8	9.5	13.1	15.6	13.4	0.7
0.3	6.2	1.3	0.8	11.3	46.5	-
2.4	2.2	13.2	0.6	2.9	3.1	0.1
10.2	13.2	16.8	11.7	27.5	20.8	-
5.1	18.3	8.9	8.3	6.6	17.3	0.2
1.4	4.9	0.7	0.5	1.8	42.7	-
3.3	4.8	16.3	43.4	28.9	31.0	0.4
2.3	7.6	3.8	28.6	17.9	13.3	2.5
6.9	8.8	1.9	4.6	9.4	6.8	-

*Multiple responses



TABLE 6.6: IDENTIFICATION OF IODISED SALT

Percentage distribution of identification of iodised salt across all India, type of residence, wealth quintile and states across all zones						
	Unweighted N	Smiling sun logo	Name of the brand	Word 'Iodised'	Shopkeeper tells me so	Others
Unweighted N	14151	2566	7162	8438	2343	157
All India	14151	20.5	48.5	55.3	21.1	1.5
Type of residence						
Rural	8275	19.3	47.6	52.8	24.4	1.5
Urban	5876	22.2	49.5	58.6	16.8	1.6
Wealth quintile						
Lowest	1032	13.0	45.5	44.2	30.1	2.0
Second	2100	13.5	39.5	56.1	22.7	2.6
Middle	2646	22.1	46.7	55.2	21.0	1.4
Fourth	3811	24.0	51.3	51.5	20.1	0.8
Highest	4562	24.4	54.3	63.2	16.9	1.3
North zone	2482	33.1	69.6	45.8	28.3	0.6
Chandigarh	451	1.9	63.3	38.2	18.9	1.1
Delhi	218	40.5	54.1	34.5	8.0	-
Haryana	246	1.7	42.5	55.2	6.1	5.5
Himachal Pradesh	501	6.9	81.5	38.7	28.9	-
Jammu & Kashmir	48	60.9	62.8	31.0	37.0	-
Punjab	498	17.1	78.9	45.1	33.6	0.3
Rajasthan	520	46.8	71.1	46.7	31.9	-
Central zone	1637	11.6	39.0	64.5	16.4	1.6
Chhattisgarh	450	16.7	60.0	49.0	21.0	0.7
Madhya Pradesh	283	10.4	39.9	67.3	11.9	1.7
Uttarakhand	564	31.9	22.3	70.2	36.4	0.5
Uttar Pradesh	340	8.8	34.9	66.9	15.0	1.9
East zone	1098	4.3	54.2	51.2	22.6	3.3
Bihar	235	10.0	72.0	51.3	24.5	1.2
Jharkhand	319	6.0	41.0	60.2	32.1	6.5
Odisha	213	2.1	65.6	16.8	24.0	9.7
West Bengal	331	0.2	42.7	57.9	17.3	1.8
North-East zone	3569	9.2	31.4	62.7	13.8	2.2
Arunachal Pradesh	562	23.9	55.0	77.5	16.1	0.1
Assam	311	12.3	20.7	59.7	17.9	2.6
Manipur	553	0.9	79.4	38.8	10.8	1.8
Meghalaya	431	1.5	16.4	88.5	7.0	-
Mizoram	563	4.0	34.3	78.1	0.6	-
Nagaland	336	8.4	44.7	77.6	3.6	0.2

Percentage distribution of identification of iodised salt across all India, type of residence, wealth quintile and states across all zones

	Unweighted N	Smiling sun logo	Name of the brand	Word 'Iodised'	Shopkeeper tells me so	Others
Sikkim	497	0.2	53.0	66.7	1.1	0.2
Tripura	316	3.0	44.8	57.3	10.7	5.9
West zone	2315	36.6	53.6	62.1	17.9	0.1
Dadra & Nagar Haveli	538	59.4	70.3	50.3	1.7	-
Daman & Diu	527	35.2	51.5	74.1	10.8	-
Goa	536	10.5	16.4	87.3	22.6	-
Gujarat	500	42.9	60.8	52.0	19.8	-
Maharashtra	214	29.2	45.4	74.5	15.2	0.3
South zone	3050	22.2	37.8	50.1	22.9	1.8
Andaman & Nicobar Island	525	22.4	56.3	73.3	10.6	0.6
Andhra Pradesh	113	21.9	65.2	74.9	1.9	2.0
Karnataka	313	24.4	12.3	22.5	55.1	-
Kerala	487	17.0	39.1	59.1	9.6	1.3
Lakshadweep	539	2.3	50.8	61.7	3.1	-
Puducherry	443	31.5	55.8	50.3	17.7	0.3
Tamil Nadu	369	7.6	52.1	60.1	13.7	4.3
Telangana	261	62.2	41.4	60.0	4.9	-

*Multiple responses



TABLE 6.7: BENEFITS OF CONSUMING IODISED SALT

Percentage distribution of benefits of consuming iodised salt across all India, type of residence, wealth quintile and states across all zones								
	Unweighted N	Prevents goitre	Prevents cretinism	Prevent abortion /stillbirth	Improves intelligence levels	Improves maternal health	Others	Don't know
Unweighted N	14151	10417	3373	5724	4105	3859	49	1884
All India	14151	61.4	27.1	38.7	28.8	25.0	0.9	23.0
Type of residence								
Rural	8275	60.5	27.0	36.8	25.4	23.6	0.9	25.9
Urban	5876	62.5	27.3	41.2	33.1	26.8	0.9	19.3
Wealth quintile								
Lowest	1032	42.1	18.1	20.9	13.9	19.8	0.9	46.0
Second	2100	54.7	22.5	26.7	21.6	20.9	0.8	29.5
Middle	2646	61.2	32.1	39.8	27.9	26.5	0.8	23.4
Fourth	3811	64.4	31.2	42.2	31.9	24.9	0.3	18.8
Highest	4562	71.8	27.5	50.7	37.9	29.1	1.6	11.9
North zone	2482	69.5	44.5	60.5	35.9	28.8	0.2	10.8
Chandigarh	451	69.3	3.8	22.7	20.3	27.1	0.3	24.7
Delhi	218	72.3	30.7	41.3	32.7	7.9	-	17.2
Haryana	246	50.0	19.9	23.8	11.0	24.4	1.5	41.1
Himachal Pradesh	501	83.7	43.7	60.3	32.4	39.0	-	4.7
Jammu & Kashmir	48	(76.9)	(37.0)	(30.4)	(10.8)	(21.7)	-	-
Punjab	498	80.9	30.9	48.8	40.8	32.0	0.2	4.5
Rajasthan	520	66.5	56.5	74.6	39.6	29.4	-	8.1
Central zone	1637	45.1	16.0	22.7	15.4	12.2	2.4	42.4
Chhattisgarh	450	81.3	35.3	37.4	22.0	19.1	-	8.0
Madhya Pradesh	283	38.6	5.5	19.9	21.7	19.7	0.9	45.9
Uttarakhand	564	84.7	25.1	45.9	29.9	26.0	0.2	12.4
Uttar Pradesh	340	34.4	14.1	17.7	9.9	6.2	3.8	52.8
East zone	1098	57.1	6.7	17.3	16.0	18.5	1.3	31.6
Bihar	235	54.0	7.5	17.0	20.7	22.9	3.0	27.9
Jharkhand	319	53.5	12.7	24.0	32.7	25.8	0.7	33.0
Odisha	213	77.9	13.4	13.0	9.6	19.7	-	15.2
West Bengal	331	54.7	2.0	16.3	8.3	12.2	0.6	38.6
North-East zone	3569	59.0	13.3	30.3	21.4	19.7	0.1	26.9
Arunachal Pradesh	562	85.5	7.6	29.5	18.0	19.7	-	10.7
Assam	311	42.9	15.1	33.1	26.8	20.5	-	39.5
Manipur	553	84.0	12.7	28.8	15.1	28.6	0.3	8.2
Meghalaya	431	91.5	4.6	13.1	5.9	4.4	0.1	5.8
Mizoram	563	99.6	0.9	4.9	6.0	2.6	-	-
Nagaland	336	94.6	2.0	53.9	7.0	20.8	-	0.2

Percentage distribution of benefits of consuming iodised salt across all India, type of residence, wealth quintile and states across all zones

	Unweighted N	Prevents goitre	Prevents cretinism	Prevent abortion /stillbirth	Improves intelligence levels	Improves maternal health	Others	Don't know
Sikkim	497	80.0	2.9	26.0	31.5	25.3	-	3.9
Tripura	316	49.2	28.9	35.5	23.3	28.9	0.4	25.0
West zone	2315	69.9	43.9	58.5	46.4	49.1	0.3	8.8
Dadra & Nagar Haveli	538	88.8	51.9	56.1	27.3	30.7	-	1.8
Daman & Diu	527	83.3	45.7	72.6	28.8	54.2	-	2.7
Goa	536	32.1	7.0	38.2	64.7	39.2	-	12.7
Gujarat	500	89.9	67.9	74.6	49.7	56.3	0.2	0.5
Maharashtra	214	44.9	13.6	37.8	41.6	40.2	0.4	19.7
South zone	3050	68.7	30.5	41.5	34.6	23.3	0.2	16.0
Andaman & Nicobar Island	525	79.3	2.8	32.8	34.6	39.9	0.2	14.1
Andhra Pradesh	113	32.9	23.7	37.0	52.6	25.5	-	4.0
Karnataka	313	76.2	43.8	40.6	39.6	44.0	-	20.4
Kerala	487	72.5	13.5	52.2	27.9	17.1	0.2	15.8
Lakshadweep	539	87.5	16.8	48.9	20.6	21.9	-	4.4
Puducherry	443	81.6	64.3	73.4	72.5	73.3	0.4	2.2
Tamil Nadu	369	62.4	27.3	17.7	27.2	7.1	0.5	21.4
Telangana	261	79.7	36.0	88.8	40.5	22.8	-	-

*Multiple responses



TABLE 6.8: QUANTITY OF THE SALT PURCHASED FOR COOKING THE LAST MEAL

Percentage distribution of identification of iodised salt across all India, type of residence, wealth quintile and states across all zones						
	Unweighted N	Less than half Kg	Half Kg	1 Kg	5 Kg	Other
Unweighted N	21406	25	1261	19336	383	401
All India	21406	0.1	8.3	87.9	2.5	1.2
Type of residence						
Rural	13095	0.1	9.3	86.2	3.1	1.3
Urban	8311	0.1	6.8	90.6	1.5	1.0
Wealth quintile						
Lowest	2692	0.1	14.0	82.9	1.6	1.4
Second	3657	0.2	11.4	85.3	1.4	1.8
Middle	4271	-	9.1	86.3	3.9	0.7
Fourth	5112	-	5.0	90.3	3.9	0.8
Highest	5674	0.1	2.6	94.5	1.6	1.2
North zone	3971	0.1	1.2	96.3	1.5	0.9
Chandigarh	600	-	0.4	99.6	-	-
Delhi	611	-	-	99.6	0.4	-
Haryana	601	-	0.7	91.1	2.3	5.8
Himachal Pradesh	600	-	1.1	98.3	0.7	-
Jammu & Kashmir	355	-	5.2	94.1	0.8	-
Punjab	600	0.2	3.4	94.8	1.6	-
Rajasthan	604	0.2	-	98.1	1.7	-
Central zone	2403	-	9.2	86.8	1.4	2.6
Chhattisgarh	600	-	1.1	98.2	0.1	0.6
Madhya Pradesh	603	-	1.4	90.8	2.0	5.8
Uttarakhand	600	-	1.6	97.2	1.0	0.2
Uttar Pradesh	600	-	14.9	82.0	1.4	1.6
East zone	2401	0.2	17.1	80.8	0.5	1.3
Bihar	600	0.1	11.6	87.3	0.4	0.6
Jharkhand	600	0.2	16.2	81.1	1.4	1.0
Odisha	601	0.1	23.3	73.0	1.4	2.1
West Bengal	600	0.4	20.3	77.6	-	1.7
North-East zone	4817	-	3.1	92.2	1.5	3.1
Arunachal Pradesh	603	-	3.3	95.9	0.8	-
Assam	601	-	1.1	98.1	0.7	0.1
Manipur	600	-	34.2	65.8	-	-
Meghalaya	600	0.4	1.4	97.1	0.3	0.8
Mizoram	605	-	0.3	97.3	1.9	0.4
Nagaland	600	-	0.2	99.4	0.3	0.1

Percentage distribution of identification of iodised salt across all India, type of residence, wealth quintile and states across all zones

	Unweighted N	Less than half Kg	Half Kg	1 Kg	5 Kg	Other
Sikkim	600	-	2.8	97.2	-	-
Tripura	608	-	1.2	58.9	9.9	30.0
West zone	3002	0.1	4.3	95.1	0.3	0.2
Dadra & Nagar Haveli	601	-	0.7	98.3	0.7	0.3
Daman & Diu	600	-	1.2	97.7	1.1	-
Goa	601	-	9.6	84.4	0.8	5.2
Gujarat	600	-	5.9	93.7	0.2	0.2
Maharashtra	600	0.2	3.3	96.1	0.3	0.1
South zone	4812	-	7.8	84.7	7.1	0.4
Andaman & Nicobar Island	600	1.7	2.5	86.5	0.3	9.1
Andhra Pradesh	600	0.1	4.9	94.6	-	0.4
Karnataka	601	-	13.9	62.5	23.0	0.5
Kerala	601	-	1.5	97.5	0.3	0.7
Lakshadweep	600	-	0.3	98.2	1.4	-
Puducherry	600	0.2	7.4	89.7	2.5	0.3
Tamil Nadu	610	-	9.3	89.1	1.3	0.3
Telangana	600	-	1.9	98.0	0.2	-

*Multiple responses



TABLE 6.9: FREQUENCY OF PURCHASE OF SALT

Mean distribution of frequency of purchase of salt across all India, type of residence, wealth quintile and states across all zones		
	Unweighted N	Average (number of days)
Unweighted N	21406	21406
All India	21406	24.3
Type of residence		
Rural	13095	23.5
Urban	8311	25.7
Wealth quintile		
Lowest	2692	20.2
Second	3657	23.1
Middle	4271	24.7
Fourth	5112	26.9
Highest	5674	26.7
North zone	3971	31.8
Chandigarh	600	25.7
Delhi	611	35.3
Haryana	601	26.9
Himachal Pradesh	600	28.7
Jammu & Kashmir	355	18.8
Punjab	600	27.5
Rajasthan	604	36.8
Central zone	2403	24.2
Chhattisgarh	600	19.8
Madhya Pradesh	603	28.3
Uttarakhand	600	27.0
Uttar Pradesh	600	22.9
East zone	2401	18.1
Bihar	600	15.6
Jharkhand	600	18.1
Odisha	601	15.4
West Bengal	600	22.0
North-East zone	4817	25.2
Arunachal Pradesh	603	26.2
Assam	601	21.3
Manipur	600	21.3
Meghalaya	600	45.7
Mizoram	605	30.0
Nagaland	600	36.2
Sikkim	600	33.8
Tripura	608	28.7

Mean distribution of frequency of purchase of salt across all India, type of residence, wealth quintile and states across all zones		
	Unweighted N	Average (number of days)
West zone	3002	22.7
Dadra & Nagar Haveli	601	31.7
Daman & Diu	600	30.5
Goa	601	22.7
Gujarat	600	26.7
Maharashtra	600	20.3
South zone	4812	26.4
Andaman & Nicobar Island	600	30.3
Andhra Pradesh	600	23.6
Karnataka	601	23.5
Kerala	601	34.3
Lakshadweep	600	35.2
Puducherry	600	25.3
Tamil Nadu	610	27.3
Telangana	600	27.2



TABLE 6.10: PERCEPTION ABOUT THE QUALITY OF COOKING SALT USED

Percentage distribution of perception of the quality of cooking salt used across all India, type of residence, wealth quintile and states across all zones				
	Unweighted N	Good	Average	Poor
Unweighted N	21406	17473	3880	53
All India	21406	79.3	20.4	0.3
Type of residence				
Rural	13095	78.2	21.5	0.3
Urban	8311	81.1	18.6	0.3
Wealth quintile				
Lowest	2692	77.8	22.0	0.2
Second	3657	79.3	20.2	0.5
Middle	4271	77.9	21.9	0.1
Fourth	5112	80.8	19.0	0.2
Highest	5674	80.6	19.0	0.4
North zone	3971	84.8	15.0	0.2
Chandigarh	600	97.6	2.4	-
Delhi	611	81.2	18.8	0.1
Haryana	601	80.1	19.8	0.1
Himachal Pradesh	600	85.7	14.3	-
Jammu & Kashmir	355	61.6	35.8	2.6
Punjab	600	83.5	16.5	-
Rajasthan	604	91.4	8.6	-
Central zone	2403	81.4	18.5	0.1
Chhattisgarh	600	88.1	11.8	0.1
Madhya Pradesh	603	91.4	8.4	0.2
Uttarakhand	600	93.4	6.5	0.1
Uttar Pradesh	600	74.8	25.2	-
East zone	2401	87.6	12.4	0.1
Bihar	600	88.3	11.5	0.2
Jharkhand	600	83.2	16.8	-
Odisha	601	80.3	19.7	-
West Bengal	600	91.8	8.2	-
North-East zone	4817	76.5	23.2	0.3
Arunachal Pradesh	603	77.8	22.0	0.1
Assam	601	73.8	25.9	0.3
Manipur	600	85.6	14.4	-
Meghalaya	600	81.7	18.3	-
Mizoram	605	94.0	5.9	0.2
Nagaland	600	70.9	28.9	0.3

Percentage distribution of perception of the quality of cooking salt used across all India, type of residence, wealth quintile and states across all zones

	Unweighted N	Good	Average	Poor
Sikkim	600	98.3	1.7	-
Tripura	608	79.4	20.3	0.3
West zone	3002	89.1	10.7	0.1
Dadra & Nagar Haveli	601	95.4	4.6	-
Daman & Diu	600	91.6	8.4	-
Goa	601	96.3	3.7	-
Gujarat	600	87.3	12.7	-
Maharashtra	600	90.1	9.7	0.2
South zone	4812	61.6	37.6	0.8
Andaman & Nicobar Island	600	86.9	13.1	-
Andhra Pradesh	600	74.0	24.7	1.3
Karnataka	601	47.2	52.6	0.2
Kerala	601	60.7	39.2	0.1
Lakshadweep	600	59.4	40.6	-
Puducherry	600	76.3	23.7	-
Tamil Nadu	610	76.7	22.8	0.5
Telangana	600	47.8	50.0	2.2



TABLE 6.11: MEDIAN PRICE PAID FOR THE LAST PURCHASE OF 1 KG OF SALT

Median price paid for 1 Kg of salt by type of residence, wealth quintile and states across all zones		
	Unweighted N	Median amount (in Indian Rupee)
Unweighted N	21406	21406
All India	21406	10.0
Type of residence		
Rural	13095	10.0
Urban	8311	15.0
Wealth quintile		
Lowest	2692	10.0
Second	3657	10.0
Middle	4271	10.0
Fourth	5112	14.0
Highest	5674	18.0
North zone	3971	16.8
Chandigarh	600	19.0
Delhi	611	19.0
Haryana	601	18.0
Himachal Pradesh	600	18.0
Jammu & Kashmir	355	20.0
Punjab	600	19.0
Rajasthan	604	17.0
Central zone	2403	11.0
Chhattisgarh	600	10.0
Madhya Pradesh	603	10.0
Uttar Pradesh	600	10.0
Uttarakhand	600	18.0
East zone	2401	10.0
Bihar	600	10.0
Jharkhand	600	10.0
Odisha	601	10.0
West Bengal	600	10.0
North-East zone	4817	10.0
Arunachal Pradesh	603	18.0
Assam	601	10.0
Manipur	600	20.0
Meghalaya	600	15.0
Mizoram	605	25.0
Nagaland	600	10.0

Median price paid for 1 Kg of salt by type of residence, wealth quintile and states across all zones		
	Unweighted N	Median amount (in Indian Rupee)
Sikkim	600	15.0
Tripura	608	10.0
West zone	3002	12.0
Dadra & Nagar Haveli	601	15.0
Daman & Diu	600	18.0
Goa	601	15.0
Gujarat	600	12.0
Maharashtra	600	15.0
South zone	4812	12.0
Andaman & Nicobar Island	600	17.0
Andhra Pradesh	600	15.0
Karnataka	601	10.0
Kerala	601	15.0
Lakshadweep	600	18.0
Puducherry	600	18.0
Tamil Nadu	610	10.0
Telangana	600	18.0



TABLE 6.12: WILLING TO PAY FOR BETTER QUALITY OF COOKING SALT

Percentage distribution of willing to pay for better quality of cooking salt across all India, type of residence, wealth quintile and states across all zones				
	Unweighted N	Yes	No	Don't know
Unweighted N	21406	13353	5636	2417
All India	21406	63.4	22.7	14.0
Type of residence				
Rural	13095	62.7	22.0	15.3
Urban	8311	64.5	23.7	11.8
Wealth quintile				
Lowest	2692	61.6	19.1	19.3
Second	3657	65.7	18.7	15.6
Middle	4271	60.1	25.0	14.9
Fourth	5112	61.3	26.4	12.3
Highest	5674	68.1	24.0	7.9
North zone	3971	67.0	25.3	7.8
Chandigarh	600	81.6	12.8	5.6
Delhi	611	41.9	41.6	16.5
Haryana	601	92.5	3.8	3.7
Himachal Pradesh	600	59.9	34.4	5.7
Jammu & Kashmir	355	29.1	53.9	17.0
Punjab	600	52.5	44.0	3.5
Rajasthan	604	76.0	16.1	7.9
Central zone	2403	67.2	20.4	12.4
Chhattisgarh	600	57.4	36.9	5.7
Madhya Pradesh	603	71.6	23.6	4.8
Uttarakhand	600	85.6	12.3	2.1
Uttar Pradesh	600	66.0	16.2	17.8
East zone	2401	81.6	9.8	8.6
Bihar	600	89.1	3.2	7.7
Jharkhand	600	70.3	12.5	17.2
Odisha	601	97.0	1.4	1.6
West Bengal	600	70.8	19.6	9.6
North-East zone	4817	54.6	25.2	20.2
Arunachal Pradesh	603	72.1	23.2	4.8
Assam	601	51.0	24.1	24.9
Manipur	600	59.8	25.8	14.5
Meghalaya	600	51.1	43.9	5.0
Mizoram	605	53.3	19.7	27.0
Nagaland	600	31.8	39.5	28.7

Percentage distribution of willing to pay for better quality of cooking salt across all India, type of residence, wealth quintile and states across all zones

	Unweighted N	Yes	No	Don't know
Sikkim	600	87.3	12.1	0.6
Tripura	608	80.8	14.8	4.4
West zone	3002	49.6	32.5	17.9
Dadra & Nagar Haveli	601	56.7	33.6	9.7
Daman & Diu	600	47.1	51.5	1.4
Goa	601	40.9	45.7	13.4
Gujarat	600	66.7	26.0	7.3
Maharashtra	600	39.3	36.2	24.5
South zone	4812	53.8	26.7	19.5
Andaman & Nicobar Island	600	60.3	25.7	14.0
Andhra Pradesh	600	43.7	39.5	16.9
Karnataka	601	25.2	25.9	48.8
Kerala	601	65.7	22.3	12.0
Lakshadweep	600	69.5	10.9	19.6
Puducherry	600	57.7	41.0	1.2
Tamil Nadu	610	93.3	5.6	1.1
Telangana	600	38.6	56.0	5.4



TABLE 6.13: DECISION MAKER OF SALT TO BE PURCHASED IN HOUSEHOLD

Per cent distribution of decision maker of salt to be purchased in household across all India, type of residence, wealth quintile and states across all zones						
	Unweighted N	Head of Household	Spouse of the Head of Household	Other Adult (>18 years)		Children (<18 years)
				Male member	Female member	
Unweighted N	21406	9829	9265	1110	1126	76
All India	21406	51.8	36.4	5.6	5.7	0.5
Type of residence						
Rural	13095	51.6	35.8	5.9	6.0	0.7
Urban	8311	52.1	37.3	5.0	5.4	0.2
Wealth quintile						
Lowest	2692	49.8	39	3.7	6.7	0.8
Second	3657	50.9	35.6	6.6	6.2	0.6
Middle	4271	52.6	36.6	5.2	5.0	0.6
Fourth	5112	54.1	34.8	5.8	4.8	0.4
Highest	5674	51.4	36.0	6.6	5.9	0.2
North zone	3971	61.0	26.2	9.8	2.1	0.9
Chandigarh	600	28.5	54.4	10.2	5.2	1.7
Delhi	611	52.0	39.1	7.4	1.6	-
Haryana	601	44.7	34.2	11.1	5.3	4.7
Himachal Pradesh	600	58.9	34	4.7	2.4	-
Jammu & Kashmir	355	76.6	16.2	4.8	2.4	-
Punjab	600	60.5	22.8	14.9	1.8	0.1
Rajasthan	604	67.3	22.4	9.2	1.0	0.2
Central	2403	43.0	38.4	8.7	8.7	1.2
Chhattisgarh	600	56.2	38.4	3.1	2.1	0.2
Madhya Pradesh	603	38.3	38.0	8.2	15.4	-
Uttarakhand	600	34.3	44.6	5.8	15.2	0.1
Uttar Pradesh	600	43.1	38.1	10.3	6.4	2.1
East zone	2401	50.3	35.8	4.6	8.9	0.4
Bihar	600	31.1	51.2	3.3	13.5	0.8
Jharkhand	600	44.4	44.5	3.6	7.3	0.1
Odisha	601	34.0	47.8	6.6	11.2	0.5
West Bengal	600	79.9	11.0	5.5	3.5	0.1
North-East zone	4817	54.2	30.7	9.1	5.9	0.1
Arunachal Pradesh	603	51.6	33.9	11.0	3.5	-
Assam	601	63.0	18.8	12.2	5.9	0.2
Manipur	600	19.0	56.9	5.1	18.9	-
Meghalaya	600	36.7	61.0	0.7	1.3	0.3
Mizoram	605	11.4	84.7	1.2	2.8	-
Nagaland	600	12.8	85.6	0.6	1.0	-

Per cent distribution of decision maker of salt to be purchased in household across all India, type of residence, wealth quintile and states across all zones

	Unweighted N	Head of Household	Spouse of the Head of Household	Other Adult (>18 years)		Children (<18 years)
				Male member	Female member	
Sikkim	600	67.4	32.1	0.2	0.4	-
Tripura	608	62.9	26.0	4.4	6.5	0.1
West zone	3002	68.8	23.8	2.2	4.9	0.2
Dadra & Nagar Haveli	601	22.9	75.9	0.5	0.6	-
Daman & Diu	600	32.9	62.5	1.8	2.8	-
Goa	601	42.9	55.0	0.7	1.3	0.1
Gujarat	600	49.0	39.4	2.1	9.5	-
Maharashtra	600	81.6	13.5	2.4	2.2	0.3
South zone	4812	44.0	50.0	2.8	3.2	0.1
Andaman & Nicobar Island	600	62.4	19.3	13.7	4.6	-
Andhra Pradesh	600	28.0	70.7	0.9	0.1	0.2
Karnataka	601	72.2	26.3	1.3	0.2	-
Kerala	601	52.6	27.1	12.0	8.1	0.1
Lakshadweep	600	81.3	10.3	2.9	5.5	-
Puducherry	600	9.7	86	1.2	3.1	-
Tamil Nadu	610	24.3	66.1	2.2	7.5	-
Telangana	600	36.9	61.3	1.3	0.3	0.2

HoH: Head of Household



TABLE 6.14: BUYER OF SALT FOR THE HOUSEHOLD

Per cent distribution of buyer of salt for the household across all India, type of residence, wealth quintile and states across all zones						
	Unweighted N	Head of Household	Spouse of the Head of Household	Other Adult (>18 years)		Children (<18 years)
				Male member	Female member	
Unweighted N	21406	10507	7957	1697	915	330
All India	21406	56.7	28.6	7.7	4.4	2.6
Type of residence						
Rural	13095	58.9	25.5	8.1	4.1	3.4
Urban	8311	53.3	33.6	7.1	4.8	1.2
Wealth quintile						
Lowest	2692	56.8	27.4	6.4	4.3	5.1
Second	3657	57.1	26.8	7.4	5.4	3.2
Middle	4271	57.5	29.4	6.7	4.3	2.1
Fourth	5112	56.0	31.0	7.7	4.0	1.3
Highest	5674	56.3	28.4	10.2	3.9	1.2
North zone	3971	59.1	23.9	13.5	2.1	1.5
Chandigarh	600	40.6	32.7	14.1	2.9	9.6
Delhi	611	43.6	33.2	17.9	3.9	1.3
Haryana	601	37.6	33.1	17.9	4.4	7.0
Himachal Pradesh	600	54.2	35.2	7.3	2.8	0.5
Jammu & Kashmir	355	84.7	3.0	11.6	0.5	0.2
Punjab	600	59.3	19.6	19.4	1.1	0.7
Rajasthan	604	68.2	22.4	8.9	0.5	-
Central zone	2403	54.8	23.8	13.2	1.7	1.5
Chhattisgarh	600	51.8	39.3	4.5	4.4	-
Madhya Pradesh	603	55.6	14.0	18.5	7.3	4.6
Uttarakhand	600	46.8	24.3	18.4	9.1	1.4
Uttar Pradesh	600	53.9	24.0	11.5	3.4	7.2
East zone	2401	53.9	23.1	12.8	4.8	5.5
Bihar	600	33.2	38.7	5.8	9.9	12.4
Jharkhand	600	45.5	34.9	9.0	5.2	5.4
Odisha	601	59.4	18.3	13.4	7.8	1.1
West Bengal	600	77.4	10.6	6.6	4.6	0.7
North-East zone	4817	61.0	23.9	10.6	4.3	0.2
Arunachal Pradesh	603	55.0	27.2	15.4	2.3	0.1
Assam	601	71.2	11.0	14.0	3.6	0.2
Manipur	600	13.8	58.3	2.7	24.4	0.9
Meghalaya	600	37.5	60.4	0.7	1.0	0.4
Mizoram	605	10.6	84.9	2.2	2.2	-
Nagaland	600	8.9	88.0	0.1	2.7	0.3

Per cent distribution of buyer of salt for the household across all India, type of residence, wealth quintile and states across all zones

	Unweighted N	Head of Household	Spouse of the Head of Household	Other Adult (>18 years)		Children (<18 years)
				Male member	Female member	
Sikkim	600	61.8	37.3	0.5	0.4	-
Tripura	608	81.9	8.4	7.7	2.1	-
West zone	3002	66.0	26.4	2.5	4.9	0.1
Dadra & Nagar Haveli	601	21.6	76.9	0.2	1.3	-
Daman & Diu	600	27.8	65.7	2.2	4.2	-
Goa	601	40.1	57.2	1.4	1.3	-
Gujarat	600	34.8	52.9	1.6	10.7	-
Maharashtra	600	85.8	9.5	3.1	1.4	0.2
South zone	4812	52.6	41.3	3.1	3.0	0.1
Andaman & Nicobar Island	600	67.8	9.9	19.4	2.9	-
Andhra Pradesh	600	44.1	55.3	-	0.5	0.1
Karnataka	601	76.2	22.2	1.5	0.1	-
Kerala	601	52.6	25.2	15.9	6.2	0.1
Lakshadweep	600	81.3	5.5	9.5	3.6	-
Puducherry	600	12.1	84.3	0.8	2.9	-
Tamil Nadu	610	28.7	61.3	2.0	7.8	0.3
Telangana	600	61.2	38.0	0.8	-	-

HoH: Head of Household



TABLE 6.15: PERCEPTION THAT IODISED SALT DOES TASTE DIFFERENT

Percentage distribution of perception that iodised salt does tastes different across all India, type of residence, wealth quintile and states across all zones						
	Unweighted N	Strongly agree	Somewhat Agree	Neither agree nor disagree	Somewhat Disagree	Strongly disagree
Unweighted N	14116	3971	4977	1833	2366	969
All India	14116	33.7	33.2	12.0	15.6	5.5
Type of residence						
Rural	8254	35.7	34.1	11.8	13.8	4.6
Urban	5862	31.2	32.0	12.3	17.9	6.7
Wealth quintile						
Lowest	1031	35.5	30.2	22.1	6.7	5.5
Second	2098	31.4	35.4	13.9	13.8	5.5
Middle	2643	31.8	37.7	12.2	14.3	3.9
Fourth	3805	33.8	31.6	11.9	17.1	5.6
Highest	4539	35.5	31.5	6.3	20.3	6.4
North zone	2447	45.7	39.5	7.6	5.2	2.0
Chandigarh	451	59.3	26.0	7.0	7.8	-
Delhi	218	36.1	58.3	5.0	-	0.6
Haryana	211	20.9	67.6	9.3	2.1	-
Himachal Pradesh	501	64.9	31.6	1.2	1.5	0.8
Jammu & Kashmir	48	(64.8)	(35.2)	-	-	-
Punjab	498	60.1	37.4	0.7	1.0	0.7
Rajasthan	520	42.0	35.4	11.2	8.2	3.2
Central zone	1637	45.8	31.4	14.0	5.3	3.5
Chhattisgarh	450	39.7	48.9	6.8	4.1	0.5
Madhya Pradesh	283	35.4	30.3	15.3	10.4	8.6
Uttarakhand	564	63.4	27.0	2.9	2.7	4.0
Uttar Pradesh	340	49.6	27.8	16.4	4.0	2.3
East zone	1098	39.8	36.2	6.4	8.6	8.9
Bihar	235	46.8	21.5	5.4	4.3	22.1
Jharkhand	319	29.4	35.8	7.4	13.5	13.8
Odisha	213	45.1	48.5	2.5	3.6	0.3
West Bengal	331	36.9	43.6	8.0	11.5	-
North-East zone	3569	6.1	35.0	17.2	41.1	0.6
Arunachal Pradesh	562	24.7	28.8	14.5	22.4	9.6
Assam	311	2.3	24.7	13.9	58.9	0.3
Manipur	553	5.3	45.0	29.5	19.1	1.1
Meghalaya	431	0.9	40.2	45.5	13.3	-
Mizoram	563	1.5	68.8	1.7	27.8	0.2
Nagaland	336	0.2	58.9	27.5	13.3	-

Percentage distribution of perception that iodised salt does tastes different across all India, type of residence, wealth quintile and states across all zones						
	Unweighted N	Strongly agree	Somewhat Agree	Neither agree nor disagree	Somewhat Disagree	Strongly disagree
Sikkim	497	69.2	29.2	-	1.4	0.2
Tripura	316	21.8	61.3	4.9	12.0	-
West zone	2315	31.5	27.6	18.0	9.0	13.9
Dadra & Nagar Haveli	538	19.8	50.7	3.2	14.1	12.3
Daman & Diu	527	2.5	16.6	2.4	31.4	47.2
Goa	536	0.5	7.9	46.2	18.7	26.7
Gujarat	500	46.2	16.5	8.6	13.8	15.0
Maharashtra	214	13.6	42.8	29.6	2.1	11.9
South zone	3050	15.4	32.0	12.0	38.3	2.3
Andaman & Nicobar Island	525	33.8	49.9	5.0	11.1	0.1
Andhra Pradesh	113	13.4	51.1	0.7	34.7	-
Karnataka	313	6.4	30.4	25.1	37.4	0.6
Kerala	487	24.9	39.2	12.5	22.2	1.2
Lakshadweep	539	4.3	6.5	42.5	39.7	7.1
Puducherry	443	7.7	15.3	40.2	26.0	10.9
Tamil Nadu	369	16.5	23.8	6.5	47.8	5.5
Telangana	261	19.8	36.6	-	43.0	0.6



TABLE 6.16: PERCEPTION THAT IODINE CHANGE COLOUR, ODOUR OR TASTE

Percentage distribution of perception that iodine does change colour, odour or taste across all India, type of residence, wealth quintile and states across all zones						
	Unweighted N	Strongly agree	Somewhat Agree	Neither agree nor disagree	Somewhat Disagree	Strongly disagree
Unweighted N	14116	2337	4760	2598	3398	1023
All India	14116	19.6	32.5	20.0	21.1	6.8
Type of residence						
Rural	8254	19.5	33.8	22.4	18.5	5.8
Urban	5862	19.7	31.0	16.8	24.4	8.1
Wealth quintile						
Lowest	1031	19.9	28.3	30.7	15.5	5.6
Second	2098	15.8	34.0	22.3	21.5	6.4
Middle	2643	18.6	31.8	24.0	18.7	6.9
Fourth	3805	20.4	33.1	18.5	21.0	7.0
Highest	4539	21.8	33.5	12.2	25.1	7.4
North zone	2447	22.5	44.4	21.6	7.5	4.0
Chandigarh	451	46.7	30.2	10.6	12.2	0.3
Delhi	218	28.3	52.3	10.8	8.6	-
Haryana	211	16.6	68.6	11.7	3.1	-
Himachal Pradesh	501	25.4	59.3	5.8	6.8	2.7
Jammu & Kashmir	48	(36.5)	(46.8)	(12.4)	(2.2)	(2.1)
Punjab	498	28.2	41.1	17.9	5.0	7.8
Rajasthan	520	19.6	40.0	27.6	9.2	3.6
Central zone	1637	22.3	37.4	25.7	10.6	4.0
Chhattisgarh	450	22.1	48.9	19.1	6.4	3.6
Madhya Pradesh	283	24.1	29.1	21.3	16.6	8.8
Uttarakhand	564	37.1	32.5	14.3	10.4	5.7
Uttar Pradesh	340	20.2	38.0	30.1	9.5	2.2
East zone	1098	24.9	29.0	13.0	23.5	9.6
Bihar	235	26.0	17.2	23.5	10.6	22.8
Jharkhand	319	8.7	22.8	18.2	34.5	15.8
Odisha	213	33.0	52.2	7.1	7.4	0.3
West Bengal	331	27.7	33.1	5.0	33.6	0.5
North-East zone	3569	4.6	24.6	26.5	43.7	0.6
Arunachal Pradesh	562	19.5	24.3	23.3	29.6	3.4
Assam	311	2.2	14.7	24.4	58.0	0.6
Manipur	553	1.3	38.5	35.0	24.1	1.1
Meghalaya	431	0.9	20.1	55.6	23.4	-
Mizoram	563	0.8	51.2	5.9	41.9	0.2
Nagaland	336	-	56.5	28.6	14.5	0.4

Percentage distribution of perception that iodine does change colour, odour or taste across all India, type of residence, wealth quintile and states across all zones

	Unweighted N	Strongly agree	Somewhat Agree	Neither agree nor disagree	Somewhat Disagree	Strongly disagree
Sikkim	497	58.6	29.6	0.9	10.9	-
Tripura	316	14.3	49.3	18.6	17.8	-
West zone	2315	28.8	24.4	16.0	13.6	17.2
Dadra & Nagar Haveli	538	2.3	41.6	3.6	25.8	26.7
Daman & Diu	527	1.5	13.4	3.0	39.3	42.8
Goa	536	1.0	7.2	25.3	59.7	6.9
Gujarat	500	41.9	14.0	8.4	14.1	21.5
Maharashtra	214	12.9	38.6	25.9	10.8	11.7
South zone	3050	7.0	29.1	19.8	40.7	3.3
Andaman & Nicobar Island	525	22.5	45.1	12.4	18.5	1.5
Andhra Pradesh	113	8.9	33.2	4.3	53.6	-
Karnataka	313	3.4	27.4	47.5	20.1	1.6
Kerala	487	11.5	39.3	17.6	30.2	1.4
Lakshadweep	539	0.3	6.1	39.2	40.7	13.7
Puducherry	443	5.1	21.0	39.2	25.5	9.2
Tamil Nadu	369	8.5	20.2	6.7	57.1	7.5
Telangana	261	3.8	39.0	1.1	55.5	0.7



TABLE 6.17: PERCEPTION THAT ALL PACKAGED SALTS ARE IODISED

Percentage distribution of perception that all packaged salts are iodised different across all India, type of residence, wealth quintile and states across all zones						
	Unweighted N	Strongly agree	Somewhat Agree	Neither agree nor disagree	Somewhat Disagree	Strongly disagree
Unweighted N	14116	1410	2992	2826	5184	1704
All India	14116	12.3	21.3	21.5	31.8	13.1
Type of residence						
Rural	8254	12.5	21.7	23.5	30.5	11.8
Urban	5862	12.0	20.9	18.9	33.5	14.8
Wealth quintile						
Lowest	1031	11.7	19.5	28.8	30.0	10.0
Second	2098	9.8	18.9	25.5	31.9	13.9
Middle	2643	11.9	21.8	22.6	30.8	12.9
Fourth	3805	15.8	22.8	17.0	31.5	12.9
Highest	4539	11.4	22.1	18.6	33.5	14.4
North zone	2447	24.4	29.5	26.5	25.9	3.8
Chandigarh	451	13.0	16.0	20.3	40.7	10.0
Delhi	218	22.3	36.0	8.6	26.1	7.0
Haryana	211	20.3	53.2	15.6	9.0	2.0
Himachal Pradesh	501	17.7	22.9	21.7	28.5	9.2
Jammu & Kashmir	48	(27.2)	(38.1)	(10.6)	(4.8)	(19.3)
Punjab	498	23.2	14.8	29.1	29.0	3.9
Rajasthan	520	26.4	32.0	29.7	9.1	2.8
Central zone	1637	8.2	15.2	35.3	22.4	18.8
Chhattisgarh	450	7.7	30.3	26.2	32.5	3.2
Madhya Pradesh	283	13.9	15.9	15.3	27.9	27.0
Uttarakhand	564	18.1	17.0	7.2	38.2	19.5
Uttar Pradesh	340	5.3	11.0	47.8	16.2	19.8
East zone	1098	13.3	20.4	14.7	31.4	20.2
Bihar	235	30.3	18.9	16.5	15.5	18.8
Jharkhand	319	7.0	19.2	9.2	35.5	29.1
Odisha	213	2.1	4.9	3.0	41.0	49.0
West Bengal	331	6.4	26.5	18.8	38.7	9.6
North-East zone	3569	4.5	31.5	20.0	41.1	2.8
Arunachal Pradesh	562	22.0	26.8	25.3	24.7	1.2
Assam	311	3.4	34.4	18.4	42.3	1.5
Manipur	553	0.5	35.7	26.0	35.9	1.9
Meghalaya	431	0.8	16.1	38.3	35.0	9.9
Mizoram	563	-	48.6	10.5	40.9	-
Nagaland	336	1.0	4.9	6.5	73.6	13.9

Percentage distribution of perception that all packaged salts are iodised different across all India, type of residence, wealth quintile and states across all zones

	Unweighted N	Strongly agree	Somewhat Agree	Neither agree nor disagree	Somewhat Disagree	Strongly disagree
Sikkim	497	13.8	7.4	36.4	41.6	0.7
Tripura	316	14.7	34.8	11.2	36.6	2.7
West zone	2315	14.7	17.8	18.4	30.8	18.3
Dadra & Nagar Haveli	538	2.3	23.4	19.0	29.3	26.0
Daman & Diu	527	3.8	5.8	4.5	46.2	39.7
Goa	536	0.3	7.4	37.1	45.7	9.5
Gujarat	500	18.4	8.0	9.4	41.5	22.7
Maharashtra	214	10.7	31.1	29.8	15.9	12.6
South zone	3050	6.5	22.9	11.7	51.7	7.2
Andaman & Nicobar Island	525	3.6	24.2	10.0	46.0	16.2
Andhra Pradesh	113	6.9	29.2	4.0	59.0	0.9
Karnataka	313	2.7	29.7	29.1	37.5	1.0
Kerala	487	12.1	32.8	12.1	41.0	2.1
Lakshadweep	539	1.5	4.9	29.6	47.9	16.1
Puducherry	443	5.5	16.4	36.0	31.6	10.5
Tamil Nadu	369	5.4	8.8	0.8	66.6	18.4
Telangana	261	9.6	26.1	2.2	59.4	2.7



TABLE 6.18: PERCEPTION THAT REFINED IODISED SALT IS UNHEALTHY

Percentage distribution of perception that refined iodised salt is unhealthy across all India, type of residence, wealth quintile and states across all zones						
	Unweighted N	Strongly agree	Somewhat Agree	Neither agree nor disagree	Somewhat Disagree	Strongly disagree
Unweighted N	14116	1244	2803	3270	5007	1792
All India	14116	11.7	19.0	21.2	33.4	14.7
Type of residence						
Rural	8254	11.6	20.3	22.9	32.1	13.2
Urban	5862	11.9	17.4	19.0	35.1	16.6
Wealth quintile						
Lowest	1031	14.5	18.3	30.3	25.4	11.5
Second	2098	10.1	17.4	24.1	36.3	12.2
Middle	2643	11.1	19.4	22.3	33.4	13.7
Fourth	3805	12.1	20.4	20.0	32.8	14.7
Highest	4539	11.6	18.9	15.4	35.6	18.4
North zone	2447	14.0	34.5	26.8	11.8	12.9
Chandigarh	451	24.0	11.7	22.8	37.4	4.1
Delhi	218	11.4	35.8	15.4	37.0	0.4
Haryana	211	12.0	55.3	18.7	7.7	6.3
Himachal Pradesh	501	11.2	17.0	23.2	19.3	29.4
Jammu & Kashmir	48	(29.6)	(49.0)	(13.2)	(6.0)	(2.1)
Punjab	498	20.2	16.1	12.5	11.3	39.9
Rajasthan	520	11.9	40.5	35.6	9.0	3.0
Central zone	1637	9.6	18.1	30.1	25.2	17.0
Chhattisgarh	450	12.4	37.0	23.8	20.7	6.1
Madhya Pradesh	283	10.8	16.7	17.2	26.2	29.1
Uttarakhand	564	16.9	27.8	9.1	30.8	15.5
Uttar Pradesh	340	7.8	12.8	38.5	25.5	15.5
East zone	1098	10.4	13.3	16.2	37.1	23.0
Bihar	235	23.0	17.2	17.4	10.2	32.3
Jharkhand	319	10.7	22.1	16.6	25.4	25.3
Odisha	213	8.4	14.1	1.1	36.4	40.0
West Bengal	331	1.7	7.0	19.6	61.3	10.4
North-East zone	3569	3.2	17.6	29.5	47.3	2.4
Arunachal Pradesh	562	19.1	13.5	23.8	31.5	12.1
Assam	311	2.2	15.3	27.5	53.0	2.1
Manipur	553	0.7	16.4	27.3	53.3	2.4
Meghalaya	431	0.3	10.9	52.9	35.6	0.3
Mizoram	563	0.2	58.9	13.5	27.2	0.1
Nagaland	336	0.3	8.1	63.9	27.3	0.4

Percentage distribution of perception that refined iodised salt is unhealthy across all India, type of residence, wealth quintile and states across all zones

	Unweighted N	Strongly agree	Somewhat Agree	Neither agree nor disagree	Somewhat Disagree	Strongly disagree
Sikkim	497	1.4	2.9	41.4	51.5	2.8
Tripura	316	11.2	28.3	12.7	43.2	4.6
West zone	2315	23.5	10.7	15.9	28.0	21.8
Dadra & Nagar Haveli	538	3.8	38.5	4.7	30.4	22.6
Daman & Diu	527	3.2	13.6	4.6	40.9	37.7
Goa	536	0.7	1.8	33.2	53.7	10.6
Gujarat	500	36.3	6.4	6.7	24.1	26.6
Maharashtra	214	7.9	16.4	27.7	32.2	15.9
South zone	3050	6.3	19.2	14.3	55.4	4.8
Andaman & Nicobar Island	525	2.4	8.3	26.3	58.5	4.5
Andhra Pradesh	113	8.3	31.8	4.9	54.5	0.5
Karnataka	313	2.9	19.7	35.8	38.7	2.9
Kerala	487	12.1	19.1	7.7	57.6	3.4
Lakshadweep	539	0.1	7.5	32.9	44.2	15.3
Puducherry	443	3.0	16.5	56.2	14.0	10.4
Tamil Nadu	369	5.7	11.3	4.7	68.8	9.5
Telangana	261	5.8	33.0	1.9	58.4	0.9



TABLE 6.19: PERCEPTION THAT AVAILABILITY OF IODINE IN OUR NORMAL DIET IS NOT SUFFICIENT AND IODISED SALT IS REQUIRED

Percentage distribution of perception that availability of iodine in our normal diet is not sufficient and iodised salt is required across all India, type of residence, wealth quintile and states across all zones						
	Unweighted N	Strongly agree	Somewhat Agree	Neither agree nor disagree	Somewhat Disagree	Strongly disagree
Unweighted N	14116	3049	5683	3001	1899	484
All India	14116	27.0	39.3	16.9	12.6	4.2
Type of residence						
Rural	8254	26.8	39.4	17.8	12.1	3.8
Urban	5862	27.3	39.0	15.6	13.3	4.7
Wealth quintile						
Lowest	1031	28.1	33.0	24.6	11.7	2.4
Second	2098	25.7	37.0	18.5	13.5	5.2
Middle	2643	27.0	41.8	16.6	10.9	3.8
Fourth	3805	25.8	42.5	15.3	11.8	4.7
Highest	4539	28.4	39.1	13.8	14.4	4.3
North zone	2447	31.9	44.6	17.4	5.1	1.0
Chandigarh	451	49.9	38.1	11.2	0.7	-
Delhi	218	40.0	51.2	5.5	3.4	-
Haryana	211	44.2	42.9	12.1	0.7	-
Himachal Pradesh	501	38.5	48.2	7.3	4.2	1.7
Jammu & Kashmir	48	(27.4)	(50.9)	(19.6)	(2.1)	-
Punjab	498	38.4	51.0	8.6	0.6	1.4
Rajasthan	520	25.8	41.2	24.0	7.9	1.1
Central zone	1637	28.9	34.4	22.7	10.6	3.5
Chhattisgarh	450	26.4	49.5	18.8	4.4	1.0
Madhya Pradesh	283	54.2	32.9	8.6	3.1	1.0
Uttarakhand	564	31.2	25.8	16.1	24.6	2.4
Uttar Pradesh	340	20.0	31.8	29.5	13.6	5.1
East zone	1098	26.4	35.9	16.6	15.6	5.5
Bihar	235	48.5	23.7	6.5	5.3	15.9
Jharkhand	319	45.9	37.7	5.2	8.9	2.3
Odisha	213	19.0	57.4	18.8	4.5	0.3
West Bengal	331	5.1	38.0	27.6	28.7	0.6
North-East zone	3569	11.4	59.7	20.4	8.2	0.3
Arunachal Pradesh	562	29.1	44.9	23.8	1.5	0.8
Assam	311	14.5	74.1	7.3	4.0	-
Manipur	553	3.9	27.6	50.2	18.2	0.1
Meghalaya	431	-	25.1	62.7	11.9	0.3
Mizoram	563	0.2	57.2	15.7	26.9	-

Percentage distribution of perception that availability of iodine in our normal diet is not sufficient and iodised salt is required across all India, type of residence, wealth quintile and states across all zones

	Unweighted N	Strongly agree	Somewhat Agree	Neither agree nor disagree	Somewhat Disagree	Strongly disagree
Nagaland	336	12.8	34.2	51.9	1.1	-
Sikkim	497	1.6	6.7	51.2	33.0	7.5
Tripura	316	10.4	65.3	10.5	12.4	1.4
West zone	2315	34.3	25.1	16.4	12.1	12.1
Dadra & Nagar Haveli	538	23.5	52.1	4.0	13.2	7.2
Daman & Diu	527	38.9	43.4	1.4	7.2	9.2
Goa	536	1.2	21.2	38.4	31.5	7.7
Gujarat	500	51.2	18.8	7.0	9.1	13.9
Maharashtra	214	13.3	33.2	28.2	15.3	9.9
South zone	3050	19.7	49.2	10.7	19.1	1.4
Andaman & Nicobar Island	525	16.1	52.1	23.1	8.2	0.5
Andhra Pradesh	113	18.6	53.0	6.3	21.1	0.9
Karnataka	313	6.7	60.3	21.5	10.7	0.7
Kerala	487	15.4	54.4	8.9	19.9	1.5
Lakshadweep	539	2.3	38.4	19.8	29.0	10.5
Puducherry	443	9.0	27.7	52.6	5.8	5.0
Tamil Nadu	369	36.7	40.0	5.3	16.5	1.6
Telangana	261	13.3	39.0	2.2	43.2	2.4

() Based on 25-49 unweighted cases



TABLE 6.20: PERCEPTION THAT CONSUMPTION OF IODISED SALT IS RELATED TO NORMAL GROWTH OF FOETUS IN PREGNANT WOMEN

Percentage distribution of perception that consumption of iodised salt is related to normal growth of foetus in pregnant women across all India, type of residence, wealth quintile and states across all zones						
	Unweighted N	Strongly agree	Somewhat Agree	Neither agree nor disagree	Somewhat Disagree	Strongly disagree
Unweighted N	14116	4134	6462	2084	1158	278
All India	14116	34.0	41.3	13.9	9.0	1.8
Type of residence						
Rural	8254	32.0	41.5	15.9	8.9	1.7
Urban	5862	36.7	40.9	11.3	9.1	2.0
Wealth quintile						
Lowest	1031	31.0	33.4	24.7	9.4	1.5
Second	2098	30.1	40.6	18.0	9.9	1.3
Middle	2643	31.8	43.6	14.2	8.8	1.5
Fourth	3805	35.1	43.8	11.6	7.2	2.3
Highest	4539	38.4	41.5	8.2	9.8	2.1
North zone	2447	33.1	42.0	20.1	3.8	1.0
Chandigarh	451	56.8	29.6	12.5	0.8	0.3
Delhi	218	43.5	51.6	3.8	0.8	0.3
Haryana	211	44.7	36.7	14.3	4.3	-
Himachal Pradesh	501	50.3	37.6	9.3	2.5	0.3
Jammu & Kashmir	48	(30.3)	(56.6)	(13.1)	-	-
Punjab	498	63.6	25.4	8.9	0.3	1.8
Rajasthan	520	16.1	48.9	28.3	5.7	1.0
Central zone	1637	38.8	36.1	17.7	6.7	0.8
Chhattisgarh	450	26.1	51.1	18.3	4.5	-
Madhya Pradesh	283	62.2	28.2	6.6	2.7	0.2
Uttarakhand	564	51.0	34.4	3.2	11.2	0.2
Uttar Pradesh	340	32.1	35.4	23.1	8.2	1.3
East zone	1098	37.8	33.0	11.5	12.5	5.1
Bihar	235	41.1	20.3	19.5	3.3	15.8
Jharkhand	319	48.1	37.2	4.7	8.0	2.0
Odisha	213	47.4	51.0	1.4	0.3	-
West Bengal	331	28.8	35.6	11.2	24.4	-
North-East zone	3569	15.5	63.4	16.2	4.8	-
Arunachal Pradesh	562	31.4	44.3	22.9	1.0	0.4
Assam	311	18.6	71.6	6.6	3.2	-
Manipur	553	3.8	41.1	37.9	17.0	0.1
Meghalaya	431	0.5	29.5	62.1	7.9	-

Percentage distribution of perception that consumption of iodised salt is related to normal growth of foetus in pregnant women across all India, type of residence, wealth quintile and states across all zones

	Unweighted N	Strongly agree	Somewhat Agree	Neither agree nor disagree	Somewhat Disagree	Strongly disagree
Mizoram	563	0.2	81.2	11.1	7.5	-
Nagaland	336	8.3	76.8	14.9	-	-
Sikkim	497	67.7	17.4	11.3	3.3	0.2
Tripura	316	16.9	69.9	10.8	2.4	-
West zone	2315	39.8	35.0	12.7	9.7	2.8
Dadra & Nagar Haveli	538	23.9	61.5	1.4	8.3	4.8
Daman & Diu	527	48.1	41.9	2.3	3.7	4.1
Goa	536	1.6	31.7	29.3	30.2	7.2
Gujarat	500	62.1	21.2	3.5	9.2	4.0
Maharashtra	214	11.9	53.1	24.3	9.5	1.1
South zone	3050	26.5	52.2	7.9	12.6	0.7
Andaman & Nicobar Island	525	23.7	65.5	8.7	1.7	0.3
Andhra Pradesh	113	7.7	72.1	6.6	13.6	-
Karnataka	313	20.8	50.1	18.5	10.1	0.4
Kerala	487	15.5	65.5	7.0	11.5	0.4
Lakshadweep	539	1.6	39.3	20.8	22.2	16.1
Puducherry	443	17.1	55.2	24.6	1.3	1.8
Tamil Nadu	369	46.7	45.9	1.8	5.3	0.3
Telangana	261	14.4	42.7	0.8	39.1	3.0

() Based on 25-49 unweighted cases



TABLE 6.21: PERCEPTION THAT APPEARANCE CANNOT MEAN IT IS A GOOD QUALITY SALT

Percentage distribution of perception that appearance cannot mean it is a good quality salt across all India, type of residence, wealth quintile and states across all zones						
	Unweighted N	Strongly agree	Somewhat Agree	Neither agree nor disagree	Somewhat Disagree	Strongly disagree
Unweighted N	14116	2314	5049	2969	2978	806
All India	14116	19.0	32.8	21.9	19.9	6.4
Type of residence						
Rural	8254	18.1	31.2	24.0	19.8	6.8
Urban	5862	20.2	34.9	19.1	19.9	5.9
Wealth quintile						
Lowest	1031	19.6	21.1	33.4	19.2	6.7
Second	2098	16.4	30.7	24.9	21.5	6.5
Middle	2643	18.6	34.3	20.9	19.5	6.7
Fourth	3805	21.6	34.8	20.1	17.6	5.9
Highest	4539	18.5	36.8	16.8	21.4	6.5
North zone	2447	23.3	29.3	33.6	12.0	1.7
Chandigarh	451	21.8	28.0	26.2	21.9	2.1
Delhi	218	32.7	43.0	14.8	8.7	0.8
Haryana	211	29.9	47.1	13.0	9.3	0.7
Himachal Pradesh	501	21.7	16.7	31.4	25.0	5.1
Jammu & Kashmir	48	(16.0)	(68.6)	(13.2)	-	(2.1)
Punjab	498	21.6	20.1	28.3	25.2	4.8
Rajasthan	520	22.4	29.6	41.5	6.3	0.2
Central zone	1637	13.1	25.8	31.9	16.8	12.4
Chhattisgarh	450	7.9	33.1	29.7	25.9	3.4
Madhya Pradesh	283	17.4	23.9	14.0	21.5	23.2
Uttarakhand	564	31.0	12.2	13.5	38.9	4.4
Uttar Pradesh	340	11.1	25.9	40.9	10.6	11.5
East zone	1098	15.5	23.2	19.7	30.5	11.1
Bihar	235	25.1	19.1	29.1	11.8	14.9
Jharkhand	319	19.7	25.1	17.6	28.7	8.9
Odisha	213	9.1	23.4	0.5	31.5	35.5
West Bengal	331	8.7	25.4	19.2	44.6	2.1
North-East zone	3569	11.0	43.6	17.7	27.2	0.5
Arunachal Pradesh	562	24.4	45.1	18.8	11.5	0.3
Assam	311	11.4	38.5	15.2	34.3	0.5
Manipur	553	4.0	46.8	28.0	20.6	0.6
Meghalaya	431	10.0	40.1	38.3	11.0	0.6
Mizoram	563	0.4	83.9	8.5	7.2	-
Nagaland	336	9.4	68.9	7.0	14.6	0.2

Percentage distribution of perception that appearance cannot mean it is a good quality salt across all India, type of residence, wealth quintile and states across all zones

	Unweighted N	Strongly agree	Somewhat Agree	Neither agree nor disagree	Somewhat Disagree	Strongly disagree
Sikkim	497	14.4	13.1	33.6	38.5	0.4
Tripura	316	16.3	48.4	8.9	25.5	0.9
West zone	2315	29.2	31.6	15.1	17.6	6.4
Dadra & Nagar Haveli	538	8.8	22.6	23.9	22.2	22.5
Daman & Diu	527	35.1	41.5	4.5	9.8	9.1
Goa	536	1.3	33.4	29.4	25.8	10.0
Gujarat	500	45.0	22.8	3.9	17.6	10.8
Maharashtra	214	9.6	43.2	29.4	17.4	0.4
South zone	3050	18.4	48.0	10.8	21.2	1.6
Andaman & Nicobar Island	525	20.8	37.9	10.0	26.2	5.2
Andhra Pradesh	113	5.5	76.4	0.9	17.2	-
Karnataka	313	2.6	41.2	28.2	26.7	1.3
Kerala	487	14.7	59.5	9.7	15.2	0.9
Lakshadweep	539	1.1	26.8	33.1	25.2	13.8
Puducherry	443	17.3	25.3	41.2	8.8	7.5
Tamil Nadu	369	38.9	45.0	1.0	13.0	2.0
Telangana	261	13.5	41.6	1.2	41.1	2.6



TABLE 6.22: PERCEPTION THAT IODISATION OF SALT DRASTICALLY INCREASES THE COST

Percentage distribution of perception that iodisation of salt drastically increases the cost across all India, type of residence, wealth quintile and states across all zones						
	Unweighted N	Strongly agree	Somewhat Agree	Neither agree nor disagree	Somewhat Disagree	Strongly disagree
Unweighted N	14116	1900	4293	2958	3800	1165
All India	14116	18.8	31.8	18.3	23.7	7.4
Type of residence						
Rural	8254	18.4	31.5	20.6	22.8	6.6
Urban	5862	19.3	32.1	15.4	24.8	8.4
Wealth quintile						
Lowest	1031	23.4	25.6	27.7	17.5	5.7
Second	2098	16.3	32.8	19.0	25.4	6.5
Middle	2643	18.8	30.8	19.7	24.5	6.2
Fourth	3805	18.3	33.1	17.9	23.3	7.4
Highest	4539	18.6	33.5	13.2	25.1	9.6
North zone	2447	19.3	32.9	25.2	14.8	7.8
Chandigarh	451	32.2	22.3	19.7	21.6	4.2
Delhi	218	15.1	39.8	10.8	32.4	2.0
Haryana	211	29.2	26.7	17.1	25.5	1.5
Himachal Pradesh	501	16.8	20.2	21.5	24.9	16.5
Jammu & Kashmir	48	(20.7)	(63.5)	(9.0)	(6.8)	-
Punjab	498	20.8	16.7	15.0	20.8	26.6
Rajasthan	520	17.7	40.4	32.6	8.1	1.1
Central zone	1637	26.5	33.9	21.1	14.0	4.6
Chhattisgarh	450	19.8	35.5	21.6	20.1	3.1
Madhya Pradesh	283	34.0	27.4	11.3	16.5	10.7
Uttarakhand	564	28.9	28.6	10.7	30.4	1.5
Uttar Pradesh	340	25.2	36.4	25.6	9.8	3.0
East zone	1098	17.1	22.8	11.6	34.7	13.8
Bihar	235	24.5	24.0	10.6	12.0	28.8
Jharkhand	319	18.6	38.8	11.2	19.5	12.0
Odisha	213	46.2	46.0	1.0	6.8	-
West Bengal	331	2.6	9.4	15.5	65.1	7.5
North-East zone	3569	7.1	32.4	20.4	38.5	1.5
Arunachal Pradesh	562	20.3	28.7	19.0	25.8	6.2
Assam	311	8.1	28.4	13.1	49.3	1.1
Manipur	553	7.5	33.5	34.9	24.0	0.1
Meghalaya	431	1.1	23.4	59.6	15.8	0.1
Mizoram	563	-	65.8	15.7	18.5	-
Nagaland	336	0.2	11.7	28.5	58.7	0.9

Percentage distribution of perception that iodisation of salt drastically increases the cost across all India, type of residence, wealth quintile and states across all zones

	Unweighted N	Strongly agree	Somewhat Agree	Neither agree nor disagree	Somewhat Disagree	Strongly disagree
Sikkim	497	2.3	8.8	15.9	48.0	25.0
Tripura	316	8.9	66.2	13.4	11.0	0.5
West zone	2315	23.5	26.4	16.2	19.7	14.2
Dadra & Nagar Haveli	538	3.0	24.0	22.6	24.3	26.1
Daman & Diu	527	14.6	28.2	3.9	32.9	20.4
Goa	536	1.1	27.5	26.9	31.2	13.3
Gujarat	500	36.5	16.5	3.8	22.0	21.3
Maharashtra	214	7.3	39.5	32.2	16.1	4.8
South zone	3050	10.8	39.1	16.8	31.9	1.4
Andaman & Nicobar Island	525	2.9	30.3	23.9	41.3	1.6
Andhra Pradesh	113	5.6	64.0	5.1	25.4	-
Karnataka	313	2.0	24.3	32.2	41.3	0.2
Kerala	487	17.4	50.1	13.0	18.5	1.1
Lakshadweep	539	0.5	21.3	33.1	32.1	13.0
Puducherry	443	3.4	16.6	62.3	11.9	5.8
Tamil Nadu	369	15.0	35.1	13.2	34.0	2.8
Telangana	261	13.3	55.3	0.4	29.6	1.5



TABLE 6.23: PERCEPTION THAT CONSUMPTION OF IODISED SALT LEADS TO DISEASES AND ILLNESS

Percentage distribution of perception that consumption of iodised salt leads to diseases and illness across all India, type of residence, wealth quintile and states across all zones						
	Unweighted N	Strongly agree	Somewhat Agree	Neither agree nor disagree	Somewhat Disagree	Strongly disagree
Unweighted N	14116	1276	2279	2427	5110	3024
All India	14116	11.9	17.1	16.8	33.1	21.1
Type of residence						
Rural	8254	11.4	17.7	18.0	32.4	20.6
Urban	5862	12.5	16.4	15.3	33.9	21.9
Wealth quintile						
Lowest	1031	9.1	11.8	29.2	30.0	19.9
Second	2098	11.1	16.9	17.5	35.2	19.4
Middle	2643	10.9	19.3	16.4	34.3	19.1
Fourth	3805	13.9	19.0	17.1	31.5	18.4
Highest	4539	12.6	16.6	10.8	33.5	26.5
North zone	2447	22.4	24.4	16.4	20.2	16.5
Chandigarh	451	14.8	11.3	17.8	24.0	32.1
Delhi	218	5.6	12.3	7.2	57.1	17.8
Haryana	211	23.0	23.8	14.7	27.1	11.5
Himachal Pradesh	501	17.0	6.3	14.3	17.7	44.6
Jammu & Kashmir	48	(10.2)	(70.6)	(19.2)	-	-
Punjab	498	22.4	10.5	7.9	9.1	50.2
Rajasthan	520	25.0	32.4	21.1	20.6	0.9
Central zone	1637	7.1	9.1	25.0	25.2	33.6
Chhattisgarh	450	6.7	22.8	20.3	40.9	9.3
Madhya Pradesh	283	4.8	9.5	8.0	22.9	54.8
Uttarakhand	564	1.0	4.5	21.6	40.1	32.8
Uttar Pradesh	340	8.7	5.9	32.9	20.6	32.0
East zone	1098	7.7	9.1	11.2	36.8	35.3
Bihar	235	21.7	19.9	8.9	10.0	39.5
Jharkhand	319	3.8	7.3	12.1	29.4	47.4
Odisha	213	2.0	1.7	3.0	28.5	64.8
West Bengal	331	0.5	4.1	14.9	61.5	19.1
North-East zone	3569	7.2	18.1	14.3	54.0	6.3
Arunachal Pradesh	562	20.3	18.4	19.2	30.5	11.5
Assam	311	9.1	12.4	7.4	64.9	6.3
Manipur	553	3.5	30.5	37.6	27.8	0.5
Meghalaya	431	-	9.9	44.8	43.0	2.3
Mizoram	563	-	69.9	7.6	22.0	0.5
Nagaland	336	0.5	8.9	5.0	70.0	15.7

Percentage distribution of perception that consumption of iodised salt leads to diseases and illness across all India, type of residence, wealth quintile and states across all zones

	Unweighted N	Strongly agree	Somewhat Agree	Neither agree nor disagree	Somewhat Disagree	Strongly disagree
Sikkim	497	1.2	1.1	18.2	51.9	27.6
Tripura	316	9.4	30.8	8.8	41.9	9.1
West zone	2315	9.4	17.5	15.1	34.2	23.7
Dadra & Nagar Haveli	538	5.5	4.2	22.1	30.0	38.2
Daman & Diu	527	18.3	5.3	2.9	35.1	38.5
Goa	536	0.1	2.1	23.3	34.6	39.8
Gujarat	500	15.2	8.2	2.0	41.8	32.9
Maharashtra	214	2.2	30.7	32.1	24.2	10.9
South zone	3050	14.5	25.1	14.7	42.7	3.0
Andaman & Nicobar Island	525	6.0	2.7	2.6	73.0	15.6
Andhra Pradesh	113	5.8	48.8	2.1	43.3	-
Karnataka	313	2.6	19.8	36.6	38.7	2.3
Kerala	487	15.5	20.0	10.4	51.8	2.3
Lakshadweep	539	0.6	11.5	23.8	50.9	13.2
Puducherry	443	5.1	13.6	56.1	19.5	5.6
Tamil Nadu	369	29.0	23.4	4.9	38.5	4.3
Telangana	261	8.2	38.1	0.8	49.7	3.2

() Based on 25-49 unweighted cases



CHAPTER - 7

SUMMARY OF KEY FINDINGS & RECOMMENDATIONS





According to the WHO guidelines, assessment of iodine status of the population is done based on two indicators, (i) iodine estimation in household edible salt through iodometric titration; and (ii) median urinary iodine concentration (UIC) of the population. The India Iodine Survey (IIS) 2018-19 indicates that the national household coverage of iodised salt (≥ 15 parts per million (ppm)) is 76.3 per cent and the median UIC of the non-pregnant non-lactating women, is 178 $\mu\text{g/L}$ against the WHO recommended range of 100 -199 $\mu\text{g/L}$. The median UIC status of pregnant women (WHO recommended range :150 -249 $\mu\text{g/L}$) and lactating women (WHO recommended value: ≥ 100 $\mu\text{g/L}$) is 173.4 $\mu\text{g/L}$ and 172.8 $\mu\text{g/L}$ respectively. Thus, the three categories have adequate iodine intake as measured by urinary iodine concentration.

Achieving and sustaining USI

The national household coverage of iodised salt was 76.3 per cent with ≥ 15 ppm iodine and varies from highest in Jammu and Kashmir (99.8%) to lowest in Tamil Nadu (61.9%). The state level data indicates that each of the states are at different levels of achieving USI. Considering that India is a big country with varying distribution channels and consumer preferences, efforts to improving household coverage warrants a contextual and state specific approach.

For the front runner states (states having highest coverage of iodised salt), effective enforcement and monitoring of salt should continue to be prioritized by the Food and Drug Control Administration (FDCA) to sustain the achievement. Additionally, the model of supply chain in these states should be studied for replication and adapted in aspirational states.

On the other hand, for the aspirational states (states having lowest coverage of iodised salt) a state specific strategy involving all stakeholders and convergence of all programs would be a better approach to move forward. Platforms such as Village Health Sanitation Nutrition Day (VHSND) and National Nutrition Mission, could be leveraged to promote consumption of iodised salt. Moreover, forums such as state level USI coalitions can be created to coordinate activities of all the stakeholders including salt industry, government departments, development partners and others at state level. Also, Civil Society partners such as agencies working on protection of consumer rights could be engaged in monitoring the availability of iodised salt at the retail end. They may act as a sustainable pressure group for industry as well as enforcement agency to ensure availability of iodised salt.

In addition, the National Iodine Deficiency Disorders Control Program (NIDDCP) guidelines requires revision to incorporate global evidence, current practices and preferences. Further, appropriate allocation of dedicated human and monetary resources, ensuring regular capacity building, and conducting periodic reviews to track various components to effectively implement these for sustaining the gains of the program.

Recommendations

- *The State Government to develop a more contextual and state specific approach to improve coverage of iodised salt in their states to achieve and sustain USI.*
- *Food and Drug Control Administration (FDCA), at state level, to continue prioritizing enforcement and monitoring the quality of iodised salt samples.*
- *Development partners could assist the government in studying the supply chain established in the front runner states and develop a potentially replicable model for improving the coverage in aspirational states.*
- *The state governments could explore leveraging the existing health and nutrition platforms and programs like VHSND and National Nutrition Mission to deliver key messages to the community on benefits of consuming iodised salt.*
- *The Government of India to consider revision of the NIDDCP policy guidelines and allocate adequate and dedicated resources for effective program implementation.*
- *The Department of Consumer Affairs can consider including awareness generation on benefits of consuming iodised salt and monitoring of quality of iodised salt to consumer rights agencies or civil society organizations to effectively and sustainably ensure availability of adequately iodised salt to the population.*

Periodic surveys to assess iodine status of the population

WHO recommends an IDD survey once in every five years. These surveys should include use of laboratory based iodometric titration as the ‘gold standard’ for estimation of iodine levels in edible salt and urinary iodine concentration as per the Sandell-Kolthoff reaction. The IIS 2018-19 is one of the few large-scale surveys which has used this method for estimating the iodine content in edible salt and urinary iodine concentration.

Along with estimating the coverage of adequately iodised salt at household level, WHO also recommends estimating the urinary iodine concentration (UIC) as a key biomarker for indication of iodine nutrition levels in the population.

These two indicators are essential to track the progress of the iodine status of the population. National level periodic surveys, like National Family Health Surveys (NFHS), serve as a ready platform to include the laboratory-based estimations as part of its protocol as well as median UIC for assessing the iodine nutrition status of the population.

Recommendations

- *The Ministry of Health and Family Welfare (MOHFW), Government of India could consider including estimation of median UIC as an indicator to report the iodine status of the population along with household coverage of adequately iodised salt in NFHS. Also replace Spot Testing Kits (STKs) with laboratory based iodometric titration to estimate the iodine content in salt to provide more precise estimates.*

Encourage production and consumption of refined edible salt

The study indicated that 82.1 per cent of the total salt samples collected was refined salt, 12.7 per cent crystal and remaining 5.3 per cent was crushed salt. It was observed that the iodisation levels in refined salt samples is better (82.6%) as compared to crystal salt (49.7%) and crushed salt (42.5%). The proportion of refined salt has been increasing over the years and efforts should be made to further improve and sustain this progress by encouraging salt processors to set up units to increase refined salt production with appropriate iodisation levels. In addition, freight benefits, quotas system and priority rake allotment for rail movement of salt, currently available to non-refined salt (crushed and crystal salt) should be withdrawn since this promotes consumption of crushed and crystal salt which is comparatively less adequately iodised. The production units for refined salt should be treated as a food processing unit and should be able to avail the same credits and tax benefits as those extended to the food industry.

Further, non-iodised crystal salt is sold under the declaration of ‘Preservative salt’ to consumers. This is often purchased by consumers belonging to low economic strata thereby, making them more vulnerable to IDD. There is a need to remove salt declared for ‘preservative purpose’ from the list of exempted categories for mandatory iodisation under the Food Safety and Standards Act, 2006. In addition, any retail salt packet which contains salt up to 2 Kgs should be considered as edible salt and mandatorily iodised irrespective of its label claim.



Recommendations

- Salt industry to invest in setting up units to increase production of refined salt.
- FSSAI to consider amending the Food Safety and Standards (Prohibition and Restrictions on Sales) Regulations, 2011 to remove salt used for preservation, from list of exception to mandatory iodisation.
- Railway department to discontinue freight benefits and quota system for priority rake allotment of non-refined crushed and crystal salt.
- Ministry of Food Processing may consider including refined salt under the definition of food processing industry to extend the credits and tax benefits as applicable to food processing industry.

Include and promote + F logo for iodised salt

Results from the study show that the ‘Smiling Sun’ logo, a voluntary quality assurance logo for Iodised salt is recognised by only 20.5 per cent of the respondents. Considering the low recognition and lack of regulation of the Smiling Sun logo usage, it is suggested that the +F logo, promoted by FSSAI as a quality assurance logo for fortified food staples, could be extended to iodised salt as well.

Recommendations

- FSSAI to extend the use of +F as a quality assurance logo for iodised salt and promote awareness on the logo amongst consumers.

Effective enforcement and monitoring of salt

The study indicates that 13 out of 36 states and UTs have achieved USI (>90%). Salt is currently categorized under the ‘any other’ food category of the Food Safety and Standards Act, 2006. Since, consumption of inadequately iodised salt does not result in any visible clinical manifestation neither it is fatal, often monitoring of iodised salt could be deprioritized. Improving and sustaining the iodisation level needs prioritization. Additionally, Food Safety Officers under Food and Drug Control Administration should be sensitized to treat iodised salt as health product and prioritise it to effectively monitor and enforce.

Further, as more than 80 per cent of the edible salt is produced in 12 districts across the country, an intensive monitoring at the production end which is closely reviewed by the District Collector would go a long way in increasing iodisation level across the country.



Recommendations

- *Food and Drug Control Administration (FDCA) to include iodised salt as one of the top 5 priority food items for enforcement.*
- *Development partners to support state FDCA department in building capacity of the Food Safety Officers (FSOs) to effectively monitor and enforce salt standards.*

Additional studies required to assess consumption of iodine from other dietary sources

The median UIC for the six zones fall within the range of 154.2 to 213.6 µg/L for non-pregnant non-lactating women which is taken as a proxy for the population. Efforts should be made to understand the zonal variation and additional studies could be done to assess alternate sources of iodine in the diet, especially for infants, pregnant and lactating women who have special nutritional requirements.

Recommendations

- *Additional studies to assess alternate sources of iodine in diet for suitable policy recommendations.*

Mandate the use of iodised salt in processed foods

Over the years with changing food consumption patterns, there has been an increased consumption of processed food in the daily diet. Considering this, only iodised salt be used by the food processing industry.



Recommendations

- *FSSAI to mandate use of only iodised salt for production of processed foods in India.*
- *Premium scientific organizations could conduct studies to landscape the salt intake through processed foods in India.*
- *Leverage electronic media to promote benefits of iodised salt*

Among half the respondents, 74.4 per cent reported electronic media (TV and radio) as the major source of information on IDD and iodised salt. Electronic media seems to be a potential medium to continue to disseminate key messages.

Recommendations

- *The Government of India could leverage use of electronic media including TV and Radio to disseminate key messages on IDD and benefits of consuming iodised salt.*





APPENDICES

Appendix 1: Methodology for construction of Wealth Index

The wealth index was computed following the methodology of global demographic and health surveys. It followed the same methodology as NFHS-4, 20015-16 to determine the household's relative economic status. The wealth quintile was based on ownership of house and certain household infrastructure, assets, amenities, facilities and consumer durables and availability of bank account etc¹. The information was collected using household questionnaire. Based on principal component analysis (PCA) technique, each variable was assigned a weight or factor loading. The value of asset score was combined to get the total asset score for each household. Thereafter, the households are ranked according to their individual Household Asset Score and divided into five quintiles at the national level.

Principal components analysis (PCA) method was used to assign the indicator weights, following the procedure that is used for the DHS wealth quintile. SPSS factor analysis procedure has been used for this purpose. Each of the categorical items considered for wealth quintile (such as type of water supply) is separated into dichotomous indicator variables (has, does not have), and together with continuous variables (such as number of persons per sleeping room) they are included in a principal components analysis (PCA).

- This procedure first standardizes the indicator variables (calculating z-scores);
- then the factor coefficient scores (factor loadings) are calculated;
- and finally, for each household, the indicator values are multiplied by the loadings and summed to produce the household's quintile value.
- In this process, only the first of the factors produced is used to represent the wealth quintile
- The resulting sum is itself a standardized score with a mean of zero and a standard deviation of one

In order to create wealth indices for both urban and rural areas, first three indices, a national quintile, an urban-specific quintile, and a rural-specific quintile were constructed. Then mappings (conversion adjustments) are made between the urban quintile and the national quintile, and between the rural quintile and the

1. The wealth quintile is based on the following 40 assets and housing characteristics: availability of a separate kitchen for the household, type of flooring; material of exterior walls; type of roofing, ownership of the house, electrification of the household, ownership of a mattress, a pressure cooker, a chair, a cot/bed, a table, an electric fan, a radio/transistor, a black and white television, a colour television, a sewing machine, a mobile telephone, land line telephone, a desktop computer, internet, an Air conditioner/ cooler, a washing machine, a refrigerator, a watch or clock, a bicycle, a motorcycle or scooter, an animal-drawn cart, a car/jeep, a water pump, a thresher, and a tractor; drinking water source; location of the water source, type of toilet facility, main type of cooking fuel used, availability of bank account or post office account, domestic staff in the household, ownership of any livestock, ownership of any agricultural land and Mean number of persons per room used for sleeping

national quintile. This mapping is necessary because, not only do the averages of the scores on the indices (from scores constructed to have their average as zero) represent different levels of wealth, but also the distributions of the scores of the indices (set so that the standard deviation is one) represent different dispersions of wealth.

Once the household scores have been calculated, the level and distribution adjustment values can be found by regressing the value of each household's area-specific quintile scores onto its national quintile score using linear regression.

National score for urban = urban constant + urban coefficient * urban score

National score for rural = rural constant + rural coefficient * rural score

Finally, a composite national quintile was constructed by using the estimated national wealth scores for the households in each region. The cut off points in the wealth quintile, to form the quintiles, are calculated by obtaining a weighted frequency distribution of households, the weight being the sampling weight of the household. The households are then ordered by the score, and the distribution is divided at the points that form the five 20 percent sections. In this process each member of a household also receives that household's quintile category.

Appendix 2: Methodology for weighting

The basic objective of weighting the sample data is to make the sample representative in terms of size, distribution, and characteristics of the study population. When sample units have been selected with differing probabilities, it is common to weight the results inversely proportional to the unit selection probabilities, i.e., the design weight, to reflect the actual situation in the population.

In India Iodine Survey (IIS) 2018-19, the “multiplier” approach for weighting was used as is mostly used in large scale surveys. In this approach multipliers are computed for each stages of random sampling followed by the computation of the overall sampling probability.

The weighing calculation has been done as follows:

Step 1: PSU selection (W1)

The probability of selecting HH in a state was a product of probability of selecting a PSU in the state (f_1) and probability of selecting a HH in the selected PSU (f_2)

$$B=f_1*f_2$$

PSU Factor

The probability of selecting a PSU (f_1) has been calculated through following formula:

Where PSU Factor $f_1 = (a \cdot p_i) / \sum p_i$

a = Number of household (HHs) in the i th selected PSU as per Census 2011

p_i = Total PSU selected in i th selected stratum (rural / urban frame in the respective state/UT) as per census 2011

$\sum P_i$ = Total number of HHs in the i th selected stratum as per census 2011

Step 2: Segmentation Factor (f_s): In case of larger PSUs, where segmentation has been undertaken there was one more stage of selection namely segments. It has been calculated as follows:

f_s = probability of selection of segments = s_{ij} / p_k , where

s_{ij} = Total HHs listed in the one (j_1) segments

p_k = Estimated number of HHs in the i th PSU as on the survey date (as per information provided by KI)

In PSUs with less than 150 HH, $f_s = 1$

Household Factor: The probability of selecting a HH in the selected category in each PSUs (f_2) is as follows:

$f_2 = n_i / l_i$

Where:

n_i = Number of sampled HHs per category in i th selected PSU

l_i = Total number of eligible HHs as per listing listed for each category in the i th selected PSU

Aggregate Factor

$f = f_1 \cdot f_s \cdot f_2$

The weight in i th PSU is

$w_i = 1 / (f_1 \cdot f_s \cdot f_2)$

Step 3: Adjust for differential response rates at PSU level:

At this stage, PSU level response rate has been calculated to take care of differential response rates across the PSUs in the region. Towards this the design weight is adjusted as follows:

$W_i = w_i / R_i$; Where R_i is the response rate achieved in i th PSU.

W_i is the weight attached with each sample household in the selected PSU

Response Rate (R_i) =
$$\frac{\text{Number of HH covered in each category in } i\text{th PSU}}{\text{Number of sampled HH in each category in } i\text{th PSU}}$$

Step 4: Normalization (adjusting for PPS selection method for PSUs) of weights for rural /urban strata at national level

The next step is to normalize weights. As the sample size was equal in all the state, hence it was imperative to normalize the weights at national level only (separately for rural and urban) to give the weight to state based on the size of their households.

The following formula was employed to normalize weights separately for rural and urban areas at national level:

$$W_{hr} = (W_i * \sum n_i) / (\sum W_i * n_i)$$

n_i = Number of HHs covered in each stratum (rural/urban area) at national level;

Where W_{hr} is the normalized weight for the rural sample. Similarly, W_{hu} was computed for urban areas.

Similar exercise has been done separately for each household's category (PW/LW/NPNLW).

Appendix 3: Protocol for testing of urine and salt at laboratory

The following steps were carried out for the purpose of testing iodine content in sample collected:

For salt iodine content:

Principle

The iodine content of iodate salt samples was measured using an iodometric titration, as described by DeMaeyer, Lowenstein, and Thilly, (1979). The reaction mechanism can be considered in two steps.

Reaction 1: Liberation of free Iodine from salt

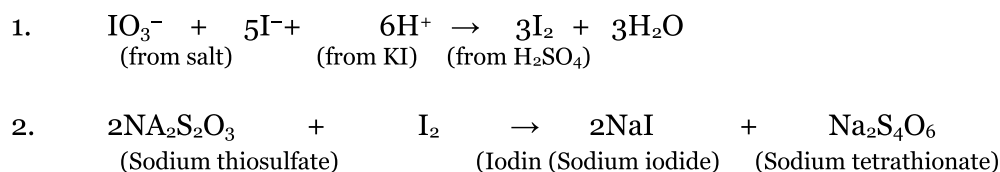
1. Addition of H_2SO_4 liberates free iodine from the iodate in the salt sample.
2. Excess KI is added to help solubilise the free iodine, which is quite insoluble in pure water under normal conditions.

Reaction 2: Titration of free Iodine with thiosulfate.

1. Free iodine is consumed by sodium thiosulfate in the titration step. The amount of thiosulfate used is proportional to the amount of free iodine liberated from the salt.
2. Starch is added as an external (indirect) indicator of this reaction and reacts with free iodine to produce a purple colour. When added towards the end of the titration (that is, when only a trace amount of free iodine is left) the loss of purple colour, or endpoint, which occurs with further titration, indicates that all remaining free iodine has been consumed by thiosulfate.

For testing iodine content in salt, Titration method was used in this study.

Reaction steps for iodometric titration of iodate



Equipment

1. Pan Balance for weighing
2. Set of weights for above
3. Conical Flask with stopper volumetric - 100mL, 200 ml
4. Measuring cylinder - 10mL, 50 ml, 100mL
5. Beakers - 100, 200, 500 ml
6. Pipette, volumetric - 1ml, 5ml
7. Burette 10mL or 25 ml Auto Zero
8. Laboratory safety glasses
9. Parafilm
10. Glass bottles with stoppers for reagents – 100 ml, 200ml, 500mL
11. Funnel Glass or Plastic
12. Spatula
13. Dropper bottle 100ml/250 ml
14. Hot plate
15. Rod Stirring
16. Filter Paper-15cm diameter
17. 4L Polyethylene carboy for water storage
18. Hotplate with stirrer
19. Magnetic stirring bars

Chemicals

1. Sodium Thiosulfate – $\text{Na}_2\text{S}_2\text{O}_3$, AR Grade
2. Sulfuric Acid concentrated – H_2SO_4 AR Grade
3. Potassium Iodide – KI AR Grade
4. Sodium Chloride – NaCl AR Grade
5. Soluble starch
6. Boiled double-distilled water

Reagent preparation

Water Requirements for Reagent Preparation: Water required for this method should be boiled, distilled water, which requires provision of a distillation unit.

0.005M Sodium Thiosulfate ($\text{Na}_2\text{S}_2\text{O}_3$):

1.24g $\text{Na}_2\text{S}_2\text{O}_3$ was dissolved in 1000 mL water and stored in a cool, dark place. This volume was sufficient for 100-200 samples, depending on the iodine content of samples (the solution is stable at least for two weeks, if stored properly).

2N Sulfuric acid (H_2SO_4):

6mL concentrated H_2SO_4 was slowly added to 90mL water. Make to 100 mL with water. This volume was sufficient for 100 samples (the solution is stable indefinitely).

Note: Always add acid to water, not water to acid, to avoid excess heat formation and spitting of acid. Stir solution while adding acid.

10% Potassium iodide (KI):

Dissolve 10g KI in 100mL water. Store in a cool, dark place. This volume was sufficient for 100 samples. (properly stored solution is stable for six months).

Saturated Sodium Chloride (NaCl):

100 mL of a saturated NaCl solution was made by adding NaCl to approximately 80 mL water in a beaker, with stirring and/or heating, until no further solid was dissolved (this solution is stable for at least one year).

Starch indicator solution:

1g soluble starch was weighted into a 100 mL beaker, 10mL water was added and it was heated so that it dissolves. Saturated NaCl solution was added to the hot starch solution to make up to 100mL and stored in a cool, dark place. This volume was sufficient for 50 samples.

Procedural Steps

- Step 1 : Weigh 10g of the salt sample into a 100ml flask/50 ml measuring cylinder with a stopper
- Step 2 : Add approximately 30mL water, swirl to dissolve salt sample
- Step 3 : Add water to make volume up to 50mL
- Step 4 : Add 1ml 2N H_2SO_4 . (Caution - Do not pipette by mouth)
- Step 5 : Add 1.0 mL 10% KI. The solution should turn yellow if iodine is present
(Caution - Do not pipette by mouth)

- Step 6 : Stopper the flask and put in the dark (cupboard or drawer) for 10 minutes
- Step 7 : Rinse and fill burette with 0.005M $\text{Na}_2\text{S}_2\text{O}_3$, and adjust level to zero
- Step 8 : Remove flask from drawer, and add some $\text{Na}_2\text{S}_2\text{O}_3$ from the titration burette until solution turns pale yellow
- Step 9 : Add approximately 2mL of starch indicator solution (the solution should turn dark purple) and continue titrating until the solution becomes pink, and finally colourless. (Colour sequence of titration is shown in flasks A, B, C and D)
- Step 10 : Record the level of thiosulfate in the burette and convert to parts per million (ppm) using the conversion table

NOTE: Analysis time is approximately 20 minutes per sample.

CONVERSION TABLE: IODINE CONTENT IN PARTS PER MILLION

Burette reading	Parts per million (ppm)	Burette reading	Parts per million (ppm)
0.0	0.0	5.0	52.9
0.1	1.1	5.1	54.0
0.2	2.1	5.2	55.0
0.3	3.2	5.3	56.1
0.4	4.2	5.4	57.1
0.5	5.3	5.5	58.2
0.6	6.3	5.6	59.2
0.7	7.4	5.7	60.3
0.8	8.5	5.8	61.4
0.9	9.5	5.9	62.4
1.0	10.6	6.0	63.5
1.1	11.6	6.1	64.5
1.2	12.7	6.2	65.6
1.3	13.8	6.3	66.7
1.4	14.8	6.4	67.7
1.5	15.9	6.5	68.8
1.6	16.9	6.6	69.8
1.7	18.0	6.7	70.9
1.8	19.0	6.8	71.9
1.9	20.1	6.9	73.0

Burette reading	Parts per million (ppm)	Burette reading	Parts per million (ppm)
2.0	21.2	7.0	74.1
2.1	22.2	7.1	75.1
2.2	23.3	7.2	76.2
2.3	24.3	7.3	77.2
2.4	25.4	7.4	78.3
2.5	26.5	7.5	79.4
2.6	27.5	7.6	80.4
2.7	28.6	7.7	81.5
2.8	29.6	7.8	82.5
2.9	30.7	7.9	83.6
3.0	31.7	8.0	84.6
3.1	32.8	8.1	85.7
3.2	33.9	8.2	86.8
3.3	34.9	8.3	87.8
3.4	36.0	8.4	88.9
3.5	37.0	8.5	89.9
3.6	38.1	8.6	91.0
3.7	39.1	8.7	92.0
3.8	40.2	8.8	93.1
3.9	41.3	8.9	94.2
4.0	42.3	9.0	95.2
4.1	43.4	9.1	96.3
4.2	44.4	9.2	97.3
4.3	45.5	9.3	98.4
4.4	46.6	9.4	99.5
4.5	47.6	9.5	100.5
4.6	48.7	9.6	101.6
4.7	49.7	9.7	102.6
4.8	50.8	9.8	103.7
4.9	51.9	9.9	104.7

Calculations

The table of iodine content as determined by the burette reading has been prepared based on the following:-

1. 1.0 ml of 0.005 N $\text{Na}_2\text{S}_2\text{O}_3$ = 0.1058 mg of iodine.
2. Thus, the burette reading x 0.1058 will give the amount of iodine in 10 gm of salt.
3. To get the iodine value in million, one has to multiply by 1,00,000 to either sides

i.	gms of salt	I_2 in mg
ii.	10 x 1,00,000	0.1058 x 1,00,000

4. To convert mg to gm, divide by 1000
Equation becomes:
$$\begin{aligned}\text{gms of Salt (10,00,000)} &= \text{Burette Reading} \times 0.1058 \times 100 \\ &= \text{Burette Reading} \times 10.58\end{aligned}$$

Thus, Burette reading x 10.58 will give the iodine content in parts per million (ppm)

Precautions

1. The reaction mixture should be kept in the dark before titration because a side reaction can occur when the solution is exposed to light that causes iodide ions to be oxidized to iodine by atmospheric oxygen.
2. Inaccurate results may occur if starch solution is used while still warm.
3. If starch indicator is added too early, a strong iodine-starch complex is formed, which reacts slowly, and gives falsely elevated results.
4. The reaction should be performed at mild room temperature ($<30^\circ\text{C}$), since the iodine is volatile, and the indicator solution loses sensitivity when exposed to high temperatures.
5. Potassium Iodide (KI) is used because of the low solubility of iodine. The liberated iodide forms an unstable complex KI_3 with KI



As free iodine is used up in the reaction with thiosulphate, the equilibrium between I_2 and I_3 ions is disturbed and more iodine is dissolved in order to maintain the equilibrium.

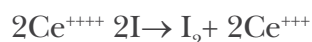
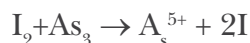
A few minutes were allowed before titration, since the rate of reaction between I^- ions and the oxidant is slow.



For Urinary Iodine Concentration

Principle

Urine was digested with ammonium persulfate. Iodide is the catalyst in the reduction of ceric ammonium sulfate (yellow) to cerous form (colourless), and was detected by rate of colour disappearance Sandell-Kolthoff reaction stated below :



The yellow coloured ceric ion (Ce^{++++}) was reduced to colourless cerous ion (Ce^{+++}) by iodide ion (I^-). The time taken for the colour disappearance is inversely proportional to the amount of iodide catalysing it.

Equipment

1. Stainless Steel Digestion Cassette, Microplate sets – (a) 96 well Polypropylene (digestion) and (b) 96 well Polystyrene (reading),
2. Elisa Reader with 3 mandatory filters (405 nm filter a must), shaking capable with appropriate software,
3. Digital Oven with temperature ranges up to $120\text{ }^{\circ}\text{C} \pm 1.0\text{ }^{\circ}\text{C}$ controlling thermostat,
4. Weighing balance scales with 500-gram capacity and 0.1 milligram sensitivity
5. Volumetric flasks, beaker and bottles and Enamel or stainless-steel tray [(L) 24 cm x (W) 18 cm x (H) 5 cm]. Size is approximate even little bigger tray will be fine.
6. Multichannel pipette with reagent reservoir (Boat), micro pipettes 50 μl , 100 μl and 1000 μl capacity.

Reagents

1. Ammonium persulfate (analytical grade)
2. Arsenic trioxide (As_2O_3) - AR Grade
3. Sodium Chloride (NaCl) - AR Grade
4. Sulfuric Acid, concentrated (H_2SO_4) - AR Grade
5. Tetra-ammonium cerium (IV) sulfate dihydrate $\text{Ce}(\text{NH}_4)_4(\text{SO}_4)_4 \cdot 2\text{H}_2\text{O}$ - AR Grade
6. De-ionized H_2O OR boiled double distilled water - DDW
7. Potassium iodate (KIO_3) - AR Grade

Reagent Preparation

Ammonium persulfate solution (1.31 mol/L):

Ammonium persulfate was first weighted 3.6 gram and dissolved in 10 ml of DDW water. This solution was prepared fresh just before use (this is best done in 15 ml screw capped Nunc or Tarson tubes).

Sodium hydroxide – NaOH (0.875 mol/L):

It was made in 100 ml volumetric flask. 40 grams of NaOH was dissolved in approximately 60 ml of DDW in the mentioned volumetric flask then final volume to 100 ml of DDW was made. The molarity of this stock solution was 10 molar. To make 0.875 mol/L NaOH solution, 43.75 ml of stock solution was taken in a 500 ml volumetric flask and 500 ml volume was made with DDW with swirling action.

Arsenious acid solution (0.05 mol/L):

Arsenic trioxide was taken and weighted 5 g and placed it in a 500 ml glass bottle/1 liter beaker and was dissolved in 100 mL of 0.875 mol/L sodium hydroxide solution. Concentrated sulfuric acid (16 mL) was then added slowly to the solution in an ice bath. After cooling, 12.5 g of sodium chloride was added to the solution, and the mixture was diluted to 500 mL with cold water and filtered.

1.75 M H_2SO_4 :

A 500 ml glass measuring cylinder was taken and 400 ml was filled with DDW and kept it in ice bath. 48.61 ml concentrated (36 N) H_2SO_4 was slowly added to it. It was then allowed to cool and then DDW was added to make up the final volume to 500 ml.

Ceric ammonium sulfate solution (0.019 mol/L):

Tetra-ammonium cerium (IV) sulfate dihydrate (6 g) was dissolved in 1.75 mol/L sulfuric acid and adjusted to a final volume of 500 mL with the same acid solution.

Stock Iodine calibrators:

In a 100-mL volumetric flask, 168.6 mg of potassium iodate was dissolved in water to make a 7.88 mmol/L stock solution (1000 mg/L iodine).

Working stock (WS):

The 100 μl of stock solution was placed in another 100 ml volumetric flask and volume was made up till 100 ml by swirling motion. This gave concentration of 1000 μg per litre. This was stored in a dark bottle (the solution was stable for months)

The below **table** shows how to make **working calibrators** of 25, 50, 100, 200, 300 and 400 $\mu\text{g/l}$. These were made in 15 ml screw capped plastic tubes. Once prepared, aliquots were made in 500 μl microfuge tubes and store at -20°C

Concentration µg/litre	WS (ml)	DDW (ml)	Concentration	WS (ml)	DDW (ml)
00	00	10 .00	200	2.0	8.0
25	0.25	9.75	300	3.0	7.0
50	0.5	9.50	400	4.0	6.0
100	1.0	9.00	Nil	Nil	Nil

Procedure

Digestion step:

1. Frozen urine samples were taken and kept at room temperature to thaw completely. This was done few hours before starting the analysis procedure.
2. Also take 1 vial each of aliquoted standards covering whole range, controls (if any) and allowed them to thaw. Once thawed they were mixed by vortexing
3. Urine samples were mixed either by vortexing or by up and down movement to suspend sediment. Samples were allowed to settle down for half an hour at room temperature on laboratory bench
4. During this time, sealing cassette was checked for proper gasket fitting and kept it in oven for pre-heating at 90°C for 60 minutes
5. Take out 96 well **polypropylene** digestion microplate and placed it on table
6. Pipette 50 µl each of iodine standards (starting from low and ending at highest), controls and urine sample into an appropriately marked wells in 96 well microplate. Iodine standards and a set of internal urine controls were included in each assay in duplicate
7. 100 µl of freshly prepared ammonium persulfate was added to each well with multichannel pipette (once done the plate is ready for transfer to sealing cassette)
8. Sealing cassette was taken out from oven with the help of **driving cotton gloves or cotton napkin**
9. Microplate was properly placed in pre-heated sealing cassette. It was sealed by tightening the screw and kept back in Oven already set at 90°C and it was incubated for 90 minutes
10. At the end of incubation sealing cassette was taken out from oven using **driving cotton gloves or cotton napkin** and placed in an enamel tray containing ice water. The water level in tray was such that only the lower part of the cassette is surrounded by water
11. It was allowed to cool for a minimum of 30 minutes
12. Sealing cassette was opened and digestion plate was removed

Assay

1. Polystyrene reading plate was pulled out and placed on table
2. 100 µl of Arsenious acid solution was placed to all wells polystyrene plate with the help of multichannel pipette
3. 50 µl of digested samples were transferred from each well of digestion plate to the equivalent well of polystyrene plate. It was allowed to stand for 15 minutes (or use plate shaker) then mixed at slow speed
4. 60 µl of ceric ammonium sulfate solution was added to each well with the help of multichannel pipette without interruption within 1 minute
5. It was incubated at room temperature for 20 minutes after addition of ceric ammonium sulfate to the first well
6. The plate was placed in microplate reader and read its absorbance at 405 nm.

Calculation of results

Create standard Curve: Standard value was plotted against the log of absorbance at 405 nm to produce a standard curve. Machine read values of unknowns against the standard curve

Precautions

1. This was modified from the former method²⁷ substituting ammonium persulfate for chloric acid (more toxic) as digestant
2. Since the digestion procedure has no specific end-point, it was essential to run blanks and standards with each assay to allow for variations in heating time, etc
3. The exact temperature, heating time, and cooling time may vary. However, within each assay, the interval between the time of addition of ceric ammonium sulfate and the time of the reading was the same for all samples, standards, and blanks

(Microplate should not be reused. If used will lead to iodine contamination)

27. ICCIDD, UNICEF, WHO. Dunn JT et al. *Methods for measuring iodine in urine*. The Netherlands, ICCIDD, 1993.
Jooste PL, Strydom E 2010 *Methods for determination of iodine in urine and salt*. *Best Pract Res Clin Endocrinol Metab* 24:77–88.

Pino S, Fang SL, Braverman LE 1998 Ammonium persulfate: a new and safe method for measuring urinary iodine by ammonium persulfate oxidation. *Exp Clin Endocrinol Diabetes* 106:S22–S27.

Ohashi T, Yamaki M, Pandav CS, Karmarkar MG 2000 Simple microplate method for determination of urinary iodine. *Clin Chem* 46:529–536.

Grimm G, Lindorfer H, Kieweg H, Marculescu R, Hoffmann M, Gessl A, Sager M, Bieglmayer C 2011A simple microphotometric method for urinary iodine determination. *Clin Chem Lab Med* 49:1749–1751.



विश्वविद्यालय 'ए' कागजवाडी
नवम श्रुतिका विद्यालय कार्यलय
जय - ३०००००

Appendix 4A: Listing questionnaire

India Iodine Survey (IIS), 2018-19

STUDY QUESTIONNAIRE

(Listing Sheet)

Conventions used in this document:

Interviewer instructions are presented in orange, bold, italics font.

Interviewer observations are presented in blue font.

Programmed items and instructions are presented in green font.

SECTION 1. IDENTIFICATION

Q. No	Questions and Instructions	Coding Categories	Skip to
1.	Please enter the name and code of the State	Name _____ Code : □□□	
2.	Please enter the name and code of the district	Name _____ Code : □□□	
3.	Please enter the name and code of the Block/ Sub District	Name _____ Code : □□□	
4.	Please select the type of the area	Urban Rural	
5.	Please enter the name and code of the PSU (Village/ Ward)	Name _____ Code : □□□	
6.	Name of the Village/Ward Key Person	Name _____	
6.i	Designation of Village/Ward Key Person	Name _____	
7.	Contact Number of the Village Key Person	□□□□□□□□□□	
8.	Number of HH in the village	□□□□	
9.	Population of the Village	□□□□□	
10.	Is the village segmented?	Yes 1 No 2	Skip to Q14
11.	If Yes, how many segments has formed?	□□	
12.	Name of the segment selected?	Name _____	
13.	Number of households in this segment?	□□□	
14.	Interview date	□□/□□/□□□□ (MM/DD/YYYY)	
15.	Please enter the name and code of the interviewer	Name _____ Code : □□□	
16.	Please enter the name and code of the Supervisor	Name _____ Code : □□□	

Introduction: Good morning/afternoon, my name is _____ and I'm from Kantar Public. We are conducting asurvey on behalf of Nutrition International, to understandhousehold consumption of adequately iodised salt and the status of iodine nutrition in the community at the national level.

17.	18.	19.	20.	21.	22.	23.	24.	25
		*Status of the HH [HH Serial Number to be appeared from Q18] in structure [Structure Serial Number to be appeared from Q17? (Instruction: If coded 2 or 3 or 4, move to next Household) Available -1 Refused -2 Competent respondent is not available -3 Household is locked -4	How many members are there in this HH?	How many women aged between 15- 49 years are there who are regular members of the household? (Instruction: If Response is '0' skip to next Household)	Only ask Q21 to Q24 if >0 in Q20 Out of these women how many are? PW: Pregnant Women #LW: Lactating Women NPNLW: Non- Pregnant Non- Lactating Women	Name of the Head of the Household	Address of the household with Landmark	Contact Number of Head of the Household
					a	b	c	
1.		<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	PW	LW	NPNLW	
2.		<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. & so on		<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

*Any adult (above 18 years of age) member of the HH is will be respondent for this questionnaire
#Lactating Women: Women having infant of less than six months, who are currently breastfeeding their baby

Summary of Target Respondents Covered	
Total Number of Pregnant Women in the PSU:	<input type="checkbox"/> <input type="checkbox"/>
Total Number of Lactating Women in the PSU:	<input type="checkbox"/> <input type="checkbox"/>
Total Number of Non-Pregnant Non-Lactating Women in the PSU:	<input type="checkbox"/> <input type="checkbox"/>

SEGMENTATION MAP

Q1. State Name and code:..... Q.2 District Name and code:.....
 Q3. Block Name and code:..... Q4.PSU name (Village) and code:.....





Appendix 4B: Main survey questionnaire

India Iodine Survey (IIS), 2018-19

STUDY QUESTIONNAIRE (Household Questionnaire)

Conventions used in this document:

Interviewer instructions are presented in orange, bold, italics font.

Interviewer observations are presented in blue font.

Programmed items and instructions are presented in green font.

Prepared by:

KANTAR

Submitted to:



INDIA IODINE SURVEY, 2018-19

HOUSEHOLD QUESTIONNAIRE

Schedule Number (Auto generated):											
IDENTIFICATION											
Please select the Name and code of the State						Name _____					
(Instruction: Data would be push backed from Samples selected from Listing)						Code : □□□					
Please select the Name and code of the district						Name _____					
(Instruction: Data would be push backed from Samples selected from Listing)						Code : □□□					
Please select the Name and code of the Block/ Sub District						Name _____					
(Instruction: Data would be push backed from Samples selected from Listing)						Code : □□□					
Please select the Type of area						Name _____					
(Instruction: Data would be push backed from Samples selected from Listing)						Code : □□□					
Please select the Name and code of the PSU (Village/ Ward)						Name _____					
(Instruction: Data would be push backed from Samples selected from Listing)						Code : □□□					
Segment name of the PSU (if it is a big village)											
(CAPI Instruction: This will only show if the PSU is segmented) (Instruction: Data would be push backed from Samples selected from Listing)											
Segment number of the PSU (if it is a big village)						□□					
(Instruction: Data would be push backed from Samples selected from Listing)											
Selected Structure Number						□□					
(Instruction: Data would be push backed from Samples selected from Listing)											

Selected HH Number (Instruction: Data would be push backed from Samples selected from Listing)	<input type="checkbox"/> <input type="checkbox"/>
Name of the Head of the Household (Instruction: Data would be push backed from Samples selected from Listing)	
Address of the household with Landmark (Instruction: Data would be push backed from Samples selected from Listing)	
Contact Number of Head of the Household (Instruction: Data would be push backed from Samples selected from Listing)	
Type of household: Pregnant women 1 Lactating women 2 Non-pregnant non-lactating women 3 (Instruction: Data would be push backed from Samples selected from Listing)	<input type="checkbox"/>
Name of the respondent _____	
Type of the respondent: Head of the Household (in case female) 1 Wife of the Head of the Household 2 Any other adult woman who has been living continuously for the past three months in the Household 3 Any other adult member in the household who has been living continuously for the past 3 months 4	<input type="checkbox"/>

INTERVIEWER VISITS			
Name of Interviewer & Code			<input type="text"/> <input type="text"/>
Date of Interview	(DD / MM / YY) <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/>		End Time (HH/MM) <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/>
Time of Interview	Start Time (HH/MM) <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/>		
Accompaniment Done	Yes - 1 No - 2		<input type="checkbox"/>
Field Supervisor	Name	Date	Sign:

Result of the interview	Completed	
	Interview completed with salt and urine sample collected with Rs. 10	11
	Interview completed with salt and urine sample collected without Rs. 10	12
	Interview completed with only salt sample collected with Rs. 10	13
	Interview completed with only salt sample collected without Rs 10	14
	Not Completed	
	Refused	21
	Postponed	22
	Entire household absent for extended period of time	23
	No household member at home or no competent respondent at home at time of visit	24
	Dwelling vacant or address not a dwelling	25
	Dwelling Destroyed	26
	Others (Specify _____)	

Investigator's statement: Please read this information sheet carefully.

Introduction

Good morning/afternoon, my name is _____ and I'm part of a research team from Kantar. We are conducting this study on behalf of Nutrition International, a renowned international development organisation, to understand household consumption of adequately iodised salt and the status of iodine nutrition in the community at the national level.

Purpose

The purpose of the study is to track the universal salt iodisation programme at state level and allow state governments to better target the programmes. According to estimates of Government of India, 303 out of 365 districts, where studies have been conducted are endemic for Iodine Deficiency Disorders. Therefore, we are here to conduct a research to access your understanding regarding iodised salt and iodine deficiency disorders.

We will take about 20 to 30 minutes of your time and at the end of the interview, with your consent, will collect 50 gms of cooking salt sample from your household and 50 ml of urine sample from **[Type of household (PW or LW or women aged 15-49 who are neither pregnant nor lactating)]** in your household.

Benefits

This study will generate information on the household use of adequately iodised salt and on the iodine nutritional status among women of reproductive age in India. The data from this study will help in formulating policies for elimination of iodine deficiency disorders in the country. In lieu of the collected salt sample you would be paid INR. 10 against a signed voucher.

Confidentiality

Information provided by you will not be disclosed to anyone outside the research team. The reports generated from the research will not reveal any individual information, your identity and laboratory test results of the samples provided by you. You will not be at any risk for participating in this survey.

Voluntary Participation

Participation in this study is completely voluntary, you are free to withdraw from the survey at any stage without any penalty. However, we hope for your full participation since your views are important to us. You are not required to pay for participating in this survey.

You are free to ask any question regarding this study. Please let us know if need any clarification.

Contact Information

If you have any question about the study at any time, you may contact Mr. Sujeet Choubey at +91-11-42697800 or contact Nutrition International Office at +91-11-46862005/7. If you have any question about the study at any time, you may contact Mr. Sujeet Choubey at +91-11-42697800 or contact Nutrition International Office at +91-11-46862005/7. For any ethical issues, please contact Ms. Sakshi Saini of SRI-IRB at 011- 42697070.

Consent

Do you have any question ?	Yes	1	
	No	2	
Do you give your consent to participate in the study?	Yes	1	
	No	2	
Consent for the collection of the Salt sample – We would also like to collect about 50 gm of salt that has been used to prepare the last meal in your household. This will be tested for iodine content more accurately in a laboratory Would you be willing to provide the salt sample?	Yes	1	
	No	2	
If you do not agree to provide salt sample, kindly indicate any of the reasons below and these will be used for research purposes only:	I do not have 50g of salt sample	1	
	Due to my customs and traditions, I will not be able to give salt sample	2	
	My family member have asked me not to give salt sample	3	
	Other (specify) _____	8	
Consent for the collection of the Urine sample –	Yes	1	
We would also like to collect about 50 ml of urine sample from PW/LW/NPNLW person in your household. In case you qualify under this category/ in your absence another qualifying female from your household, would you be willing to/ allow her (as case maybe) to provide the urine sample in the container provided? This will be tested for iodine content more accurately in a laboratory	No	2	

If you do not agree to provide urine sample, kindly indicate any of the reasons below and these will be used for research purposes only:	Eligible women isn't available	1	
	Due to my customs and traditions, I will not be able to give Urine sample ,	2	
	My family member have asked me not to give Urine sample	3	
	Other (specify) _____	8	

Instruction to Interviewer

After collecting the salt sample and urine sample affix the same bar code, one in the consent form, one on the salt sample packet and one on the urine sample container and one on the transmittal sheet.

In case the respondent refuses to provide either of the samples (salt and urine), kindly move to next interview.

Kindly provide a copy of signed consent form to the respondent.

Section A: Salt and Urine Samples

Instructions for the Investigator:

Kindly request approximately 50 grams of salt from the household, collect the sample in the ziplock pouch provided and label the zip lock pouch with the barcode sticker provided (identical to the number at the front of this questionnaire. Also collect the sample of urine (50 ml) from identified respondent (PW/LW/NPNLW) in the household in the container provided. Please ensure that the container is pre-marked with the volumetric mark. After collecting the urine sample, add Toluene (2 ml), close the lid tightly. Label the container with the same bar code and place in the cold chain box.

Please remember that individuals have the right to refuse and must not be coerced into providing either of the samples

SECTION -B HOUSEHOLD COMPOSITION

Line No.	Total number of members including Usual residents, visitors and domestic servants	101. Please give me names of persons who usually live in your HH*, starting with the head of HH	102.	103.	103 (i)	104. Age (in years)	105. Age (in month)	106	107
	Instruction : who have been continuously living here for the past three months		What is the relationship of (NAME) to the head of HH?	What is the sex of (NAME)? Male.....1 Female.....2 Transgender..3	What is the current marital status of (NAME)?	How old is (NAME)? (In completed years (as on 1st January 2018). If less than 5-year code it as '0'.)	If coded '0' in column 5 then state the age as number of months	What is the highest Class (Name) has completed? (CAPI Instructions: Only ask if AGE >6 YEARS) Illiterate....98 NA (if less than 6 years)...99	Tick the person from whom the Urine sample is collected?
(1)	(2)	(3)	(4)	(5)	(5.1)	(6)	(7)	(8)	(9)
01									
02									
03									
04									
05									
06									
07									
08									

(1)	(2)	(3)	(4)	(5)	(5.1)	(6)	(7)	(8)	(9)
01									
02									
03									
04									
05									
06									
07									
08									

Codes for col.3			
Head of Household	01	Parent-in-law	08
Spouse (Wife or Husband)	02	Brother or Sister	09
Son or Daughter	03	Brother-in-law or Sister-in-law	10
Son-in-law or Daughter-in-law	04	Other Relative	11
Grand child	05	Adopted / Foster Child	12
Parent	06	Not related	13
Domestic Help	07	Lodgers or friends	14

Codes for 103 (i).	
Currently married	01
Married, but Gauna not performed	02
Widowed	03
Divorced	04
Separated	05
Deserted	06
Never Married	07

SECTION C: CONSUMER BEHAVIOR ON PURCHASE AND CONSUMPTION OF IODISED SALT

No.	Question	Coding categories	Code	Skip
201.	From where did you purchase the cooking salt to cook the last meal in your HH?	Kirana Store	1	
		General Store	2	
		Public Distribution System	3	
		Vendor/Salesman	4	
		Local haat/market	5	
		Other (specify _____)	8	
		Don't Know	9	
202.	Who decides on the type/ brand of salt to be purchased for the household?	Head of the household	1	
		Spouse of the household head	2	
		Other male adult family member	3	
		Other female adult family member	4	
		Children (<18 years)	5	
203.	In most cases, which member of the household buys salt for the household?	Head of the household	1	
		Spouse of the household head	2	
		Other male adult family member	3	
		Other female adult family member	4	
		Children (<18 years)	5	
204.	How often do you purchase cooking salt from PDS? <i>(Ask this question only if 201 is answered as 03)</i>	Weekly (<7 days)	1	
		>one week but ≤ 4 weeks	2	
		>one month but ≤ 3 months	3	
		>3 months but ≤6 months	4	
		>6 months	5	
		Don't know	8	
		Others (specify_____)	9	
205.	What characteristics determines what kind of salt you buy? <i>(Multiple response possible)</i>	Saltiness	1	
		Texture	2	
		Colour	3	
		Price	4	
		Brand	5	
		Tradition	6	
		Purity (absence of any foreign particles)	7	
		Others (specify) _____	8	
		Don't Know	9	

No.	Question	Coding categories		Code	Skip
206.	Type of cooking salt purchased for your household to cook the last meal in your HH?	Packaged crushed salt		1	
		Packaged crystal salt		2	
		Loose crushed salt		3	
		Loose crystal salt		4	
207.	What kind of salt did you use for cooking purposes? (Multiple response possible) <i>Instructions: aided response, investigator to carry picture cards</i>	Spontaneous	Aided		If coded 2, 3, 4, 9 skip to 209
		Iodised	Iodised	1	
		Non-Iodised	Non-Iodised	2	
		Salt declared as “for preservative purpose”	Salt declared as “for preservative purpose”	3	
		Not sure whether iodised or not	Not sure whether iodised or not	4	
		Don't know	Don't know	9	
208.	Why do you buy iodised salt? (Multiple response possible)	I know that it is healthy		1	
		Because other kinds of salt are not available		2	
		Because doctor advised		3	
		Because the ANM/ ASHA/ AWW advised		4	
		The shopkeeper asked me to buy iodised salt		5	
		Household members asked me to buy iodised salt		6	
		Friends asked me to buy iodised salt		7	
		Panchayat member asked me to buy		8	
		Teacher told our children to buy		9	
		Others (Specify)		88	
209.	What was the quantity of the salt you last purchased which you used for cooking the last meal? <i>Interviewers instructions: Please note down the exact quantity if 1 or 8 is selected.</i>	Exact Quantity	Select Range		
		<input type="text"/> : <input type="text"/> KG Grams	Less than half KG	1	
			Half KG	2	
			1 Kg	3	
			5 KG	4	
			Other (Specify_____)	8	
210 A	What was the price you paid for your last purchase of 1 KG of cooking salt ?	Price	Rs.	Paisa	
			<input type="text"/>	<input type="text"/>	
			Don't Know	9	

No.	Question	Coding categories		Code	Skip
210 B	<p>Ask only If coded “Don’t Know” in Q210 A</p> <p>How much did you pay for the last salt purchased for cooking?</p> <p>Instruction: Auto Calculate the rate for 1KG of Salt</p>	Price	Rs. <input type="text"/> <input type="text"/>	Paisa <input type="text"/> <input type="text"/>	
			Don’t Know	9	
211.	<p>You said you purchased [XX kg/gm Q209] cooking salt last time. How many days does it take to use up this amount of cooking salt? [XX kg/gm Q209] ?</p> <p><i>Instructions: in case the respondent states in months, convert the same into days</i></p>	Days <input type="text"/> <input type="text"/> <input type="text"/>			
		Don’t Know		9	
212.	Except cooking food, Is there any other use of salt in your household?	Yes		1	
		No		2	Go to 214
		Don’t know		8	
213.	<p>If yes, for what purpose the salt was used?</p> <p><i>(Multiple response possible)</i></p>	Earthing /electrical purposes		1	
		Animal feed		2	
		Agriculture		3	
		Othes (specify_____)		8	
214.	<p>Where do you store your cooking salt?</p> <p><i>(Multiple response possible)</i></p>	Plastic container with lid		1	
		Plastic container without lid		2	
		Metal container with lid		3	
		Metal container without lid		4	
		Glass container with lid		5	
		Glass container without lid		6	
		Earthen pot with cover		7	
		Earthen pot without cover		8	
		Wooden container with cover		9	
		Wooden container without cover		10	
		In the same pouch		11	
		In sack/bag		12	
		Other (Specify_____)		88	

No.	Question	Coding categories	Code	Skip
215.	How do you perceive the quality of cooking salt used at your household?	Good	1	
		Average	2	
		Poor	3	
216.	In your perception what are the characteristics of good quality cooking salt? <i>(Multiple response possible)</i>	It looks white	1	
		Look is attractive	2	
		Taste is good	3	
		Packaged/branded salt	4	
		Loose/unbranded salt	5	
		Powdered salt	6	
		Granular/crystal salt	7	
		No moisture content	8	
		Free flow	9	
		Iodised salt	10	Go to 219
217.	Have you heard about iodised salt?	Other (Specify_____)	88	
		Yes	1	
		No	2	Go to 221
218.	What is the source from which you came to know about iodised salt? <i>(Multiple response possible)</i>	TV	1	
		Radio	2	
		Newspaper / Magazine	3	
		Hoarding / Placard / Poster / Billboards / Wall writing	4	
		Hand bills / Pamphlets / Booklets	5	
		Public Announcements	6	
		Bus	7	
		Drama/skit/street plays/puppet shows/health exhibitions	8	
		SHGs/ Health Groups	9	
		Doctor	10	
		ASHA/AWW/ANM	11	
		Friends/ Relative	12	
		Shopkeeper	13	
		Others (Specify)	88	
		Don't Know	99	
219.	What are the benefits of consuming iodised salt regularly? <i>(Multiple response possible)</i>	Prevents Goitre	1	
		Prevents Cretinism	2	
		Prevents complication during birth	3	
		Protects child foetus	4	
		Improves intelligence levels	5	

No.	Question	Coding categories	Code	Skip
		Improves maternal health	6	
		Others	8	
		DK/CS	9	
220.	How do you know if the salt is iodised? <i>(Multiple response possible)</i>	Smiling sun logo	1	
		Name of the brand	2	
		Word “iodised”	3	
		Shopkeeper tells me so	4	
		Others (Specify)	8	
221.	Would you be willing to pay more, if better quality of cooking salt was made available to you?	Yes	1	Go to 223
		No	2	
		Don't Know	99	
222.	What is the maximum additional amount you would pay for 1 KG of better-quality cooking salt? <i>CAPI instruction: show the amount entered in Q210 A</i>	Rupees Paisa □: □□		
		DK/CS	88	
223.	Have you heard of Anemia?	Yes	1	
		No	2	Skip to 225
		Don't know	8	
224.	Can you tell me some symptoms of Anemia? <i>(Multiple response possible)</i>	Headache	1	
		Weakness/fatigue	2	
		Shortness of breath	3	
		Poor appetite	4	
		Paleness of skin under eyes and tongue	5	
		Brittle nails	6	
		Inflammation/soreness of tongue	7	
		Cold hands and feet/swelling of feet	8	
		Dizziness/fast heartbeat	9	
		Tingling/crawling in legs	10	
		Other (please specify)	88	
		Don't know	99	
225.	Have you heard of salt fortified with iron and iodine?	Yes	1	
		No	2	Skip to 227
226.	Have you consumed salt fortified with iron and iodine in the last 6 months? (unaided)	Yes	1	Skip to 228
		No	2	
227.	Have you consumed salt fortified with iron and iodine in the last 6 months? (aided-use the pictorial aid to explain about DFS)	Yes	1	
		No	2	Skip to 230

No.	Question	Coding categories	Code	Skip
228.	From where did you purchase salt fortified with iron and iodine?	Kirana Store	1	
		General Store	2	
		Public Distribution System	3	
		Vendor/Salesman	4	
		Local haat/market	5	
		Other (Specify_____)	8	
		Don't Know	9	
229.	If yes, what was the price you paid for purchasing salt fortified with iron and iodine?	<input type="text"/> <input type="text"/> : <input type="text"/> <input type="text"/>		
		Rupees Paisa		
		Don't know/ Can't say	88	
230.	Instructions: Skip this question if 'Yes' is selected in 226 or 227 Would you be interested in purchasing salt fortified with iron and iodine?	Yes	1	Skip to 301
		No	2	
		Don't know	8	
231.	If yes, what is the maximum amount you would pay for 1 KG of double fortified cooking salt?	<input type="text"/> <input type="text"/> : <input type="text"/> <input type="text"/>		
		Rupees Paisa		
		Don't know/ Can't say	88	

SECTION D: PERCEPTION OF IODISED SALT						
301.	<p>Ask these questions only if coded '1' in Q217 and Option '10' is coded in Q216</p> <p>I am going to state some concepts people have about Iodised salt, please share your agreement with the statement in a scale of 1 to 5 where 1 denotes Strongly Agree and 5 denotes Strongly Disagree. (Ask to all)</p>					
		Strongly Agree	Some what Agree	Neither agree nor disagree	Somewhat Disagree	Strongly Disagree
A	Iodised salt does tastes different	1	2	3	4	5
B	Iodine does change colour, odour or taste	1	2	3	4	5
C	All packaged salts are iodised	1	2	3	4	5
D	Refined iodised salt is unhealthy	1	2	3	4	5
E	Availability of iodine in our normal diet is not sufficient and iodised salt is required.	1	2	3	4	5
F	Consumption of Iodised salt is related to normal growth of foetus in pregnant women	1	2	3	4	5
G	Just appearance cannot mean it is a good quality salt	1	2	3	4	5
H	Iodisation of salt drastically increases the cost	1	2	3	4	5
I	Consumption of iodised salt leads to disease and illness	1	2	3	4	5
<p>Please share your agreement with the following statements on the importance of Iodised Salt, in a scale of 1 to 5 where 1 denotes Strongly Agree and 5 denotes Strongly Disagrees. (these will be asked only to those whose responses were among the options of 1-8 in Q 219)</p>						
302.	Eating iodised salt regularly will help prevent goitre	1	2	3	4	5
303.	Preventing goitre is good for health	1	2	3	4	5
304.	Eating iodised salt regularly will help in mental development of my child	1	2	3	4	5
305.	I can protect my unborn child from disorders if I eat iodised salt	1	2	3	4	5

SECTION E: HOUSEHOLD PROFILE

No.	Question	Coding categories	Code	Skip
401.	What is the religion of the head of the household?	Hindu	1	
		Muslim	2	
		Christian	3	
		Sikh	4	
		Buddhist/Neo Buddhist	5	
		Jain	6	
		Jewish	7	
		Zoroastrian/ Parsi	8	
		No Religion	9	
		Don't want to disclose	10	
		Other (Specify _____)	96	
402.	What is the category of the head of the household?	SC	1	
		ST	2	
		OBC	3	
		General	5	
		No caste/tribe	6	
		Other (Specify _____)	96	
Now I am going to ask some questions about your house and household assets				
403.	Does your household own this house or any other house?	Yes		skip to 405 if coded '2'
		No		
404.	Who owns the house?	Male <input type="checkbox"/>	1	
		Female <input type="checkbox"/>	2	
		Both <input type="checkbox"/>	3	
		Don't know	4	
405.	Main material of the floor	Natural floor		
		Mud/clay/earth	11	
		Sand	12	
		Dung	13	
		Rudimentary floor		
		Raw wood planks	21	
		Palm/bamboo	22	
		Brick	23	
		Stone	24	
		Finished floor		
		Parquet or polished wood	31	
		Vinyl or asphalt	32	
		Ceramic tiles	33	

No.	Question	Coding categories	Code	Skip
		Cement	34	
		Carpet	35	
		Polished stone/marble/Granite	36	
		Other (specify_____)	96	
406	Main material of the roof. Record observation.	Natural roofing		
		No roof	11	
		Thatch/palm leaf/	12	
		Reed/grass	13	
		Mud	14	
		Sod/mud and grass mixture	15	
		Plastic/polythene sheeting	16	
		Rudimentary roofing		
		Rustic mat	21	
		Palm/bamboo	22	
		Raw wood planks/timber	23	
		Unburnt brick	24	
		Loosely packed stone	25	
		Finished roofing		
		Metal/GI	31	
		Wood	32	
		Calamine/cement fiber	33	
		Asbestos sheets	34	
		RCC/RBC/cement/concrete	35	
		Roofing shingles	36	
		Tiles	37	
		Slate	38	
		Burnt brick	39	
		Other (specify_____)	96	
407.	Main material of the exterior walls. Record observation.	Natural walls		
		No walls	11	
		Cane/palm/trunks/bamboo	12	
		Mud	13	
		Grass/reeds/thatch	14	
		Rudimentary walls		
		Bamboo with mud	21	
		Stone with mud	22	
		Plywood	23	
		Cardboard	24	
		Unburnt brick	25	
		Raw wood/reused wood	26	

No.	Question	Coding categories	Code	Skip
		Finished walls		
		Cement/concrete	31	
		Stone with lime/cement	32	
		Burnt bricks	33	
		Cement blocks	34	
		Wood planks/shingles	35	
		GI/metal/asbestos sheets	36	
		Other (specify_____)	96	
408.	How many rooms in this household are used for sleeping?	Rooms <input type="text"/>		
409.	Do you have a separate room which is used as a kitchen?	Yes	1	
		No	2	
410.	Does your household own any agricultural land?	Yes	1	Go to 412
		No	2	
411.	Who owns this agricultural land?	Male	1	
		Female	2	
		Both	3	
		Don't know	4	
412.	What is the main source of drinking water for members of your household?	Piped water		
		Piped into dwelling	11	
		Piped to yard/plot	12	
		Public tap/standpipe	13	
		Tube well or borehole.	21	
		Dug well		
		Protected well	31	
		Unprotected well	32	
		Water from spring		
		Protected spring	41	
		Unprotected spring	42	
		Rainwater.	51	
		Tanker truck	61	
		Cart with small tank	71	
		Surface water (river/dam/ Lake/ pond/ stream/canal/ Irrigation channel)	81	
		Bottled water	91	
		Community RO plant	92	
		Other (specify_____)	99	
413.	Where is the water source located?	In own dwelling	1	
		In own yard/ plot	2	
		Elsewhere	3	

No.	Question	Coding categories	Code	Skip
414.	What type of fuel does your household commonly used for cooking?	Electricity	1	
		Solar	2	
		LPG/natural gas	3	
		Biogas	4	
		Kerosene	5	
		Coal/lignite	6	
		Charcoal	7	
		Wood	8	
		Straw/shrubs/grass	9	
		Agricultural crop waste	10	
		Dung cakes	11	
		No food cooked in household	12	
		Other (specify_____)	99	
415.	What kind of toilet facility do members of your household usually use?	Own Flush or pour flush toilet		
		Flush to piped sewer System	11	
		Flush to septic tank.	12	
		Flush to pit latrine	13	
		Flush to somewhere else	14	
		Flush don't know where	15	
		Own Pit latrine		
		Ventilated improved	21	
		Pit (vip)/biogas latrine	22	
		Pit latrine with slab	23	
		Pit latrine without slab/ Open pit	24	
		Twin pit/composting toilet	31	
		Dry toilet	41	
		No facility/uses open space or field	51	
		Others	99	
416.	ASK If coded 11 – 41 in Q415 Do you share this toilet facility with other households?	Yes	1	
		No	2	
417.	ASK If coded 1 in Q416 How many households use this toilet facility?	<input type="text"/> <input type="text"/> <input type="text"/>		
		Don't know	88	

No.	Question	Coding categories			Code	Skip
418.	Does your household own any livestock?	Cows/bulls/buffaloes	1		2	
		Camels	1		2	
		Horses/donkeys/mules	1		2	
		Goats	1		2	
		Sheep	1		2	
		Chickens/ducks	1		2	
419.	Does your household own any of the following assets? Read one by one. (Items are to be in working condition)	Sl. No	Items	Yes	No	
		1	Electricity	1	2	
		2	Mattress	1	2	
		3	Pressure cooker	1	2	
		4	Chair	1	2	
		5	Cot/bed	1	2	
		6	Table	1	2	
		7	Electric fan	1	2	
		8	Radio/transistor	1	2	
		9	B & W television	1	2	
		10	Colour television	1	2	
		11	Sewing machine	1	2	
		12	Mobile telephone	1	2	
		13	Land line telephone	1	2	
		14	Internet	1	2	
		15	Computer	1	2	
		16	Refrigerator	1	2	
		17	Air conditioner/ cooler	1	2	
		18	Washing machine	1	2	
		19	Watch/clock	1	2	
		20	Bicycle	1	2	
		21	Motorcycle/	1	2	
		22	Animal-drawn cart	1	2	
		23	Car	1	2	
		24	Water pump	1	2	
		25	Thresher	1	2	
		26	Tractor	1	2	
420.	Does any usual member of this household have a bank account or a post office account?	Yes- Male member			1	
		Yes – Female member			2	
		Both male and female members			3	
		No			4	
		Don't know			8	
Now I am going to ask about access of any household member to social security schemes						

No.	Question	Coding categories		Code	Skip
421.	Is any usual member of this household covered by a health scheme or health insurance?	Yes		1	
		No		2	
		Don't know		8	
422.	ASK only If coded '1' in Q421 What type of health scheme or health insurance? Any other type	Scheme	Yes	No	
		Employees state Insurance scheme (ESIS)	1	2	
		Central government health scheme (CGHS)	1	2	
		State health insurance scheme	1	2	
		Rashtriya Swasthya Bima Yojana (RSBY)	1	2	
		Community health insurance programme	1	2	
		Other health insurance through employer	1	2	
		Medical reimbursement from employer	1	2	
		Other privately purchased commercial health insurance	1	2	
		Others (specify _____)		9	
423.	When members of your household get sick, where do they generally go for treatment?	Public health sector			
		Govt./municipal hospital		11	
		Govt. Dispensary		12	
		UHC / UHP/UFWC		13	
		CHC/rural hospital/block PHC		14	
		PHC / additional PHC		15	
		Sub-Centre		16	
		Vaidya/hakim/homeopath (ayush)		17	
		Anganwadi/ICDS center		18	
		Asha		19	
		Govt. Mobile clinic		20	
		Other public sector		21	
		Health facility		22	
		NGO or trust hospital/clinic		31	
		Private health sector			
		Pvt. Hospital		41	
		Pvt. Doctor/clinic		42	
		Pvt. Paramedic		43	
		Vaidya/hakim/homeopath (ayush)		44	

No.	Question	Coding categories	Code	Skip
		Traditional healer	45	
		Pharmacy/drugstore	46	
		Dai (TBA)	47	
		Other private sector	48	
		Health facility	49	
		Other		
		Shop	51	
		Home treatment	52	
		Others (specify_____)	99	
424.	Does any female person have membership of Self-Help Group (SHG)?	Yes	1	
		No	2	
		Don't know	3	
425.	Does the household have a ration card?	Yes (Card Shown)	1	
		Yes (Card Not Shown)	2	
	<i>(Please ask them to show the card)</i>	No	3	
		Don't Know	8	
426. (A)	ASK only If coded '1' in Q425	APL	1	
		BPL	2	
	Record from the ration card whether HH belongs to APL/BPL/AAY category– VERIFIED FROM RATION CARD	AAY	3	
		Not ascertained	4	
426. (B)	ASK only If coded '2' in Q425	APL	1	
		BPL	2	
	Ask the economic status of the household – SELF VERIFIED BY RESPONDENT	AAY	3	
		Not ascertained	4	
Instruction to interviewer: Please provide a copy of flyers to respondent				
Please save and submit the questionnaire				
Please carry the salt and urine sample as per protocol				
If respondent has been provided Rs.10 for the salt sample, ensure voucher is duly filled				

Thank you



Appendix 5: Transmittal sheet

Transmittal sheet
India Iodine Survey (IIS) - 2018-19

Conventions used in this document:

Interviewer instructions are presented in orange, bold, italics font.

Interviewer observations are presented in blue font.

Prepared by:

KANTAR

Submitted to:



TRANSMITTAL SHEET (ONE FOR EACH PSU)

1.	Please enter the name and code of the State	Name _____		
		Code : □□□		
2.	Please enter the name and code of the district	Name _____		
		Code : □□□		
3.	Please enter the name and code of the Block/ Sub District	Name _____		
		Code : □□□		
4.	Please select the type of the area	Urban	1	
		Rural	2	
5.	Please enter the name and code of the PSU (Village/ Ward)	Name _____		
		Code : □□□		
6.	Date of Interview (Sample Collection)	□□/□□/□□□□ (MM/DD/YYYY)		
7.	Please enter the name and code of the interviewer	Name _____		
		Code : □□□		
8.	Please enter the name and code of the Supervisor	Name _____		
		Code : □□□		

S No	Date of Specimen Collection	Sample Collected	Unique ID (Paste the sticker)	Category of Target Women (15-49 years) for Urine Sample Collection (PW: Pregnant Women LW: Woman with <6 month old child (who are currently breast feeding NPNLW: Women neither pregnant nor lactating women)	Date of Dispatch		Consignment Number	To be filled in by the Laboratory				
					From Supervisor	From Field Office		Status of Sample received by Lab 1. Intact Sample 2. Damaged Sample 3. Sample not received	Date of Sample received by lab?	Date of Test?	Test Result?	
		Salt Urine		PW LW NPNLW				Salt Urine		Salt Urine		
1.		<input type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				<input type="checkbox"/> <input type="checkbox"/>				
2.		<input type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				<input type="checkbox"/> <input type="checkbox"/>				
3.		<input type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				<input type="checkbox"/> <input type="checkbox"/>				
4.		<input type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				<input type="checkbox"/> <input type="checkbox"/>				
5.		<input type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				<input type="checkbox"/> <input type="checkbox"/>				
6.		<input type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				<input type="checkbox"/> <input type="checkbox"/>				
7.		<input type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				<input type="checkbox"/> <input type="checkbox"/>				
8.		<input type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				<input type="checkbox"/> <input type="checkbox"/>				
9.		<input type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				<input type="checkbox"/> <input type="checkbox"/>				
10.		<input type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				<input type="checkbox"/> <input type="checkbox"/>				
11.		<input type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				<input type="checkbox"/> <input type="checkbox"/>				
12.		<input type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				<input type="checkbox"/> <input type="checkbox"/>				
13.		<input type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				<input type="checkbox"/> <input type="checkbox"/>				
14.		<input type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				<input type="checkbox"/> <input type="checkbox"/>				

Appendix 6: Sampling errors of coverage of iodised salt in India and States /UTs for salt iodised at 15 to 30 ppm

India/ States/ UTs	Value (r)	Standard error (se)	Relative Standard Error (se/r)	DEFT	Unweighted count
All India	0.4140	0.0100	0.0243	2.9824	21406
Andaman & Nicobar Islands	0.3100	0.0494	0.1594	0.3154	600
Andhra Pradesh	0.4169	0.0431	0.1033	2.6010	600
Arunachal Pradesh	0.5140	0.0601	0.1170	0.5421	603
Assam	0.5531	0.0153	0.0276	0.7049	601
Bihar	0.4738	0.0459	0.0968	3.6008	600
Chandigarh	0.2971	0.0266	0.0897	0.2634	600
Chhattisgarh	0.5732	0.0225	0.0392	1.0519	600
Dadar & Nagar Haveli	0.4676	0.0349	0.0747	0.1859	601
Daman & Diu	0.3563	0.0465	0.1304	0.2493	600
Delhi	0.2811	0.0388	0.1380	1.4332	611
Goa	0.6633	0.0568	0.0856	0.7241	601
Gujarat	0.4817	0.0370	0.0768	2.6696	600
Haryana	0.3832	0.0351	0.0915	1.5446	601
Himachal Pradesh	0.3739	0.0479	0.1280	1.1270	600
Jammu & Kashmir	0.0233	0.0136	0.5838	1.3102	355
Jharkhand	0.4157	0.0441	0.1060	2.1078	600
Karnataka	0.4118	0.0319	0.0775	2.5283	601
Kerala	0.2737	0.0345	0.1261	1.9561	601
Lakshwadeep	0.3448	0.0416	0.1206	0.0921	600
Madhya Pradesh	0.4052	0.0287	0.0709	2.0733	603
Maharashtra	0.4691	0.0404	0.0862	3.7463	600
Manipur	0.1366	0.0217	0.1591	0.4349	600
Meghalya	0.2734	0.0651	0.2382	1.1471	600
Mizoram	0.0153	0.0077	0.5047	0.3116	605
Nagaland	0.2802	0.0576	0.2056	0.7919	600
Odisha	0.5206	0.0615	0.1182	3.2386	601
Pudhucherry	0.2858	0.0301	0.1053	0.3543	600
Punjab	0.4084	0.0387	0.0948	1.8195	600
Rajasthan	0.3959	0.0284	0.0718	2.0730	604
Sikkim	0.4438	0.0487	0.1097	0.3142	600
Tamil Nadu	0.2357	0.0360	0.1528	3.1984	610
Telengana	0.3355	0.0394	0.1176	2.3009	600
Tripura	0.4514	0.0262	0.0581	0.4677	608
Uttar Pradesh	0.4220	0.0242	0.0573	2.5565	600
Uttarakhand	0.4214	0.0699	0.1660	1.8007	600
West Bengal	0.4516	0.0422	0.0935	3.2671	600

Appendix 7 : Sampling errors of coverage of iodised salt in India and States /UTs for salt iodised at ≥ 15 ppm

India/ States/ UTs	Value (r)	Standard error (se)	Relative Standard Error (se/r)	DEFT	Unweighted count
All India	0.7633	0.0112	0.0146	3.8460	21406
Andaman & Nicobar Islands	0.9685	0.0111	0.0114	0.1867	600
Andhra Pradesh	0.6389	0.0598	0.0937	3.7097	600
Arunachal Pradesh	0.9404	0.0147	0.0156	0.2792	603
Assam	0.8519	0.0216	0.0254	1.3952	601
Bihar	0.7289	0.0415	0.0570	3.6623	600
Chandigarh	0.9647	0.0085	0.0088	0.2087	600
Chhattisgarh	0.9298	0.0135	0.0145	1.2218	600
Dadar & Nagar Haveli	0.8622	0.0292	0.0338	0.2249	601
Daman & Diu	0.7426	0.0356	0.0480	0.2095	600
Delhi	0.8726	0.0420	0.0481	2.0909	611
Goa	0.9681	0.0114	0.0118	0.3912	601
Gujarat	0.8014	0.0354	0.0442	3.2005	600
Haryana	0.8672	0.0179	0.0206	1.1294	601
Himachal Pradesh	0.7390	0.0456	0.0617	1.1825	600
Jammu & Kashmir	0.9982	0.0018	0.0018	0.6165	355
Jharkhand	0.6884	0.0536	0.0779	2.7293	600
Karnataka	0.7460	0.0418	0.0560	3.7423	601
Kerala	0.9381	0.0172	0.0184	1.8053	601
Lakshwadeep	0.9192	0.0168	0.0183	0.0648	600
Madhya Pradesh	0.7326	0.0380	0.0519	3.0451	603
Maharashtra	0.8472	0.0287	0.0339	3.6908	600
Manipur	0.9954	0.0026	0.0027	0.2675	600
Meghalya	0.9843	0.0072	0.0073	0.4523	600
Mizoram	0.9919	0.0047	0.0048	0.2618	605
Nagaland	0.9970	0.0029	0.0029	0.3297	600
Odisha	0.6583	0.0654	0.0994	3.6272	601
Pudhucherry	0.6992	0.0302	0.0432	0.3504	600
Punjab	0.8512	0.0374	0.0439	2.4265	600
Rajasthan	0.6546	0.0495	0.0756	3.7139	604
Sikkim	0.9814	0.0062	0.0063	0.1476	600
Tamil Nadu	0.6190	0.0632	0.1021	4.9072	610
Telengana	0.7974	0.0479	0.0601	3.2834	600
Tripura	0.7400	0.0314	0.0424	0.6354	608
Uttar Pradesh	0.7233	0.0368	0.0508	4.2909	600
Uttarakhand	0.8410	0.0381	0.0454	1.3260	600
West Bengal	0.7994	0.0302	0.0378	2.9045	600

The India Iodine Survey 2018 - 19 is a first-of-its kind national level survey covering 21,406 households in 702 primary sampling units (PSUs) in 29 states and 7 union territories of India to estimate household coverage of iodised salt and urinary iodine concentration among women in the reproductive age (15 - 49 years).



Nourish Life

Nutrition International
B-28, Second floor, Tara Crescent
Qutab Institutional Area
New Delhi – 110016, India
+91 11 46862000 +91 11 46862048
www.nutritionintl.org

Canada

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