

Self-Reported Health Status and Its Consistency: Evidence from India

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Abstract : In India, the increase in share of aged has generated many social and economic issues, of which health concerns is a major challenge that society must confront in coming years. Self-reported health (SRH) is a popular health measure in this regard but has been questioned in recent years due to its heavy dependence on the socioeconomic status. So, the validity of SRH, as a measure of health status during old age, is needed to be verified. This paper emphasizes on the self-reported health and related inconsistent responses among elderly in India. The objective of the study is bifurcated into two parts: firstly, to identify the socioeconomic determinants of subjective health status and its change over time; and secondly, to analyse the role of the socioeconomic components in providing inconsistent responses regarding the health status of elderly. Inconsistency in response can rise in two ways: positive response bias (if an individual has a health problem but reports his/her health as good) and negative response bias (if bad health is reported even if there is no health problem). However, in the present study, we focus only on the negative response bias of elderly individuals. To measure the inconsistencies in responses, self-reported health is compared with two types of physical health conditions - existence of chronic ailment and physical immobility. Using NSS dataset of 60th and 71st rounds, the study found that subjective health has worsened over time in both rural and urban areas. Findings suggest that inconsistency in responses, related to chronic ailment, vary across social classes, living environments, geographical regions, age groups and education levels. On the contrary, variation in inconsistent responses regarding physical mobility is quite rare and difficult to explain by socioeconomic characteristics because most of the indicators are found to be insignificant in this regard. The findings indicate that in case of chronic ailment, inconsistency between objective and subjective health status largely depends on socioeconomic conditions but the importance of such factors disappears for physical immobility.

Keywords : India, aging, self-reported health, inconsistent responses

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